

**FY2022 Continuum of Care**

**New 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 New Project Application for each program.

This form is due on **Wednesday, August 31, 2022 at NOON** by e-mail to 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 or call 608-266-6254.

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

|  |  |
| --- | --- |
| Agency Name |  |
| Project Name |  |
|  |  |
| Project Contact Name |  |
| Phone Number |  |
| E-Mail |  |

|  |  |
| --- | --- |
| Funding Request |  |
| Proposed # of Units |  |
| Proposed # of Beds |  |
| DV Bonus Project – Yes or No?  |  |

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| --- |
| **Threshold Criteria** |
| Does the agency have any outstanding HUD monitoring findings? If yes, please provide explanation. | \_\_Yes \_\_No |
| Does the project comply with the [CoC Interim Rule 24 CFR 578](https://www.in.gov/ihcda/files/housing-urban-dev-24-cfr-part-578.pdf)?  | \_\_Yes \_\_No |
| Does the agency have a SAM.gov registration?  | \_\_Yes \_\_No |
| Does the agency have an active Unique Entity ID (formerly DUNS Number)?  | \_\_Yes \_\_No |
| Does the agency have any delinquent federal debt? If yes, please provide explanation. | \_\_Yes \_\_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. | \_\_Yes \_\_No |
| 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 on becoming an HMIS agency by the YHDP project implementation start date in the narrative below. | \_\_Yes \_\_No |
| Does the agency commit to participating in system-wide continuous quality improvement activities?  | \_\_Yes \_\_No |
| Does the agency agree to participate in the [Coordinated Entry System](https://www.danecountyhomeless.org/coordinated-entry) and follow Coordinated Entry [policies and procedures](https://www.danecountyhomeless.org/_files/ugd/73dee7_e4c12835ebd34575a0d566833b7ad279.pdf)?  | \_\_Yes \_\_No |
| Does the agency agree to follow the [Dane CoC Written Standards](https://www.danecountyhomeless.org/governance)? | \_\_Yes \_\_No |

**Please answer the following questions:**

*Project applications will be reviewed based upon adherence to the HUD CoC Program Interim Rule and FY22 CoC NOFA.*

1. Please describe how your project takes proactive steps to minimize or overcome barriers to housing retention.
2. Describe your agency’s overall quality improvement efforts. Please include how you solicit and incorporate feedback from program participants.
3. CoC-funded projects are required to comply with the Dane County Written Standards. Describe how the agency plans on ensuring compliance with the Written Standards including plans for internal review and monitoring of project policies and practices.
4. All projects, including non-housing projects, must operate with the Housing First approach as described in the CoC Written Standards general requirements. Describe how the Housing First approach will be applied to the proposed project. Include aspects of project policies and staff training that can support the Housing First approach such as trauma-informed care and harm reduction.
5. Describe key partnerships your agency has established that will help with implementation of this project.
6. What percentage of staff members identify as Black, Indigenous or a Person of Color?
7. How does this program work against systematic racism and other structures of oppression?
8. How will this program and its practices be culturally responsive to the population(s) who participate?
9. 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?
10. How did you hear about the CoC funding opportunity? (INFO ONLY)

**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. 84-86 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 form a healthcare organizations that:

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

 -the value of assistance being provides 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.