



**Homeless Action Network of Detroit**  
***Request for Qualifications (RFQ) Guidelines:***  
***Coordinated Assessment Model (CAM) Lead Agency***

## **I. Introduction**

Coordinated Access and Assessment is the critical next step for Detroit moving forward in professionalizing homeless service delivery. A community-based approach to delivering this service is in the best interests of all homeless people in our community and fellow housing and homeless service providers.

HAND is seeking proposals from agencies interested in applying to become the Coordinated Assessment Model (CAM) Lead Agency. The CAM Lead Agency will be the responsible entity to begin implementation of the coordinated assessment and referral process for Detroit's homeless system, starting with the homelessness prevention, rapid re-housing, and emergency shelter sectors of the system and then expanding the process to transitional housing and permanent housing programs at a later date. The CAM Lead Agency will assume an increased presence in the community, working dynamically and effectively with HAND and housing and homeless service providers to achieve excellence.

Designation as the CAM Lead Agency and any applicable funding award will occur through a competitive RFQ process.

## **II. Coordinated Assessment Model**

Under the HEARTH Act legislation, all Continuums of Care (CoC) are required to establish a coordinated assessment system which is comprehensive, accessible, and standardized. It is a systemic approach to homeless programming that focuses on aligning the needs of households that are experiencing homelessness with the *best program* to address *their* needs.

Through the common assessment and coordinated access approach, households that are in need of homeless assistance are directed to a common access point where they are assessed using a common tool. Based on the thorough assessment, a *coordinated* referral is made to the most appropriate service provider.

CoCs that have implemented such a system have seen greater accessibility to programs for households in need of assistance, better alignment of resources with community need, and reductions in homelessness.

Households are also seeing better outcomes as it is no longer left to chance that they are receiving the most appropriate services available given their needs. Likewise, service providers are not burdened with program eligibility determination activities. Accurate referrals allow them to do what they do best – provide much needed services and housing.

For Detroit, the opportunity to have coordinated access and common assessment is embraced as more than just a federal requirement. Through recent initiatives to enhance performance excellence in our community, we have come to better appreciate the diversity of service providers and the challenge of the city's geography. The current format to service delivery presents a disadvantage to many segments of the homeless population that experience frustration, delays, and setbacks trying to navigate the current system on their own or with only minimal supports. In addition, the current approach to connecting people across services is not leveraging the strengths of service providers to best meet the needs of the populations their mandates and values have expressly indicated they aim to serve. Furthermore, homeless individuals and families in the current service delivery system repeatedly have to share their information over and over without having needs assessed or linked to the program best designed to meet their presenting issues. This new approach will intentionally address many of these pressing concerns.

To shape the implementation in Detroit, a series of community forums, technical assistance from consultants, and discussions with funders were held over the course of a year. The experience of other jurisdictions was also reviewed. HAND is confident that the range of perspectives on coordinated access and common assessment have been heard and carefully considered in moving forward for our community. It is acknowledged that more will be learned and greater refinement in program delivery will occur through the implementation of the CAM. The attached document (Appendix B) illustrates the plans for Phase I of Detroit's implementation, which is expected to occur in a series of four phases. By August of 2014, it is expected all four phases of the CAM will be operational.

### **III. Description of the CAM Lead Agency**

#### **Part One: Characteristics of the CAM Lead Agency**

The CAM Lead Agency will be expected to exemplify the following characteristics:

- *Communicators* – the CAM Lead Agency must be able to communicate effectively with HAND, service providers, and people experiencing or at imminent risk of experiencing homelessness. The staff within the CAM, as well as the CAM Lead Agency as a whole, must excel at open, transparent communication.
- *Problem Solvers* – the CAM Lead Agency, especially in the early stages of implementation, is most likely to be in a position of solving problems at a structural/system level in concert with HAND, as well as solving problems at the operational level in working with service providers and current and prospective service users. HAND is looking for a CAM Lead Agency that has a solution-focused mindset in addressing barriers. HAND is looking for a CAM Lead Agency that sees problem solving as an opportunity for active, experiential learning. Furthermore, HAND is seeking a CAM Lead Agency that has the acumen to understand when it is appropriate to solve problems independently, and when problems require a more fulsome system-based discussion to reach resolution.
- *Knowledge Conduits* – the CAM Lead Agency must be viewed as knowledgeable of the entire homeless and housing service delivery system in Detroit. This knowledge is best when there is a macro view of various homeless sub-populations; working knowledge of an array of government

agencies, programs and initiatives; broad view of the city as a whole; and, the ability to make the knowledge operational for end users of services and service providers in real time. The CAM Lead Agency is not simply a repository of information – they must be a conduit to others learning the same information.

- *“Stick-with-it-ness”* – the CAM Lead Agency must embrace and exemplify characteristics of perseverance. Managing ambiguity while working to determine the best possible operations of the coordinated access and common assessment will be a challenge for any chosen CAM Lead Agency. While refinements can and should be made, there cannot be knee-jerk reactions in the infancy of the program or else the value of the functions will collapse. The maturity, patience, grace and critical thinking skills needed to achieve the goals of the CAM must be ingrained in the CAM Lead Agency.
- *Practice Strength-Based Case Management* – the CAM Lead Agency must exude a service culture that looks at the strengths of households rather than focusing on deficits. While the CAM will be completing assessments of needs, this must be performed in an empowering manner focused on helping households achieve the best possible resolution to their homelessness.
- *Outcome Oriented* – the CAM Lead Agency is expected to be outcome oriented rather than output oriented. This means that the success of referrals and connectivity to community resources, that can truly change the household’s homelessness or risk of homelessness, is considered to be more important than outputs such as maintaining a high call volume with unknown outcomes.
- *Housing-Focused* – the CAM Lead Agency must promote housing as the first step in working towards resolving a household’s homelessness and/or other presenting needs, whereby acuity and level of service need will not prevent housing placement. The CAM will intentionally work to shorten the length of time a household is experiencing homelessness.

### **Part Two: Duties of the CAM Lead Agency**

Embracing the characteristics outlined above, there are specific duties that the CAM Lead Agency will be expected to perform. These duties are grouped together in three major components: Access; Assess; Assign.

#### **ACCESS**

In Phase One of this initiative, the CAM will be engaging with homeless families, and single individuals and families where prevention and/or rapid re-housing may be an appropriate service intervention.

Access shall occur through one of two main ways:

1. Telephone access – shelter, community providers, and/or a homeless individual/family can call into the CAM.
2. In-reach access – the CAM would have specialized mobile case managers that go into locations of service providers across Detroit.

#### **ASSESS**

Using a service flowchart and standardized prescreen assessment, which has already been drafted, assessment will be conducted with each individual/family attempting to access services. Consent will be obtained during this process to enter information into HMIS.

During Phase One of this initiative, single individuals seeking shelter or housing assistance other than rapid re-housing or prevention, will not be serviced through CAM. These individuals will be referred to other resources. This also applies for families that access the CAM for a non-housing/non-shelter need.

For those accessing the CAM that do meet the service criteria for Phase One, there are several possible service scenarios based upon housing or shelter status at time of call. The support assessment is informed by these states:

1. Unsheltered homeless – attempts will be made to divert the caller to a more stable environment. If the household being assessed cannot be diverted, but also does not want shelter, they shall be referred, as best as possible, to other resources. If the household being assessed cannot be diverted and wants shelter, they shall have an intake for shelter completed, undertaking the following tasks:
  - a. Examining the best shelter fit based upon presenting needs;
  - b. Searching the HMIS available bed list;
  - c. Making contact with the shelter for the household;
  - d. Making the referral to the shelter for the household when contact confirms availability;
  - e. Arranging transportation when it is required.

Once placed in shelter these households that are still in shelter after 14 days are to have a full assessment completed by CAM staff. The full assessment is a standardized approach to understanding the acuity of the presenting issues. This standardized tool has already been created and the CAM Lead Agency will be trained on its use. Based upon the outcome of the full assessment, the household may be recommended for rapid re-housing, Permanent Supportive Housing, or encouraged to examine opportunities to get themselves out of shelter when the presenting needs are not particularly acute.

2. Sheltered homeless – there are two main groups expected to be assessed:
  - a. Admitted in shelter after hours or needs for other reasons.
    - i. This group will follow the shelter intake process or all other households seeking shelter as outlined in the Unsheltered Homeless category.
  - b. In shelter and would like to get assistance with housing.
    - i. If these households have been in shelter 14-30 days, CAM staff will work with the shelter staff to have a Prescreen completed. Based upon the results of the prescreen:
      1. If they are of lower acuity, the household will be encouraged to end their own homelessness, and may be referred to other community resources to assist in this regard as appropriate.
      2. If they are of moderate or higher acuity as per the Prescreen, CAM staff will complete a full assessment and determine if the household is a suitable fit for rapid re-housing, permanent supportive housing, or should be encouraged to end their own homelessness.
3. Precariously housed – these households are currently in housing and while they may present as being at risk of homelessness, have not become unsheltered homeless nor sheltered homeless yet. The first role of the CAM is to attempt to triage the situation and divert these households from needing to access shelter resources. Referrals to other community resources may be appropriate in these instances. When diversion is not possible, ESG initiatives may be considered based upon the presenting issues and eligibility of the household.

**ASSIGN**

The assignment function represents the connection between the presenting issues of the household as understood by the CAM staff and the solution that can prevent or end the household's homelessness. Navigating these resources in an environment where these resources may be considered scarce must be transparent, defensible, reasoned, strategic, and prioritized to those with the deepest needs first instead of first come, first served.

**Part Three: Additional Duties of the CAM Lead Agency**

In addition to the characteristics and expectations outlined in Parts One and Two of this section, the following are additional duties of the CAM Lead Agency.

- *Connections with Other Community Resources* – It is vital that the CAM Lead Agency have an understanding of, and connection to, a broad range of other community resources in addition to homeless resources. In the early stages of implementation of the CAM, it is understood that some of these connections will need to be developed; however, HAND also expects the CAM Lead Agency to already be familiar with many community resources (both for people who are homeless or at-risk), and for the agency to have a referral process in place for connecting people to resources outside their agency.
- *Housing and Services Database* – HAND is currently creating the housing and service database (Resource Point). CAM in collaboration with HAND will be regularly updating Resource Point of all homeless services programs that includes but is not limited to participant eligibility criteria, bed availability, funder requirements, etc. in order to refer clients to the most appropriate programs in the homeless system.
- *CallPoint to Capture Inquiries* – Utilize CallPoint, or a similar call center referral management system, to: record all inquiries received by the agency for prevention, shelter, and rapid re-housing; notate and categorize the content of each call; and, refer those in need of homeless services to the appropriate community providers.
- *ShelterPoint for Real-Time Shelter Bed Availability and Placement* – Utilize ShelterPoint, ServicePoint's method of managing shelter bed inventory, to view CoC-wide shelter bed availability and make referrals to shelter. Real-time data from ShelterPoint should provide CAM staff with the needed to make quick, accurate service records and informed referrals.
- *Report to the CoC body to ensure the quality of service delivery*
- *Additional duties pertaining to the Michigan State Housing Development Authority (MSHDA)*
  - Administer Financial Assistance and provide case management for MSHDA's Emergency Solutions Grant (ESG) program.
  - Responsible for entering eligible households on the MSHDA Housing Choice Voucher Homeless Preference waiting list.
  - Assist developers to ensure that case management services are available to new units made available through the Low Income Housing Tax Credit Program.

#### **IV. Co-Governance Structure**

The HEARTH Act requires that each Continuum of Care (CoC) implement a coordinated assessment process in their community. Therefore, as the Detroit CoC Lead Agency, HAND is responsible for implementing coordinated assessment for Detroit. Once the CAM Lead Agency is selected, HAND and the Lead Agency must work closely together to ensure that the coordinated assessment process is implemented in such a way that meets HEARTH Act requirements in addition to the needs of the Detroit Continuum of Care, including its consumers, service providers, government partners and other key stakeholders.

HAND expects to oversee the coordinated assessment process implementation for the short- and long-term future of the project. HAND may use existing staff and/or develop a workgroup of stakeholders to provide the oversight activities listed below. HAND's involvement will include, but may not be limited to:

- *Process Improvement* – frequently reviewing the standard operating procedures to ensure procedures are effective and that the coordinated assessment process is functioning properly; HAND will also ensure that the CAM Lead Agency is adhering to the standard operating procedures
- *Quality Control* – reviewing assessments and HMIS data to ensure households presenting for services are being consistently assessed and referred to appropriate programs that end their housing crisis
- *Performance Management and Evaluation* – evaluating the performance of the CAM Lead Agency
- *Grant Compliance* – monitoring grant activities and expenditures to ensure compliance with various grants the CAM may receive directly or passed-through by HAND; this work will be done in combination with other funders that support the coordinated assessment process
- *Best Practice Implementation* – examining and implementing local, state, and national best practices in coordinated assessment that are promoted and/or developed by HUD, USICH, NAEH, and other key national organizations and government departments involved in ending homelessness
- *Grievances* – responding to grievances regarding the operation of the coordinated assessment process and the conduct of the CAM Lead Agency

The oversight activities discussed above try to depict the intimate relationship that HAND, as the Detroit Continuum of Care, and the CAM Lead Agency, as the implementing agency, will be required to develop and maintain over time as the coordinated assessment process is implemented.

#### **V. Anticipated Staffing**

The duties performed by the CAM Lead Agency will be within an environment that will “staff up” as the various Phases of the CAM are operationalized. When all four phases are in place, staffing will be in the neighborhood of 30-35 staff. These staffing estimates may fluctuate based on several factors including funding availability and actual demand. Staffing needs will be reviewed throughout implementation for optimal performance.

In Phase One, it is expected that 6-10 staff should be sufficient to test the model and lay the groundwork for success in future Phases. Below is the proposed staffing for Phase One of CAM Implementation. It is expected that HAND will work closely with the selected agency to refine job descriptions. HAND may also participate in the selection and supervision of CAM management positions.

**Director (1 FTE):**

Provide supervision and oversight of CAM staff and operations, monitor quality assurance, oversee compliance and reporting, develop program policies in coordination with HAND.

Minimum Skills and Experience:

- MSW or equivalent education with clinical experience (5 years plus) including 3 plus years of supervisory experience
- Experienced in Service Point and data entry
- Extensive problem solving skills to address complex housing needs of families seeking shelter and/or singles seeking prevention and rapid re-housing assistance
- Experienced in budget development and oversight
- Experienced in grants management and compliance
- AIRS certified or the ability to become certified within 90 days of hiring

**Intake Coordinator (3-5 FTEs)**

Intake Coordinators will screen households for eligibility for CAM resources and/or make referrals to other community resources. This staff will be the first point of contact for households experiencing homelessness. Intake Coordinators will also develop and maintain a community resources database.

Minimum Skills and Experience:

- Bachelor's Degree in Social Work or equivalent education with 3-5 years' experience in conducting intakes for households experiencing homelessness
- Knowledgeable about various housing programs and other complementary resources (eligibility guidelines, program models, etc.) for families experiencing homelessness and or singles seeking prevention and rapid re-housing supports
- Ability to problem solve and understand the complex needs of families experiencing a housing crisis and singles at-risk of homelessness
- Knowledgeable in Service Point with data entry experience

**Housing Case Manager (3-4 FTEs)**

Often the second point of contact, Housing Case Managers will use a standardized assessment tool to conduct housing assessments for households that were deemed eligible based on the screenings performed by Intake Coordinators. Housing Case Managers may be co-located at various shelters or other appropriate community offices, in which case they may serve in a dual role as the Intake Coordinator and Housing Case Manager. The Housing Case Manager will initiate a housing plan, refer to the best-matched available housing option, and work with the referral partner to transition the household and housing plan.

Minimum Skills and Experience:

- Extensive Problem solving skills to address complex housing needs of families seeking shelter and/or singles seeking prevention and rapid re-housing assistance
- Knowledgeable of various housing programs and other complimentary services (eligibility guidelines, program models, etc.)
- MSW or equivalent education with clinical experience (3 years plus)

- Experienced in Service Point and data entry
- Experienced in Housing First, Strengths-Based Case Management, and Person-Centered Planning
- Three to five years' experience in conducting intakes for households experiencing homelessness

## VI. Goals and Expected Outcomes

By coordinating resources and streamlining the process through the use of common forms, processes, and assessments for each household and program, households are expected to be directed to the most appropriate resources to address their housing crisis. The following goals are expected to be realized:

### Short-Term Goals (Less than a year)

1. **Accessible:** Using a phone-based and field operations approach illustrated in Appendix B the CAM Lead Agency will ensure uniform access to homeless services for the population groups to be served in Phase One. It will be user friendly, client-focused, and a community-recognized point of access for homeless services. Hours of operation will need to be determined; however, the expectation is that they extend beyond the normal business day (weekend and evening hours). Also, a policy will need to be established for after-hours protocol. The CAM Lead Agency will participate in promoting the accessibility of the resource.
2. **Comprehensive:** While the first phase of CAM will focus on families in need of temporary shelter and/or prevention and rapid re-housing assistance, as well as single individuals seeking prevention or rapid re-housing supports, the CAM will expand in the future to serve single households and all program types (i.e. transitional housing, permanent supportive housing, etc) and multiple partners (i.e. Michigan State Housing Development Authority, Michigan Department of Human Services, etc). Therefore, the CAM Lead Agency will be expected to have capacity to manage *all* phases of implementation. Throughout the first year, the CAM must be able to demonstrate capacity for effective growth in the future to enhanced staffing and service volumes.
3. **Standardized:** Intakes and assessments will only be conducted by the CAM Lead Agency utilizing the developed assessment tool. Training will be provided to the CAM Lead Agency on how to use the tools. Information and data from the use of the tools will help inform future service delivery.
4. **Coordinated Referrals:** Using HMIS, inter-agency connections, and conference meetings, the CAM Lead Agency will work with service providers to link the households seeking services to the appropriate service provider. CAM staff will work with the service provider to transition the housing plan developed by CAM. HAND and CAM Lead Agency will monitor the accuracy and appropriateness of referrals and goals of the housing plan.
5. **Collaborative Partnerships:** Strong relationships with service providers and mainstream resources will be essential in the operation of the CAM. The CAM Lead Agency will be expected to strengthen existing and build new relationships.



### Longer-Term Goals (One year or more)

After the CAM has been in operation for 12 consecutive months, additional goals will also be included in service delivery. For each of these goals, additional benchmarks will be established and incorporated into future service contracts with the CAM. The Longer-term goals are as follows:

1. ***Enhance Diversion:*** Throughout the first year, it is expected that the CAM will gain knowledge in effective approaches to diverting households that are accessing resources, where and when it is appropriate to do so. After one year, based upon what has been gleaned from year one, it is expected that homeless resources will be targeted to those most in need. CAM Lead Agency will work with households to identify the most appropriate resources for a housing crisis resolution. This may include the use of non-homeless resources. Furthermore, diversion is likely going to place greater emphasis on prioritization of resources, ensuring those with the greatest needs are served first.
2. ***Reduction in Recidivism:*** Through the attachment of households to the resource best equipped to handle the presenting housing needs of the household, it is expected that returns to homelessness (recidivism) will decline in the future. As the CAM and local service agencies gain knowledge of how best to assess and serve households in the first year of service delivery, it is expected that connections and housing stability shall continue to improve in the future.
3. ***Reduction in Length of Time Homeless:*** Through the initial assessment and connection of more thorough assessment resources to households remaining in households beyond 14 days, it is expected that:
  - a) Those households that can end their own homelessness will do so rapidly;
  - b) Housing crisis will be resolved more quickly for those households that require additional supports to do so.
4. ***Reduction in Homelessness:*** Overall, the coordinated access and common assessment being applied in Detroit should reduce homelessness throughout the community. Part of this may be attributed to diversion. Part of this may be attributed to the connection to appropriate resources to assist with ending each household's homelessness when additional resources are required to do so. Throughout this process, it is important that the relative needs of households are considered so that those households with deeper needs, including those that experience chronic homelessness, are better served.
5. ***Full Implementation within One Year:*** As CAM is a new approach for the Detroit CoC, it is being developed in four phases (which are outlined in Appendix B). The phased approach will allow the CoC to better manage the implementation of such a significant change by allowing for feedback and adjustments throughout. Planning for the four phases will occur concurrently rather than simultaneously to ensure that all four phases of the CAM will be fully operational by August 2014. While the RFQ addresses Phase I, it is expected that the CAM Lead Agency will assist in the planning and implementation for Phases II through IV.

## **VII. Connection to Statewide Initiatives**

In addition to conducting assessments and coordinating referrals, the CAM Lead Agency will also serve as the Housing Assessment and Resource Agency (HARA) for the Michigan State Housing Development Authority (MSHDA) and the State Department of Human Services (MI DHS) beginning in October 2013.

Like CAM, the HARA is the “one recognized central point of entry/intake and assessment to ease the process of applying for resources.”

There is currently **\$255,000** in MSHDA ESG funding that is expected to flow through the HARA model for direct financial assistance (i.e. security deposits, rental assistance, etc.) for program participants. For more information regarding the HARA or MSHDA ESG, please refer to the most current MSHDA ESG NOFA, which can be accessed by [clicking here](#).

### VIII. Community Coordination Across Funding Sources

The CAM process will be used for various funding sources that support programs in the CoC. Therefore, the agency that will be carrying out the coordinated assessment process will be required to meet **ALL** of the following expectations from different funding sources that require the use of the coordinated assessment process. The funding sources that have currently identified roles and responsibilities for coordinated assessment include:

- *U.S. Department of Housing & Urban Development (HUD):* Continuum of Care funding (formerly known as SHP or S+C funding);
- *Michigan State Housing Development Authority (MSHDA):* Emergency Solutions Grant funding (ESG);
- *Michigan Department of Human Services (DHS):* Emergency Shelter Program (ESP); and,
- *City of Detroit:* Emergency Solutions Grant funding (ESG)

Summary chart of programs subject to the coordinated assessment process:

The chart below provides a summary glance at the scope of funding, programs, beds, and services that will be *subject to* the coordinated assessment process.

Note: The “number of programs” and “number of beds funded” under each funding type is not duplicated. That is, a program or bed could be counted under more than one funding type, as organizations often use multiple sources of funding to support their programs.

<b>Funder</b>	<b>Name of Program</b>	<b>Amount of Funding Subject to CA process (approx.)***</b>	<b># of grantees currently receiving these dollars</b>	<b># of programs currently funded</b>	<b># of beds funded</b>
HUD	CoC (formerly SHP/S+C)	\$24 million	21	60	TH: 900 PSH: 1,750*
MSHDA	ESG	\$430,000	3**	3**	n/a
MI DHS	ESP	\$4 million	14	15	ES: 1,300
City of Detroit	ESG	\$1-3 million	16	19	Approximately 100

\*Does not include additional beds underdevelopment as of April 2012

\*\*As of October 1, 2013, the CAM Lead Agency will serve as the HARA. Therefore, the number of grantees will only be 1 (opposed to 3 currently)

\*\*\* Please note: MSHDA ESG dollars are available to the CAM Lead Agency. The rest of the identified funding is allotted to cover program expenses of the grantees of each of the identified funders.

## **IX. Funding**

The CAM Lead Agency will receive grant funding from HAND, MSHDA ESG, the City of Detroit and other resources to function in the role. Resources for start-up and first phase operating expenses are anticipated to total approximately \$420,000. An additional \$255,000 in MSHDA ESG funds will be provided; however, these funds are for direct financial assistance (utility payments, rental arrears, etc) for client assistance only.

Please note: As the responsibilities of the CAM Lead Agency will extend beyond what can be funded, applicants are expected to match and leverage other resources to implement this coordinated assessment process. A listing of estimated resources needed for successful implementation by the CAM Lead Agency can be found in Appendix A.

## **X. HMIS Infrastructure Requirements:**

### HMIS Experience

The selected CAM Agency must have the following experience with HMIS, which will be verified by HAND:

- The agency is currently using ServicePoint and has at least two (2) years' experience entering data into ServicePoint.
- The agency must have signed a Participation Agreement and QSOBAA Sharing Agreement with HAND indicating their willingness to implement HMIS and abide by the HMIS Policies and Procedures Guide.
- All users (including Agency Administrator) must have attended the HMIS User Training and Privacy Training. Upon completion of the training, each ServicePoint user must have signed a User Agreement and must have a copy on file within the agency's HMIS folder.
- The agency must have adopted the CoC Sharing Agreement and is sharing services with all participating agencies in the CoC.
- It is imperative that the selected agency meets the HMIS Data quality standards as stated in the HMIS policies and procedures.
- The Agency must have appointed at least one (1) Agency Administrator. The Agency Administrator must be attending the monthly Agency Administrator meetings. He/She must have configured the Agency's provider pages in ServicePoint. Also, the Agency Administrator must run reports monthly using the HMIS Advanced Reporting Tool (ART).

## **XI. Reporting Requirements**

The CAM Lead Agency will be expected to fulfill all reporting requirements as outlined in the service contract. Reporting requirements will include both financial and service delivery elements, at predetermined intervals throughout the funding year.

The CAM Lead Agency must be able to meet all reporting requirements in a timely and accurate manner.

## **XII. Contract Terms**

HAND expects that the agency selected to be the CAM Lead Agency through this RFQ process will fulfill the role as Lead Agency unless HAND has concerns with the agency's performance or administration of funding.

Multiple funding sources will be used to fund CAM operations; therefore, contract terms will be dependent upon these funders' requirements. Contracts will be renewable at the end of the term based on satisfactory performance, funding availability, and funder requirements.

## **XIII. Minimum Eligibility Criteria**

In order to be eligible to apply for the Coordinated Assessment Model Lead Agency an organization must meet the following criteria. Organizations that do not meet these criteria will not be considered:

1. Application was received by the deadline stated (both paper and electronic copy), with the required number of copies.
2. Applicant is a 501c3 organization, as indicated by the inclusion of 501c3 letter in application materials.
3. Applicant attended the RFQ workshop held on March 6, 2013, as indicated by attendance record at RFQ workshop.
4. Applicant is a current member of HAND, as indicated by up-to-date membership dues. Payment of 2012 *or* 2013 membership dues will meet this requirement.
5. Applicant has been involved with HAND for at least the last year, as indicated by attendance at, or participation in:
  - a. At least three of bi-monthly HAND meetings held between Jan 2012 – Jan 2013 AND,
  - b. The November 2012 annual Walk Against Homelessness; *or*
  - c. The January 2013 Point-in-Time Count; *or*
  - d. Other meetings or events held by HAND in 2012
6. Applicant has been using the Homeless Management Information System (HMIS) for at least the past two (2) years, and is compliant with HMIS, as indicated by:
  - a. Having a signed Participation Agreement currently on file with HAND
  - b. Having a signed QSOBAA currently on file with HAND
  - c. Having end-users who are currently entering data in accordance with HMIS Policies and Procedures
7. Applicant has submitted their most recent organizational financial audit for the last two years. No significant findings or concerns are identified.
8. Applicant must have completed the HAND CoC Provider Program Inventory for **ALL** programs reporting in HMIS. For more information, please contact Kiana Harrison at [kiana@handetroit.org](mailto:kiana@handetroit.org).

#### **XIV. Competitive Characteristics**

In addition to the minimum eligibility criteria outlined in Section XIII, competitive applicants will have the following characteristics:

1. At least five years' experience providing services to people who are homeless or at-risk of becoming homeless.
2. Experience providing assessment referrals/case management services, and crisis intervention specifically targeted to people who are homeless or at-risk of homelessness.
3. Demonstrated financial capacity to operate a large, system-wide function.
4. Considered a *leader* in the community with the ability to collaborate, coordinate and partner with other local organizations.
5. Established relationships with other services providers in the community.
6. Demonstrates that the agency currently operates its programs in a coordinated and effective manner, and does not currently have any intra-agency silos.
7. Good standing with current contractors, both public and private.
8. Multicultural competency and bilingual capabilities; ideally with a diverse staff that mirrors the local homeless family population or ability to recruit/hire a culturally diverse staff for CAM.
9. Sufficient readiness to implement within the proposed timeframe.
10. Demonstrated ability to administer direct financial assistance.
11. Strong internal agency competencies, including but not limited to:
  - a. Program and financial review capabilities
  - b. Effective management infrastructure
  - c. Operational/program policies and procedures
  - d. Human Resource policies and procedures
  - e. Transparent processes for addressing internal and external conflicts
  - f. Functioning Board of Directors
  - g. Worker safety policies and procedures
  - h. Privacy and confidentiality policies and procedures

#### **XV. Selection Process**

All proposals received by the deadline and in the given format (see below for details) will undergo a two-step review process.

##### Threshold Review

Applicants will first undergo a threshold review, to ensure they meet the minimum eligibility requirements. Applicants that fail to meet *all* of the minimum eligibility requirements, as outlined in Section XIII above, will not be given further consideration.

HAND staff will review the applicant's materials, as well as HAND's internal records, to determine if the application meets the minimum eligibility threshold requirements. Applications that meet the minimum eligibility requirements will go on for a full review by the project review committee.

##### Full Review

In general, the decision for which applicant will be designated the CAM Lead Agency will be made based

upon the overall score received on the application. Following are some of the key aspects on which applications will be reviewed (note this is not an exhaustive list):

1. Experience in serving people who are homeless or at-risk of homelessness
2. History of working collaboratively and in a coordinated manner with other service providers
3. Successes in serving people who are homeless or at-risk of homelessness
4. Capacity and readiness to implement the CAM
5. Demonstrated ability to successfully manage federal and/or state funding

HAND's project review committee will review and score applications. Based upon the scores and discussion within the review committee, a recommendation will be made to HAND's Board of Directors on which organization should be selected as the CAM Lead Agency. The Board of Directors will make the final decision.

Additional details on the weighting of scoring for different aspects of the application will be provided at the RFQ workshop.

## **XVI. RFQ Workshop and Submission**

### Mandatory RFQ Workshop

Agencies must attend the mandatory RFQ workshop to be held ***March 6, 2013 from 1:30pm to 3:30pm*** at the Housing Resource Center (1600 Porter, Detroit, MI 48216).

### Submission Details

Agencies interested in applying to be the Coordinated Assessment Model Lead Agency must submit a proposal responding to the RFQ. The proposal is not to exceed 30 pages (single spaced, minimum 11 point font and one-inch margins for all Word documents). ***Proposals are due no later than 4:00pm on March 22, 2013.*** Proposals must be submitted in paper AND electronic format:

- Paper proposals must be submitted in-person or mailed to 1600 Porter, Detroit, MI 48216. One (1) original (marked "Master Copy") and (4) copies must be submitted.
- One (1) electronic copy of the proposal including the budget and accompanying attachments must be emailed to Amanda Sternberg at [Amanda@handetroit.org](mailto:Amanda@handetroit.org).

Complete proposals must include the following information:

- Proposal Narrative (Parts A-B)
- Required Documents (Part C)
- Budget Forms (Part D: Excel Workbook)

### **All submittals are due no later than March 22, 2013 by 4:00pm:**

- Late applications will not be accepted or reviewed.
- Faxed copies of the application will not be accepted or reviewed.
- All copies of the application package (paper and electronic) must arrive at the above location by the submission deadline in order to be considered for funding.
- Applications that do not arrive at the specified address by the submission deadline will not be accepted or reviewed.
- Use a minimum of 11-point font and one-inch margins for all Word documents.

- Do not use staples or any other fixed material to bind proposal (i.e. spiral binding). Three-hole binders or binder clips are acceptable.

**XVII. Expected Timeline for Coordinated Assessment Implementation**

- February 25, 2013: RFQ Released
- March 6, 2013 from 1:30pm to 4:30pm: RFQ Workshop
- March 22, 2013 by 4:00pm: RFQ Due
- May 2013: CAM Lead Agency Selected
- May – June 2013: Lead Agency Orientation and Training
- June 2013: CAM Implementation (Phase I)
- August 2014: Full CAM Implementation (Phases I through IV)

## Appendix A: Estimated Resources needed for CAM Lead Agency

	<b>Estimated Resources Needed for Phase 1 Implementation</b>	<b>Estimated Resources Needed for FULL Implementation (all phases)</b>
Director	1 FTE	1 FTE
Intake Coordinator	4 – 5 FTEs	15 FTEs
Housing Case Manager (may include a supervisor)	3 - 4 FTEs	15 FTEs
Administrative Assistant	1 FTE	2 FTEs
HMIS Administrator	.5 FTE	1 FTE
Part-time On-call PC/Phone support technician	.1 FTE	.1 FTE
Laptop Computers w/docking station, monitors & mice	11 systems	20 systems
Tablets equipped with internet access	5 tablets	15 tablets
Laser printers	2	3
High-speed internet connection/router	1	1
ServicePoint Licenses	11	35
Telephones (land-lines)	11	36
Cell phones	11	30
Office desks/chairs	11	36
Chairs for clients	20	30
Copier machine	2	2
Laminating machine, camera & color printer for ID cards	1	1
Phone system and software	Accommodates at least 400 calls per day	Accommodates at least 400 calls per day
Space	Interview space at call center to conduct in-person assessments	Interview space at call center to conduct in-person assessments
Transportation	Cab & bus vouchers for clients; vehicle (s) for mobile staff	Cab & bus vouchers for clients; vehicle (s) for mobile staff

*Please note: The above chart estimates the resources needed for Phase 1 implementation and the full implementation (i.e., all four phases) of CAM. Resources needed for each phase will vary. The CAM Lead Agency will work with HAND and other partners to determine the appropriate level of resources needed for each phase.*



## Appendix B

### Coordinated Assessment Model (CAM)

#### Phase I Implementation

<b>ACCESS</b>	<b>WHY</b>	A coordinated assessment process is being developed to assist households who are experiencing homelessness or at-risk of homelessness. By streamlining the process through the use of common forms, processes, and assessments for each household and program, we expect to direct households to the most appropriate resources to address their housing crisis.
	<b>WHO</b>	While the ultimate goal is to ensure each household and every program is connected to the coordinated assessment process, we will pilot the process with households consisting of families (at least 1 adult and 1 minor child). Currently due to a lack of shelter options and diversion programs, homeless families in Detroit are often referred to shelters in neighboring communities or remain doubled up in overcrowded or unstable housing situations. By working with shelters that provide housing to families and by providing rapid re-housing services and financial assistance, we expect to better assist families experiencing homelessness. In Phase I, rapid re-housing and prevention resources will also be available for single households through the coordinated assessment and HARA process.
	<b>HOW &amp; WHERE</b>	Households seeking emergency shelter (families only) or prevention and rapid re-housing will be able to access these resources via two options: by telephone through a hotline or in-person via strategically-located mobilized assessment teams. The mobilized teams will be placed at shelters and/or other strategic community locations to be identified.
<b>ASSESS</b>	<p><b>Universal Screening and Diversion:</b> A universal screening will be conducted to determine the housing status (precariously housed, sheltered homeless, or literally homeless) and determine eligibility for homeless resources. Ineligible and/or households will be directed to other community resources including 211 and Department of Human Services. Household info will be entered into HMIS. Eligible households that cannot be diverted will proceed to the next step.</p> <p><b>Assessment:</b> If the household needs immediate shelter, a shelter or emergency placement will be made. For precariously housed where ESG is determined the most appropriate program fit, household will proceed directly to an ESG assessment. Some households will be able to end homelessness on their own. Those who are not able to end their homelessness within 14-30 days will be scheduled for full assessment.</p>	
<b>ASSIGN</b>	<p><b>Assign</b> After completion of the assessment coordinated referral will be made to the partner agency for completion of the housing plan, provision of financial assistance and/or case management services.</p>	

### Phases of CAM Implementation

<b>PHASES</b>	<p><b>Phase 1</b> – families in shelter 14-30 days, &amp; those (singles &amp; families) seeking prevention resources</p> <p><b>Phase 2</b> – Phase 1 AND families in shelter for longer periods of time (greater than 30 days)</p> <p><b>Phase 3</b> – Phase 1-2 AND singles in shelter 14-30 days</p> <p><b>Phase 4</b> – Phase 1-3 AND singles in shelter for longer periods of time (greater than 30 days)</p>
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<b>ACCESS</b>	WHY	VARIOUS HOUSING NEEDS (HOMELESS OR AT-RISK)	
	WHO	PHASE ONE: ► FOR EMERGENCY SHELTER: HOMELESS FAMILIES ► FOR PREVENTION/RAPID RE-HOUSING: SINGLES & FAMILIES	
	HOW	TELEPHONE CALL IN FROM: ► SHELTER ► COMMUNITY PROVIDER ► SELF	OR IN-REACH
	WHERE	► HOTLINE ► CALL CENTER	► SPECIALIZED MOBILE CASE MANAGERS ► LOCATED IN COMMUNITY

