

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: MI-501 - Detroit CoC

1A-2. Collaborative Applicant Name: Homeless Action Network of Detroit

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Homeless Action Network of Detroit

1B. Coordination and Engagement–Inclusive Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	No	No
4.	Disability Service Organizations	Yes	No	No
5.	EMS/Crisis Response Team(s)	No	No	No
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	No	No	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	Yes	No	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	No	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	No	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	Yes	Yes
30.	State Sexual Assault Coalition	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Legal Aid providers with homeless preference	Yes	Yes	Yes
35.	workforce development	Yes	Yes	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	

	Describe in the field below how your CoC:
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 characters)

1. Membership in the CoC is open to any entity committed to preventing and ending homelessness. The CoC uses social media, e-newsletters, and the CoC Lead Agency’s website to inform the public of membership opportunities. The brief on-line membership application is posted to the CoC Lead Agency’s website.

2. The CoC strives to improve the CoC Lead website by providing alternative text for images, captioning videos, and using accessible website design principles. All materials are publicly posted as PDF prior to meetings to promote accessibility. Additional formats can be made available upon request. Accessibility Checker is used to ensure accessibility for disabled persons is maximized. Low contrast colors are used for presentations, font size and graphics are carefully considered, and tables are easy to follow. If an individual with a disability is experiencing difficulties filling out paperwork, the CoC will offer 1:1 assistance. Communication about CoC meetings is provided electronically and posted to the CoC Lead Agency’s website, including the virtual meeting link to CoC meetings.

3. The CoC has several organizations engaged in the CoC that serve culturally specific populations. These include organizations serving people whose countries of origin are outside the U.S. and an organization whose services are targeted to the LGBTQ+ community. Many of the organizations in the CoC are led by BIPOC individuals. These organizations give voice to populations underrepresented in the CoC decision making process.

In 2021, the CoC began a public comment time at Board and General Membership meetings, and people with lived experience of homelessness who have otherwise been unknowledgeable of these meetings are now coming to advocate for themselves regarding their experiences with the homeless system in Detroit. The CoC has been intentional in partnering with people with lived experience of homelessness in every decision level of the homeless response system.

In 2020 and 2021, the Detroit CoC engaged National Innovation Service (NIS) to advance its priorities on equity and inclusion. NIS’ work focused on learning from a broad range of stakeholders how Detroit’s homeless response system can move forward more equitably and center persons who have experienced homelessness. As a result of this work, the CoC developed Housing Justice Roadmap and a vision for the Detroit CoC that is grounded in equity.

1B-3.	CoC’s Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. The CoC board and general membership body are comprised of service provider organizations, PWLEH, public officials, PHAs, , and other stakeholders. CoC membership is open to any entity with a commitment to end homelessness. The CoC solicits feedback via: committee input into documents , public comment periods, and focus groups or other meetings. The CoC uses social media, newsletters, and CoC Lead Agency’s website to inform public of input opportunities. All materials are posted to the website. The CoC has public comment time at Board and General Membership meetings, which has resulted in increased meeting attendance and participation from PWLEH and other interested entities.

2. Information is verbally communicated at public meetings typically with a PowerPoint and/or handouts. Meeting materials are emailed out before or after the meeting and posted to the CoC Lead Agency’s website.

3. the CoC Lead website is designed using accessible website design principles. Captioning is used in videos. Materials are posted as PDF to promote accessibility. Additional formats can be made available upon request. Accessibility Checker is used to ensure accessibility is maximized. Low contrast colors are used for presentations, font size and graphics are carefully considered, and tables are easy to follow. Communication about CoC meetings is provided electronically and posted to the CoC Lead Agency’s website, including the virtual meeting link to CoC meetings. Public comment periods at meetings allow people to communicate verbally or via chat box.

4. Policies, governance documents, community procedures and other materials that directly affect homeless service provision are developed with the input of the community. The CoC’s two decision-making bodies also have committees who are the action planning components of the Continuum. In the committees, strategies which are discussed in the public meetings are developed, deepened and expanded into approved timed workplans and eventual products. Products from the committees are then brought back to the two decision making bodies for further feedback and approval prior to implementation. Public comment periods are held to receive input from non-committee members. Input from PWLEH has generated change in CoC Board and General Membership norms and structure. The Detroit Advisor’s Group, comprised of PWLEH, has been instrumental in inciting change in CoC policies, community procedures, and other documents.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	

4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.
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(limit 2,500 characters)

1. The public was notified applications were being accepted via the CoC's email listserv and by posting the Request for Proposals (RFP) to the Collaborative Applicant's publicly accessible website. The RFP clearly indicated the CoC would accept proposals for new project funding from agencies that have not previously received CoC funding. Potential applicants also learned of the opportunity to apply via word-of-mouth from other providers and contacting the Collaborative Applicant via phone or email for more details, which were then provided to them. Informational webinars on the RFP and application process were held so any interested applicant could learn more. The date, time, and registration links for these webinars were communicated via the email listserv and posted to the Collaborative Applicant's website. In June 2022, the CoC held a webinar on an introduction to receiving CoC funding that provided a high-level overview of what an agency could expect if they applied for, and received, CoC funding. The goal of this webinar was to encourage non-CoC funded agencies to apply for CoC funding by helping to build understanding of the CoC program. The recording of this webinar was posted on the Collaborative Applicant's website and potential applicants were encouraged to view it. In 2023, the CoC received 3 applications from agencies that have never received CoC funding.

2. The RFP and webinars instructed applicants on the submission process, including where to find application materials (Collab Applicant's website), how to submit those materials, and submission deadlines. In 2023 the Collaborative Applicant used an on-line portal for new project applications. Instructions were held via webinar (recorded and publicly posted for later viewing) on how to access and navigate this portal. The Collaborative Applicant also responded to questions via phone/email regarding the submission process.

3. The RFP detailed evaluation criteria and review process used to select which applications would be submitted to HUD. The review committee recommended to the CoC board which new projects should be submitted based on application scores. The CoC board made final decisions on which applications are submitted.

4. All materials are made available electronically, mostly in PDF format. When developing PowerPoint presentations, colors, layout, and font size are considered to ensure materials are accessible. Materials in other formats will be provided upon request.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.

(limit 2,500 characters)

1. The CoC Lead consulted regularly with the City of Detroit (ESG/ESG-CV recipient) to plan for ESG and ESG-CV funds. Over the past year, one-hour bi-weekly meetings were held to plan for the most strategic use of the funds. The CoC Lead agency is the fiduciary of State ESG and ESG-CV funds, and likewise consulted with stakeholders at these bi-weekly meetings as needed on the use of these funds. The CoC Lead and the City of Detroit also met, and continue to meet, monthly to discuss CoC system-level needs. A newly re-structured Values and Funding Priorities Committee will plan for best strategic use of CoC and ESG funds. Discussions were about uses of funds considering data, other funding available, and how funds could meet CoC's strategic priorities. Staff from the CoC Lead agency participated in the annual review of applications for City ESG/ CDBG homeless program funding and helped develop recommendations for funding.

2. Starting in 2021, quarterly performance data for all ESG/ESG-CV funded projects has been reported to the CoC's Performance and Evaluation committee for review and recommendations. Over the past year, the CoC Lead provided HMIS support for the City of Detroit's monitoring of ESG/ESG-CV subrecipients, including quarterly performance reports. The CoC Lead provided feedback to the subgrantees, the State ESG recipient, and the City of Detroit on data quality and completeness. The CoC Lead conducted an annual audit of the subrecipient of the State ESG funds. The CoC Lead assisted the State and City of Detroit in their submission of the ESG CAPER. Lastly, the CoC Lead and the City of Detroit jointly developed CoC written standards and policies/procedures for ESG funded shelters and RRH projects. Projects are evaluated against these standards and policies/procedures.

3. PIT and HIC data were provided via email to the City of Detroit, the sole Con Plan Jurisdiction in the CoC. The data is also posted publicly on the CoC Lead Agency's website. The City of Detroit used PIT/HIC data in their applications for funding.

4. The CoC Lead meet with the City of Detroit monthly & participated in the annual Con Plan process. The CoC provided data as requested/needed for the Con Plan. The CoC Lead produced an annual State of the Homelessness Report which was posted publicly on the CoC Lead agency website and provides local homelessness data utilized by the City of Detroit in the Con Plan as well.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

The Detroit CoC Gov charter includes an appointed seat on the CoC board for the McKinney-Vento Homeless Liaison from the local public school district. Additionally, there was a rep on the CoC board from a local university representing higher education.

The CoC works with our Regional Educational Service Provider (RESA). When families with minor children access CE, they are referred to the RESA to ensure they receive educational services they are eligible for. This partnership is continuously evolving, particularly with improving communication loops with homeless service providers after referrals to the RESA are made.

The Detroit CoC works closely with our RESA providing a range of services and support to Wayne County's school districts. In 2021 -2022, the Detroit CoC partnered with Uni of MI on a project to improve identification of homeless children in Detroit schools to ensure they are linked with necessary educational and housing supports.

The Detroit CoC developed a Coordinated Community Plan (CCP) to End Homelessness after receiving Round 4 YHDP funding. This plan was approved by HUD in summer 2022. During CCP planning, youth elevated the importance of education. This is reflected in the CCP with specific goals around education as a key strategy in preventing and ending youth homelessness, starting with strengthening connections between the CoC and educational systems. Stakeholders from the educational system that were a part of the development of this system-wide strategic plan for ending youth homelessness, included Detroit Public Schools, Wayne Regional Educational Service Provider, higher education, and several early childhood educators. An educational workgroup was convened to develop an educational focused goal in the CCP. The YHDP Core Team (which provides on-going oversight to CCP implementation) includes the Wayne Regional Educational Service Provider and a higher education representative.

The development of the CCP also included two educational convenings to strategically plan for improving access to, and provision of, educational opportunities for youth experiencing homelessness. These convenings occurred in summer 2022, and included participants from various educational sectors, including the Michigan Department of Education and local public schools. In moving forward with the implementation of the CCP, it is essential that representatives from the educational system be involved, and that precedent has been set.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

The Detroit Public School Community District (DPSCD) Liaison - who is a member of the Detroit CoC's YHDP Educational Committee and Shelter Workgroup - places educational rights posters in all of the City of Detroit's Recreation Offices, Libraries, and shelters. Posters are also placed in all DPSCD schools and administrative buildings. The liaison also presents at various CoC meetings to explain the educational rights of homeless children and inform homeless providers on what enrollment assistance the district provides for these students. The CoC communicates with the district liaison regarding any educational matters pertaining to homeless children and youth including unaccompanied homeless and runaway youth.

Additionally, when households with school-aged children (ages 0-26), access Coordinated Entry, they have been asked a series of questions related to school enrollment and referred to a local provider to ensure they are linked with the McKinney Vento Homeless Liaison and receive the educational services for which they are eligible. Since beginning this referral process in the Fall of 2019, over 3,000 school aged children entering emergency shelter have been referred for McKinney Vento Homeless Liaison resources. The CoC continues to work with the Regional Educational Service Agency for Wayne County (Wayne RESA) to ensure there is a process to connect individuals and families to education services provided by all of the school districts and charter schools located within the Coc.

Further, the University of Michigan completed a project in Detroit which makes new data on homelessness among K-12 students available to key stakeholders and policy makers in the City of Detroit and statewide in order to improve program planning and services.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	Yes
2.	Child Care and Development Fund	No	Yes
3.	Early Childhood Providers	No	Yes
4.	Early Head Start	No	Yes
5.	Federal Home Visiting Program-(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	No	Yes
7.	Healthy Start	No	No
8.	Public Pre-K	No	Yes
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.	Detroit Public Schools	No	Yes

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaboration with Federally Funded Programs and Victim Service Providers.
	NOFO Section V.B.1.e.

In the chart below select yes or no for the organizations your CoC collaborates with:

	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	Yes

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1. Over the past two years the CoC has strengthened its relationship with the Michigan Coalition to End Domestic and Sexual Violence (MCEDSV), a statewide domestic violence/sexual assault coalition. MCEDSV provides training, advocacy, and policy reform efforts across the state to improve safety and housing opportunities for people who are experiencing/have experienced domestic violence and/or sexual assault. The Executive Director of the MCEDSV joined the Detroit CoC board of directors in 2021 and also serves on the CoC’s Performance and Evaluation and Values and Funding Priorities Committees. The CoC works closely with several providers in the CoC who provide services to people fleeing DV, including a domestic violence shelter that receives ESG funding and providers that receive CoC DV Bonus funding. CoC-wide policies that have been of particular focus within the CoC related to DV are our Coordinated Entry policies. The CoC Lead Agency and the Coordinated Entry lead agency are intentional about working with domestic violence providers to identify how CE policies are/are not beneficial in helping people fleeing DV access housing and services. CE policies are changed as needed to better meet the needs of this population. In the fall of 2022, the MCEDSV published a white paper examining the extent to which the current screen tool used by CoCs across Michigan perpetuate inequities and re-traumatize people seeking assistance. This research conducted by MCEDSV will be important as CoCs across Michigan (Detroit included) examine our CoC policies and tools, and make changes as needed to better serve our community. Additionally, the CoC is submitting a new DV Bonus CE-SSO application in this year’s competition to further our improvement of the CE process for people fleeing DV/SA.

2. In December 2021 CoC providers received training on “Domestic Violence 101” and “Practical Situations”, both of which were intended to help providers work with people fleeing DV in a trauma-informed manner. The CoC has been intentional about ensuring projects that receive YHDP funding are able to demonstrate services are provided in a trauma-informed manner. The CoC intends to take lessons learned from evaluating those projects, and their trauma-informed focus, and applying it to all CoC projects more broadly. Further, the City of Detroit (primary funder of shelter services) requires its funded agencies are trained on providing trauma-informed care.

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

1. Project Staff:

- The CoC lead a training on DV best practices and safety planning in Dec 2021 and Jan 2023. Going forward, this annual training will be held at the start of each year. We are also planning on-demand trainings on DV, safety planning and human trafficking to be added to our Learning Management System (LMS) for year-round access by project staff.
- Two trainings were held by CSH for PSH providers in June 2022 on providing trauma-informed care.
- The MI Coalition Against Homelessness hosted the following trainings all providers in MI. Detroit providers were encouraged to take part in. These trainings are available for additional viewing:
 - Aug 2021: The Neurobiology of Trauma (Part I)
 - Nov 2021: The Neurobiology of Trauma (Part II)
 - Jan2022: Serving Survivors of Human Trafficking
- The CoC Lead Agency’s new Capacity Building and Training manager has developed a department dedicated to training the CoC. This includes establishing a CoC training calendar with information on all trainings happening in the CoC, including information on annual training on trauma informed care and safety protocols.
- Since Aug 2022 we have been building out our LMS to provide on-demand trainings for the CoC at-large, including training on Trauma-Informed Care.

2. Coordinated Entry staff: All CE staff receive training annually on domestic and intimate partner violence. The most recent training was held in December 2022. As a result of this annual training, the CE staff have been equipped with strategies for safety planning with people in crisis, how to interview people in crisis in a trauma informed way, and understanding the difference between people fleeing DV and people who experienced DV in their past. CE staff have incorporated into their daily work recommendations from a consultant who conducted a trauma-informed care assessment of the CE access sites. These recommendations include ensuring the forms/surveys used are trauma-informed, supervisors have incorporated trauma-informed supervision practices with staff, and the physical space of the CE access sites have been improved to ensure they are appropriate, safe places for persons who have experienced trauma CAM Leadership conducts an internal DV training quarterly with staff to ensure best practices are being given when engaging clients. These trainings incorporated both in person and phone services.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC’s Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC’s coordinated entry includes:	
	1. safety planning protocols; and	
	2. confidentiality protocols.	

(limit 2,500 characters)

1. Ensuring people have a safe place to stay is the immediate priority of CE. All who present to CE receive a diversion interview asking about their situation and why they are seeking assistance. All who initially access CE are asked if they are fleeing/attempting to flee domestic violence or another unsafe situation. If the person responds affirmatively, all attempts are made to ensure the person can access a safe location for that night, including referring to a DV shelter. If the person is unable to enter a DV shelter, the DV shelter connects the client back to CE or another shelter. CE staff ensure the safety of all persons presenting to CE by conducting assessments in private spaces, or ensuring that people calling in are in a safe location, to allow individuals to identify sensitive information or safety issues in a private and secure setting. CE staff are trained in trauma-informed care and in working specifically with people who have experienced domestic violence. The CoC prioritizes people fleeing DV to vacancies in TH, PSH or RRH programs. All CAM staff are trained on conducting assessments using trauma-informed techniques, with the goal of offering special consideration to victims of DV and/or sexual assault to help reduce the risk of re-traumatization. In addition, all CAM staff are trained in safety planning and other next-step procedures if safety issues are identified in the process of conducting an assessment. Safety planning is conducted for all people presenting for services and in an unsafe situation, as safety is CAM's first priority to client engagement.

2. CE staff meet consumers in a safe, private, and trauma-informed environment to protect confidentiality. Privacy measures are in place and practiced for data shared between agencies to ensure confidentiality. All client information collected is done so with the client's consent, and the CE honors the client's preference on how the information is captured and shared. To further protect client's privacy, providers funded to specifically serve survivors of DV do not enter data in HMIS. Data for consumers presenting as survivors of DV is entered in HMIS by CE staff for the purposes of matching the household to a housing and/or service intervention. Referrals to DV programs are not made via HMIS nor is the location of DV specific housing given to protect client privacy & safety. Instead, a referral is made to the service provider via email with non-identifying information.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

(limit 2,500 characters)

1. We use two comparable database sources in our CoC – Empower and Quickbase. The one Domestic Violence shelter in Detroit, the YWCA Interim House, as well as our Joint TH/RRH DV program Project First Step managed by Neighborhood Legal Services, provided the CoC with de-identified aggregate data from their comparable databases on clients served from their programs as well as exit outcome data. In the 21/22 FY the YWCA Interim House served 429 clients while the Joint TH/RRH project served 136.

We are committed to continuing to partner with our DV programs including reviewing, assessing and utilizing their data to strengthen service delivery for this population.

2. Data on the number of people reporting to be fleeing DV when accessing CE, and their characteristics (singles vs families, acuity levels, etc) is typically reviewed when setting annual funding priorities. This data is used by the Values and Funding Priorities committee when developing policies on types of new projects the CoC should consider funding. In the 2023 competition, it was also decided the CoC should pursue a new CE-SSO project with DV Bonus funding to better meet the needs of people fleeing DV to improve their ability to access and navigate Coordinated Entry.

** **

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
	1. whether your CoC has policies and procedures that include an emergency transfer plan;	
	2. the process for individuals and families to request an emergency transfer; and	
	3. the process your CoC uses to respond to individuals' and families' emergency transfer requests.	

(limit 2,500 characters)

1. All CoC funded providers are expected to inform their clients that the CoC has an Emergency Transfer Plan and Procedures. The Detroit CoC board approved the CoC’s Emergency Transfer Plan in September 2018. Providers were trained on the Emergency Transfer Plan in 2018. The CoC Lead Agency has recognized the need to provide additional training to CoC providers on the Emergency Transfer Plan to ensure it is being implemented appropriately. In addition to the Emergency Transfer Plan policy, the CoC’s Coordinated Entry (known locally as CAM) policies specifically state that “victims of domestic violence cannot be denied access to the CAM process”. The CAM policies and procedures also expressly state the CoC will honor emergency transfer requests.

2. Providers are expected to inform their clients of the client’s ability to request an emergency transfer. Individuals and families being served in CoC funded programs who are victims of domestic violence, dating violence, sexual assault, or stalking may request an emergency transfer at any time if they believe there is a threat of imminent harm if they remain in their current unit. Victims of sexual assault may request an emergency transfer if the sexual assault occurred on the premises within the 90 days prior to requesting the transfer. Tenants requesting a transfer must submit the request to their housing provider in writing.

3. If a CoC provider receives an emergency transfer plan request, that provider will proceed to transfer the client as quickly as possible based on the availability and safety of another unit. The CoC additionally has regular case conferencing for PSH providers, providing additional opportunities for providers to identify other, safer housing options for someone fleeing DV. RRH providers likewise meet regularly and have opportunities for communication amongst themselves to transfer household to a different RRH provider/unit if necessary in DV circumstances. Additionally, CAM can support the emergency transfer process by identifying providers who have reported program openings and may be able to immediately accept a transfer.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
	1. ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC’s geographic area; and	
	2. proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.	

(limit 2,500 characters)

1. People who access Coordinated Entry are referred to services and housing based on their needs and preferences. Individuals and families who access CE and indicate they are fleeing or attempting to flee domestic violence will be referred to a domestic violence provider if the individual/family agrees to that referral and if the domestic violence provider has capacity. In instances where an individual or family fleeing domestic violence declines a referral to a domestic violence provider, or if the domestic violence provider does not have the capacity to take an additional referral, the individual or family will be referred to the next most-appropriate provider. No one will be denied access to housing or services in the CoC based on their status as fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking.

2. The CoC proactively identifies systemic barriers to people fleeing DV/SA via the following means:

- The Ex. Dir of the MI Coalition to End Domestic and Sexual Violence sits on the CoC Board of Directors, and provides insight and knowledge of barriers to safe housing faced by people fleeing DV/SA
- The CoC intentionally reaches out to, and encourages, DV providers to apply for DV Bonus funding annually, as these providers have expertise on the barriers to housing for people fleeing DV/SA
- The CoC is submitting a new DV Bonus CE-SSO application in this year's competition, in recognition of a more systematic approach to addressing the CE needs of people fleeing DV/SA.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:

1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and
2.	accounted for the unique and complex needs of survivors.

(limit 2,500 characters)

1. The CoC has two active advisory committees comprised solely of people with lived experience of homelessness: the Detroit Advisors Group (DAG) and the Youth Action Board (YAB). The YAB is comprised only of youth. It is known that some members of the DAG and YAB have experienced domestic violence. This is known because members of the DAG or YAB may have chosen to disclose this information by their own volition to trusted people and in an environment in which they feel safe; they are not asked or required to disclose survivor status. As members of the DAG or YAB, these individuals play a role in helping to drive CoC wide policies and priorities, including advising on which projects to submit to HUD for funding. Persons on the DAG or YAB are compensated for their work. Members of the DAG and YAB advocate for the needs of all people experiencing homelessness, including those fleeing DV, even if they themselves have not had the same experience.

To help improve the CE system for DV survivors, the CoC’s HMIS Lead Agency staff and CE staff have had weekly calls with staff at the primary DV shelter in Detroit (YWCA) to trouble-shoot barriers people fleeing DV experience when accessing CE. Residents at the DV shelter (who, by nature of their residing at the shelter are fleeing DV) communicated to the shelter staff the barriers they encountered when accessing CE. The shelter residents were able to disclose this information to the shelter staff, with whom they had a trusting relationship. The YWCA shelter staff then communicated these barriers to the HMIS and CE staff. This feedback from the YWCA staff (that they gathered from the shelter residents) was used to improve CE to better respond to the needs of people fleeing DV.

2. To ensure the safety of survivors, no one is asked or pressured to disclose their status as a DV survivor. Any information a person chooses to disclose within the context of a trusting relationship is kept confidential.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+—Anti-Discrimination Policy and Training.	
	NOFO Section V.B.1.f.	

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy—Updating Policies—Assisting Providers—Evaluating Compliance—Addressing Noncompliance.	
	NOFO Section V.B.1.f.	

Describe in the field below:

1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
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2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. The CoC updates policies as needed based on stakeholder feedback. The CoC includes an organization specializing in serving LGBTQ+ community. Their organization includes an educational component in which the CoC leverages their expertise to educate providers and receive guidance on how the CoC can improve existing policies to ensure they are equitable and inclusive.

2. The CoC has worked with PSH providers over the past two years to strengthen their policies – including those on preventing discrimination. An analysis was conducted of the existing policies, after which agencies were given extensive feedback on how to improve. This analysis included a review of how the individual provider policies aligned with the Equal Access Final Rule and Gender Identity Final Rule. They were also given a year of intensive training with CSH. A subsequent review was held in 2021. The CoC saw a significant improvement in the quality of the policies submitted in 2021. We hope to continue this process with PSH providers and to expand it to other project types. The CoC Lead agency has recently hired a Capacity Building and Training Manager. This position will ensure CoC providers receive trainings and support on the CoC's expectations around safe, supportive, non-discriminative housing opportunities for all.

3. The CoC has a grievance process in which clients notify the CoC when they feel their rights have been violated by an agency, including if they feel they have been discriminated against. The Grievance Committee investigates the agency's actions and measures that against their own written policies and CoC policies. After the investigation, the committee determines whether to substantiate the grievance. If the agency is found to not have followed proper protocol, corrective action is taken.

4. The Grievance Committee sets improvement expectations the agency must meet. If issues continue to occur, the agency may be placed on a Corrective Action Plan. In addition to this direct engagement with the agency, substantiated grievances are a scored element in CoC and ESG funding review processes. All substantiated grievances result in point reduction from applications – compounding if multiple grievances are substantiated. Additional points are deducted for noncompliance with the grievance process/subsequent corrective action or if an agency retaliates against a client. Repeated failure to comply with expectations may result in funding loss.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
	NOFO Section V.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC’s geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Michigan State Housing Development Authority	83%	Yes-HCV	Yes
Detroit Housing Commission	6%	Yes-Both	Yes

1C-7a. Written Policies on Homeless Admission Preferences with PHAs.	
NOFO Section V.B.1.g.	

Describe in the field below:

1. steps your CoC has taken, with the two largest PHAs within your CoC’s geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 characters)

1. The two PHAs that the Detroit CoC works with are the Michigan State Housing Development Authority (MSHDA) and the Detroit Housing Commission (DHC). MSHDA was proactive in creating a general homeless preference that dates back at least 12 years. Through the years, the Detroit CoC has worked with MSHDA to help improve the program including advocating for reduced screening criteria, educating housing agents on nuances in working with homeless populations, having monthly meetings with the assigned housing agents to give and get updates on client progress and navigating through issues of locating homeless applicants once they are pulled from the waitlist.

The partnership with DHC was established in or around 2014 as part of the 25 Cities Initiative to house 100 people in 100 days. DHC was approached by partners within the Detroit CoC to be the housing partners in the initiative. At that time, they were identified as an untapped resource that had not been directly connected to the CoC. Mutual benefits were identified including a need for other housing options for CoC participants and a need to quickly fill vacant vouchers on the DHC side. An MOU was established between DHC and HAND (the CoC Lead Agency) that identified the roles and responsibilities of each party. Once the 25 Cities Initiative ended, DHC and the Detroit CoC maintained an MOU that allows for homeless populations to access vouchers through DHC. Recently, a preference has been added to include public housing units and we often partner on other housing initiatives to house persons experiencing homelessness.

2. N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored–For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.	senior housing	Yes

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	No
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section V.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

PHA
Michigan State Ho...
Detroit Housing C...

1C-7e.1. List of PHAs with MOUs

Name of PHA: Michigan State Housing Development Authority

1C-7e.1. List of PHAs with MOUs

Name of PHA: Detroit Housing Commission

1D. Coordination and Engagement Cont'd

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	48
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	48
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

	Describe in the field below:
1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1. Projects are evaluated on Housing First by examining the project’s data and project/agency policies. Projects are evaluated on length of time to house people, as long lengths of time to housing may be an indicator of barriers to housing. Projects are evaluated on returns to homelessness within 6 months of exit to PH, as this may indicate people are discharged from projects for non-Housing First reasons.

2. Factors & performance indicators used during evaluation:

- Average length of time to move a person into housing after referral is received from CE
- In FY21 review, PSH projects were evaluated on agency’s termination, eviction prevention, and supportive services policies. Policies were evaluated for a Housing First orientation; such policy review may again be incorporated into future local review processes.
- Projects are evaluated on the percentage of people who exit to PH and return to homelessness within 6 months.
- New project applications are evaluated on responses to how the agency implements Housing First and how their termination and eviction prevention policies align with Housing First.

3. On-going evaluation of Housing First outside local competition:

- All CoC funded projects have eliminated eligibility criteria requiring preconditions. As referrals to projects are made via CE, projects are required to accept those referrals in accordance with CoC prioritization policies. Only in rare instances may a project deny a referral from CE, and these instances are for reasons other than clients meeting certain preconditions. Projects denying referrals from CE for reasons other than the limited reasons in CE policies are investigated to understand why the denials are occurring and to remind projects of Housing First expectations. Corrective action is taken if projects continue to deny referrals for unallowable reasons.
- Length of time (LOT) from referral to housing move in is reviewed quarterly with PSH & RRH projects. Long lengths of time to housing may indicate barriers to housing. An example of LOT data is the attachment given as the Housing First Evaluation.
- The CoC grievance process allows program participants to file a grievance if they are being required to participate in services they have not chosen. Grievances are thoroughly investigated, and corrective action is taken as appropriate.
- In the coming year, the CoC intends to plan a more robust means of evaluating Housing First compliance outside the CoC competition.

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1. The Detroit CoC has several Street Outreach (SO) programs that target chronic, LGBTQIA+, and youth. The SO staff rely on community feedback and data where unsheltered persons are at and use evidence-based practices of engagement to build trust. The CoC maintains a chronic By-Name-List used by SO to engage with unsheltered and target those for services. Members of the community, such as businesses and residents, can submit a request for outreach using an online form. All SO agencies attend monthly case conferencing session where teams discuss engagement efforts and locations of persons experiencing unsheltered homelessness.

2. Although outreach is targeted in areas with the greatest needs, outreach services are available in 100% of the CoC's geographic area. SO teams meet with City District Managers to establish relationships and provide feedback on where outreach is needed. As a result of their collaborative efforts, beginning in 2023, a centralized geographic SO request system will be rolled out. This request system will allow businesses and residents to more easily engage with SO teams to better engage with residents across the CoC.

3. Street outreach is conducted daily. Outreach teams operate at different times, to ensure the most comprehensive coverage. In general, outreach teams are available daily from 7:00am to 12:00am. Teams providing outreach to the same population type (e.g., youth) go out at different days and times to avoid duplication of services. In general, outreach teams are available daily from 7:00am to 12:00am. In 2023, the City of Detroit will release a NOFA to fund two SO teams in order to increase outreach coverage to 24 hours a day.

4. SO providers are required to target the most vulnerable populations, including the chronically homeless. Agencies must report on the number of chronically homeless households served, with the expectation that the majority will fall into this category. Service providers use motivational interviewing and continual engagement to build rapport and trust with the client. When consumers are hesitant to engage, the SO team offers other types of interventions, including assistance with mainstream resources, as well as assistance accessing CE, all while unsheltered. Over the past year, two new outreach initiatives, partnered with local police, have been implemented to target people resistant to engaging with the homeless system. Finally, the CoC has three youth focused SO teams.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1. Engaged/educated local policymakers	Yes	No
2. Engaged/educated law enforcement	Yes	No
3. Engaged/educated local business leaders	Yes	No
4. Implemented community wide plans	Yes	No
5. Other:(limit 500 characters)		
Special street outreach team paired with law enforcement	Yes	

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.j.	

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	1,641	1,802

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	No
2.	SSI–Supplemental Security Income	No
3.	SSDI–Social Security Disability Insurance	No
4.	TANF–Temporary Assistance for Needy Families	No
5.	Substance Use Disorder Programs	No
6.	Employment Assistance Programs	No
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	
	Describe in the field below how your CoC:	
1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;	
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and	
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.	

(limit 2,500 characters)

1. The CoC shares information on mainstream resources via bi-weekly newsletters and at our bi-monthly CoC meetings. The information presented in these newsletters or meetings include information about changes in how people can access resources, new resources available, or other programmatic/policy changes. CoC agencies are also invited to share at our bi-monthly meetings information they may have on mainstream resources. Time-sensitive information is shared via special disbursement of the newsletter outside of regularly scheduled distribution. Phone calls and other direct contact may also be made as necessary. Two new staff position at the CoC Lead Agency - the Capacity Building & Training Manager and Systems Coordinator for Services – will play key roles in ensuring agencies receive regular training and communication accessing mainstream resources.

2. New and renewal CoC Project Applicants must demonstrate their ability to connect their clients to mainstream resources including health insurance. Agencies seeking new CoC project funding are asked detailed questions on how they assist their program participants with accessing and navigating the health care system. CoC funded agencies are expected to assist their clients with accessing health care (including substance abuse and mental health treatment) for their clients, to the extent that the clients want such services. The CoC recognizes there are systemic challenges providers are experiencing with accessing these needed services for their clients and intends to address these challenges in the coming year. Additionally, efforts are underway at the state level to increase access to Medicaid billable services for homeless service providers and training on this initiative will be forthcoming. Recently implemented strategies have resulted in data matching between HMIS and Medicaid data that allow for the identification of overlap between the two systems with the hope of increasing collaboration and the data-informed targeting of services to individuals who indicate a need for specialized intervention.

3. 98% of CoC projects indicated in their applications this year that program participants have access to SSI/SSDI technical assistance. Additionally, 79% of applicants indicated the staff person providing this technical assistance has received SOAR training in the past 24 months. The CoC will consider how it may help to promote additional SOAR training opportunities in the year to come.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section V.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

Over 2021 – 2022, some non-congregate shelters operating during the height of the pandemic either remained in operation or were brought back into operation. Several Detroit CoC emergency shelters have always operated in a non-congregate manner, even before the pandemic.

Additionally, one large shelter was brought back on-line in April 2020 to provide overflow space. This allowed congregate emergency shelters have safe social distancing practices. This shelter provides 90 non-congregate beds to single adults.

At the outset of the pandemic, all emergency shelters met with the Detroit Health Depart. to receive guidance on setting up their internal layout to be able to increase social distancing. As of mid-2022, many shelters have reverted to operating at full capacity due to the community need for these shelter beds. However, shelters have continued to promote wearing of masks, encourage vaccinations, do regular testing and symptom screening when people enter the shelter, and move people to an isolation shelter if people test positive.

One 50-bed shelter in our community is moving towards becoming non-congregate as well as increasing capacity by 25 beds. This shelter received funds from the City of Detroit to rehabilitate their shelter so that it can provide non-congregate beds to families. This shelter is scheduled to be in operation in late 2023/early 2024. The City of Detroit is also in the process of identifying a new owner for the building currently being used as an isolation shelter; once this new owner is identified, the space will be converted to a non-congregate shelter; population has not yet been determined. It is expected that an existing congregate shelter will move into this space, thus increasing the number of non-congregate shelter beds in our system.

In 2021 – 2022, the CoC used hotels as an alternative to shelter for some people who were experiencing unsheltered homelessness. Specifically, 49 people who had been residing in a sizeable encampment in a downtown plaza were placed into hotels, which is a form of non-congregate sheltering.

A shelter serving people fleeing DV has applied to the State of MI for funds to add 8 NCS beds to its facility; the CoC has supported their application.

Lastly, the City of Detroit has allocated \$3,000,000 in its HOME-ARP plan to the development of non-congregate shelters. The City of Detroit is currently preparing a NOFA to determine which entity will receive these funds.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	

	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and
2.	prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1. CoC wide policies: All ES in the Detroit CoC are required to have policies and protocols addressing how they will prevent the spread of disease within their facility. The City of Detroit, one of the primary funders of emergency shelter, required infection prevention policies from all their shelter providers to comply with their CV policies and procedures. The Detroit Health Dept partnered with the Housing Revitalization Dept in presenting detailed procedures on responding to infectious disease outbreaks. All shelters were given individualized technical assistance on infectious disease prevention through TAC. Shelters were given sample policies, forms, and signage from state and local public health agencies to aid in developing policies related to responding to infectious disease outbreaks.

2. Prevent disease outbreaks: The following strategies are in place to prevent infectious disease breakouts among people experiencing homelessness:

- COVID-19 vaccines are encouraged and available to people experiencing homelessness
- Wayne Mobile offers mobile health screening services at shelters and other locations where people experiencing homelessness may be to help with early identification of symptoms which may help to prevent the spread of disease.
- One of the CoC’s homeless service providers runs an FQHC which is accessible to people experiencing homelessness on a walk-in basis to provide early diagnosis and treatment to prevent the spread of disease.
- The CoC continues to make use of an isolation shelter for people who test positive for COVID-19. The isolation shelter served 685 people in 2021 and 526 people in 2022.
- The CoC continues to promote testing for COVID-19. Shelter and street outreach providers typically test people “at the door” when a person is first encountered (however people are not denied services if they decline to be tested). A source of private funding has been secured to provide incentives to encourage people to be tested. The Detroit Health Department has made antigen test kits available. The Michigan Department of Health and Human Services additionally provides testing resources, including going to shelters monthly to conduct tests. In 2022, the State has tested 3,842 people in shelters.
- Shelter providers received guidance from either the CDC, the Detroit Health Department, or other technical assistance providers on advising on their physical layout and recommended layout modifications to prevent the spread of disease

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	

	Describe in the field below how your CoC:
1.	shared information related to public health measures and homelessness, and
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.

(limit 2,500 characters)

1. Sharing information:

- Over the past year, street outreach providers have meet on a bi-weekly basis. During the meetings discussion includes reviewing information provided by the Detroit Health Department, vaccine clinics, current COVID-19 exposure rates, PPE supply provisions, isolation protocols for staff that test positive, and other strategies to keep staff and clients safe. Similar information is shared with emergency shelter providers at their monthly meetings.
- Early in the pandemic, written guidance was provided to all housing providers on preventing the spread of disease. That guidance continues to remain available for providers to refer to.
- Early in the pandemic, the CoC held weekly or bi-weekly CoC-wide webinars on best practices to prevent the spread of disease. These webinars were all recorded and published and are publicly accessible for providers to refer to.

2. Communication between public health and homeless services providers occurred as follows:

- Monthly meetings were held with Honu (COVID-19 vaccine/testing provider), the CoC Lead Agency, and the City of Detroit to discuss vaccination and testing strategies. Information from these meetings was communicated to homeless service providers via monthly provider meetings or directly via email.
- The CoC had vaccine coordinators who interfaced directly with homeless shelters and other homeless service providers. These staff communicated to the homeless service providers the most up to date information available from public health.
- The MI Dept of Health & Human Services and the Statewide HMIS Implementation launched a data-matching system (with all necessary privacy protocols in place) for local CoCs to utilize to identify people with medical vulnerabilities, so that CoCs may prioritize those persons for services and housing.
- During the height of the Delta Outbreak, the City worked in collaboration with the Health Dept. to quickly create a policy to prevent the Isolation Shelter from becoming overcrowded and ineffective. This policy used all the guidance from the CDC but added an innovation to isolate families on-site in their current shelter. This was done because families were utilizing the most space in the isolation shelter and for extended periods of time. The policy allowed the isolation shelter to test families and individuals out of isolation rather than continuing to isolate them when they were no longer symptomatic or testing positive.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC's coordinated entry system:

1.	covers 100 percent of your CoC's geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1. The CoC CE system, locally referred to as the Coordinated Assessment Model (CAM), covers 100% of our geographic area by using a hybrid call center and multisite approach via physical access points throughout the CoC’s area.

2. The CE system uses several standardized tools during the assessment process. First, a standardized diversion questionnaire is administered to all who initially contact CAM. This questionnaire assesses for other safe housing resources the person may be able to access that night. Other standardized assessments used if a person cannot be diverted are the VI-SPDAT and the Full SPDAT. A population-specific version of each of these tools (for individuals, youth, or families) is used. Additionally, a YHDP Assessment, which was created in partnership with youth with lived experience, is conducted with all youth (18-24) experiencing homelessness. These standardized assessment tools are used to understand a person’s vulnerability, homeless history, and level of need. People are referred to resources based on the outcome of these assessments and standard prioritization criteria related to the household’s situation that are tracked in HMIS.

3. The CAM intentionally gathers feedback from the people who access Coordinated Entry and uses that feedback to identify how to improve the Coordinated Entry process. CAM Access and Navigation service surveys allow CAM staff to learn about the quality of services provided and the experiences of clients when engaging with CE staff. CE staff has recently partnered with the CoC’s Advisors Group, whose membership is exclusive of those with lived experience. With this collaboration, the Advisors Group gives insight and direction on CAM processes and procedures. CE staff also work closely with CAM Governance committee who is responsible for providing direct oversight to the CAM and responsible for bringing policy level recommendations to the CoC Board in regards to CAM operations. This group is comprised of service providers, partners, and community. CE holds case conference sessions for sub-populations during each month to coordinate services and identify areas for improvement in the CE process. Additionally, the CoC Lead Agency conducted extensive interviews, focus groups, and surveys with people with lived experience of homelessness about CE to inform system changes as CE operations transitioned to new service providers in 2023.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	

	Describe in the field below how your CoC’s coordinated entry system:
	1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
	2. prioritizes people most in need of assistance;
	3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and
	4. takes steps to reduce burdens on people using coordinated entry.

(limit 2,500 characters)

1. Multiple SO teams cover the CoC area, with coverage 7 days a week. SO transports persons to access points for assessment and shelter referral. If a client is contacted by SO after hours, client is transported to shelter for the night, and the shelter follows up with CAM next morning. Unsheltered clients refusing shelter or going to access point are continuously engaged by SO to complete standardized assessment and report their name, location, and assessment outcome to CAM.

2. People experiencing homelessness are prioritized based on the common assessment (SPDAT) and chronic homeless status. Acuity groups are used to determine the best intervention:

- Acuity Group 1 chronically homeless: PSH
- Acuity Group 2 not chronically homeless PSH (if available) or RRH/TH/HCV (if no PSH available)
- Acuity Group 3 not chronically homeless RRH/TH/HCV
- Acuity Group 4 not chronically homeless HCV only

People are prioritized within each acuity group as:

- 1st: Chronically homeless
- 2nd: Unsheltered
- 3rd: Fleeing DV
- 4th: SPDAT score
- 5th: Families then singles
- 6th: LOT homeless

For Youth (18-24) there are specific prioritization factors within each acuity group used when referring to youth-specific resources:

- 1st: Unsheltered
- 2nd: Fleeing or attempting to flee violence
- 3rd: Pregnant or Parenting
- 4th: System Involvement
- 5th: Minor Homeless History
- 6th: LOT Homeless
- 7th: SPDAT Score

3. Referrals are made to PSH/RRH/TH vacancies within 2 days of the vacancy being available. PSH/RRH/TH providers are expected to contact a referral within 2 – 3 days of receipt. Providers are evaluated on the length of time it takes to move a person into housing.

4. The CE staff is always looking for opportunities to remove burdens and challenges for accessing services. The CE system operates in-person access points and offers a phone line to assist people who are experiencing a housing crisis. In addition, CE works in strong collaboration with shelters in the CoC to ensure all households presenting to shelter have been assessed and are connected. Having multiple points of access and expanding accessibility for CE allows CAM to meet people where they are, ensures that we are providing opportunities, and connecting people to services. The CE process is low barrier and does not screen households out for services. Questions for assessments are designed to be purposeful to help match clients to services that best address their needs.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry—Reporting Violations.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1. CAM’s website has information on all services that people are eligible for through coordinated entry. Further information on services through coordinated entry can be found on funders and partner’s websites. CAM has a monthly newsletter that is sent out that provides updates and additional information for community members. CAM attends community outreach events throughout the year to present and inform external stakeholders of the services that are provided through coordinated entry. CAM works closely with external partners such as 211, hospitals, community mental health agencies, etc. to ensure that people throughout the geographical area are aware of services.

2. Clients who present to CAM Access are informed that they have rights and remedies under applicable laws and regulations. All clients who present in-person receive a “Your Rights” flyer which highlights their rights and provides information on what to do if they feel their rights are violated. Any time that a client expresses a complaint or issue relating to their rights they are informed of the CoC’s grievance policy and given the opportunity to file a grievance. CAM provides assistance to clients in filling out and submitting grievance forms. Grievance information and process; client communication e.g. around equal access; signage/forms

3. CAM reports any conditions or actions that impede fair housing choice for current or prospective program participants by following the CoC’s grievance policy and submitting a grievance form which initiates any required action and reporting to the appropriate jurisdiction. The CoC Grievance process allows for “agency to agency” grievances, and CAM staff utilize this process when any potential fair housing violation is encountered. After a grievance form is submitted, the CoC Lead Agency or Executive Committee investigates the grievance and brings its finding to the CoC Board Grievance Committee. The Grievance Committee includes representatives from the CoC and the City of Detroit. The Grievance Committee reviews the grievance and determines whether to substantiate it and provide a written response within 20 business days of review. If the complaint or grievance includes a potential fair housing or civil rights violation, the Grievance Committee may also report the matter to the City of Detroit’s Civil Rights, Inclusion & Opportunity Department (CREO) and/or HUD.

1D-10.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	06/15/2022

1D-10a.	Process for Analyzing Racial Disparities—Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

Describe in the field below:

1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1. The CoC & HMIS Lead did a 3-yr data analysis by race and ethnicity to understand racial disparities in the CoC. The analysis was done using data CoC Racial Equity Analysis Tool 3.0 and Core Demographics and System Performance Measures by Subpopulation reports from the Michigan HMIS Data Warehouse. Analysis included following data:

- Comparison of Race & Ethnicity Rates in Census data, poverty rate, data and 2021 PIT Count data – Report Used: CoC Racial Equity Analysis Tool 3.0.
- Length of Time Homeless by Race & Ethnicity - Report Used: System Performance Measures by Subpopulation Measure 1)
- Numbers of Persons who experience homelessness once or 2-3 times and 4 or more times by Race & Ethnicity – Report Used: Core Demographics
- Exit Destinations Disaggregated by Race & Ethnicity – Report Used: System Performance Measures by Subpopulation (Measure 7)
- Returns to Homelessness by Race & Ethnicity– Report Used: System Performance Measures by Subpopulation (Measure 2)
- CE Prioritization by Race & Ethnicity – Report Used: Comprehensive Client Detail and Data Analysis Export Report

Data was provided to C4 Innovations, a tech assistance provider working with MI CoCs on racial equity strategies. C4 Innovations provided the Detroit CoC with a full final analysis, including a breakdown of the data, opportunities, and findings in each of the data points outlined above. We plan to conduct another analysis in 2024 which will include a 3-year data analysis utilizing a newly developed System Pathways report which will show the inequities in how various subpopulations access CoC resources.

2. Per the analysis, 2021 data showed Black households were 86.9% of the PIT count in Detroit and 84% of all groups in the annualized HMIS count, while Black/ African American households made up only 78.3% of the general population in Detroit. This shows that, Black households are 1.1 times more likely to be represented in the PIT count when compared to overall Census data. The overrepresentation of Black households experiencing homelessness is not fully explained by the poverty rate, which is 78.1% according to the 2015-2019 Census estimate. Also, according to the analysis, exits to destinations with RRH subsidies or to PSH occur at very low and similar rates across the different racial and ethnic groups in Detroit (1% or less). For example, white households and Black or African American households exited to PSH at nearly identical rates (about 0.9%).

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC’s board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes

5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
Other:(limit 500 characters)		
12.	Local CoC led racial equity campaign	Yes

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The Michigan Campaign to End Homelessness has partnered with C4 Innovations, a consultant that currently works with our CoC and others to identify ways in which we can improve our CoC from a racial equity lens. This includes utilizing and reviewing data analysis and data processes to help in promoting racial equity in the homeless response system. This work includes establishing a baseline of the CoC strengths and room for improvement such as reviewing data by race and ethnicity and comparing the races/ethnicities of people experiencing homelessness as compared to the general population and the population experiencing poverty. This work also includes a peer support system with other CoCs to share practices that are working well.

HAND, as the Collaborative Applicant, will be looking at our policies and procedures to identify inequitable practices and make corrections to promote racial equity. Likewise, we intend to review the practices of our coordinated entry system to improve racial equity outcomes.

Additionally, several providers in the CoC have reported taking their own steps internally within their programming to educate staff and clients on disparities and to develop strategies to address disparities they see within their own organizations and programming, such as re-examining hiring practices and pay scales.

We would like to cast a wide net to review equity from a subpopulation perspective. Historically, single males have been the majority of those experiencing homelessness in our system. As such, many resources have catered to them. Our goal is to design a system that is more equitable and responsive to the needs of other subpopulations including securing larger housing units for families, ensuring safety for those fleeing domestic violence, and having more options for people who identify as LGTBQ+.

We have also identified the need to build cross-system partnerships to improve racial equity outcomes in the homeless system. We cannot improve racial equity in the homeless system without also addressing the systems that feed the homeless system. Inequities in employment, education, and corrections impact the homeless system at the start of a person’s engagement with homelessness resources.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
	1. the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
	2. the tools your CoC uses.	

(limit 2,500 characters)

1. The Detroit Advisors Group (DAG) advocates and participates in efforts to eliminate and prevent homelessness and racial disparities. The DAG seeks to prevent disparities in our system by elevating PWLEH into positions of leadership and decision making within the CoC; redistributing power so that the system is responsive to their needs and designed and led by their voices and their priorities are centered. The CoC is committed to creating pathways to redistribute power to PWLEH. In addition to providing a means for PWLEH and community stakeholders to submit written grievances, public comment opportunities at CoC Board Meetings to voice grievances and concerns on a publicly recorded platform.

The CoC also currently works with building and maintaining relationships with landlords and has partnered with a local realty group to help decrease discrimination and destigmatize PWLEH and persons with evictions.

The CoC works with Workforce Development to prevent disparities in income and works with Case Managers to assure that they are helping clients to increase income. The CoC encourages providers to offer financial literacy training.

The CoC recognizes our clients come to our system after being failed in other systems such as employment, training opportunities, and the community not having enough affordable and livable housing stock but continues to strive for favorable outcomes in the homelessness system.

2. The Detroit CoC has started conversations regarding the assessment tool used for coordinated entry and is exploring if the tool currently being used needs to be replaced. The CoC is committed to using a common assessment tool that reduces bias or disparities in the provision of homeless assistance and acknowledges the intersectionality of homelessness and other factors present in a person's life.

Furthermore, the Detroit CoC, through its engagement in the C4 Racial Equity work, developed a racial equity action plan for implementation within our continuum. The development of this work relies on the Equitable Results Framework tool which includes the collection and disaggregation of both quantitative and qualitative racial equity data, distillation of disparities seen in the data, and formulation of CoC specific strategies for addressing these inequities. The Detroit CoC is committed to continuing this work in the future and will discuss incorporation of new tools that meet the needs of our community.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.	
	NOFO Section V.B.1.r.	

Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)

The CoC has worked hard over the past several years to engage persons with lived experience of homelessness (PWLEH) in meaningful and sustainable ways. In 2016 the CoC developed our Youth Action Board (YAB). The CoC has worked to integrate the YAB into our work and decision-making mechanisms. The YAB has been a vital decision maker within our Committee on Youth Homelessness which sets strategic priorities and drives our system’s response to the needs of youth. They also were integral within the CoC’s YHDP application and subsequent Coordinated Community Plan (CCP) development processes from 2021, to present. The YAB have been essential decision makers on our YHDP Core Team, led efforts to incorporate youth voice in the development of the CCP – including participating in 18 listening sessions - were instrumental voices in designing the YHDP projects, selecting the agencies to receive YHDP funding and are now in the process of supporting those agencies to ramp up their projects.

In 2021 the CoC created a position devoted to centering the voices of and redistributing power to PWLEH within our system. Through 2019 and 2020, with the support of NIS, the CoC did targeted outreach to form our Detroit Advisors Group (DAG) which is made up of PWLEH – including members of our YAB. This group was formalized in August 2021 and adopted as a CoC committee in November 2021. The Advisors Group oversees policy decisions and participates in the setting and advancement of the CoC’s priorities. In addition to the work they advance, the Advisors Group elects 3 representatives to serve on the CoC Board with a priority that at least one of those positions be filled by a youth. The CoC is now working with the Advisors Group to expand membership. Flyers have been developed for distribution and outreach is being conducted at shelters and soup kitchens, through website and social media ads, and through leveraging the existing Advisors’ networks and connections. As the advisors elevate priorities, the CoC is working to be responsive and center those priorities while simultaneously chartering pathways for the advisors and other PWLEH to lead that work. The CoC has additionally implemented a policy for compensating the Advisors Group and YAB for their work at all the various levels in our system.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	54	8
2.	Participate on CoC committees, subcommittees, or workgroups.	14	8
3.	Included in the development or revision of your CoC’s local competition rating factors.	7	8
4.	Included in the development or revision of your CoC’s coordinated entry process.	120	29

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

At the system level, a position was created (Engagement Manager) to invest in persons with lived experience of homelessness (PWLEH), support their integration into the CoC, and create pathways between CoC work and employment opportunities. Some of these employment opportunities are fostered through the development of employable skills. Others are cultivated through the prioritization or creation of jobs at both system and provider level.

Professional Development Opportunities: PWLEH are provided trainings on the CoC and given access to attend trainings put on by the system or our providers. The CoC provided scholarships to take 3 PWLEH to NAEH’s National Conference in July 2022. Our YAB have attended conferences by National Network for Youth & Point Source Youth. In addition to attendance, our PWLEH have spoken at various conferences including the MI Dept. of Education, Mich. Youth & Families, and the Building Mich Communities conferences. PWLEH are given opportunities for resume building and leadership within the work of the CoC as well. Some of the work they have recently helped lead includes PIT planning, the holding of focus groups and listening sessions, voter registration initiative for clients, funding application review, updating CoC policies, strategic planning, and advocacy. YAB members are also given an opportunity to attend a Leadership Development Retreat annually.

Employment Opportunities: Our system is working to not only consult with PWLEH to inform the work of the system, but to employ PWLEH to advance the work they elevate. We currently provide compensation for all involvement, but ultimately hope to transition to an employment model. Some job opportunities have already been created. For instance, the CoC designed a position for a YAB member to facilitate the deeper integration of the YAB into system-level work and a data-focused position for a youth on the HMIS team. Further, all new programs funded through YHDP are required to hire peer supports. YAB members are also given access to a 6-week Summer Employment Opportunity through a partnership with Detroit Employment Solutions. Many of our providers hire former clients and PWLEH at various levels within their programming and we are exploring ways to intentionally incentivize this as a CoC. We are also trying to engage philanthropy to create system-level positions to add capacity and allow PWLEH to take full ownership of the priorities they elevate.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below:

1.	how your CoC routinely gathers feedback from people experiencing homelessness;
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

1. The CoC has a Youth Action Board (YAB) and Advisors Group – two formal entities within the CoC made up of PWLEH with experience of homelessness – who are integrated into planning and decision-making structures of the CoC. The CoC meets weekly with the YAB and bi-weekly with the Advisors Group to advance the work of the CoC. The YAB and Advisors Group members are involved in the full range of CoC tasks including data collection, community assessments, analysis, and local strategy development. 3 seats on the CoC Board are reserved for PWLEH and all CoC funded agencies are required to have at least one PWLEH on their boards. Over 2021 and 2022, the CoC held 2 PWLEH-led focus groups and 18 listening sessions to get input from clients to update our strategy and priorities. In partnership with the Advisors Group, this year the CoC has integrated a public comments process into our General Membership and Board Meetings, in the coming year, the CoC hopes to launch a formal town hall process to regularly meet with clients.

2. The CoC has several pathways to gather feedback from PWLEH -including current and former clients of both CoC and ESG funding. The CoC has a robust grievance process in which clients receiving services in CoC or ESG funded programs can directly elevate concerns to the CoC, with the CoC taking appropriate action to remedy the concern. In addition to this, as a part of the local funding review process, the CoC has begun evaluating CoC programs on the extent to which they meaningfully incorporate PWLEH into their CoC programming and decision making structures.

3. In 2021, the CoC Lead Agency hired an Engagement Manager, devoted to the centering of PWLEH. This position elevates priorities shared by PWLEH and creates pathways within the system to center those priorities. As concerns are raised by PWLEH through the various levels of input, the CoC is striving to be responsive and center those concerns as essential pieces of work. For instance, the YAB elevated the need to improve access to our system for youth. Together, we brainstormed solutions. And now the CoC Lead and the YAB are partnering with our CE Lead to develop mobile units that will engage youth at various drop-in centers in Detroit. Our CE will also prioritize hiring youth to fill the positions brought on to carry this out. This is just one example. The ultimate hope is that our system’s priorities will continue to increasingly be set, informed, and driven by PWLEH.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC’s geographic area regarding the following:	
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. Reforming Zoning and Land Use:

- The City of Detroit (CoD) is working on a Second-Floor Residential Grant Program, which aims to convert vacant, second-floor space above commercial spaces into affordable apartment units in Southwest Detroit. The program, which will reimburse property owners up to \$10,000 for performing eligible improvements on their unused second-floor apartments, is expected to result in 24 new affordable housing units. This work came about from advocacy for the need for more affordable housing units in Southwest Detroit.
- The Detroit CoC engaged with the CoD on the HOME-ARP Allocation Plan. The engagement process determined 60% of the funding would be dedicated to the development of PSH. Additionally, the City of Detroit is working with Detroit Land Bank to determine if any existing City owned properties can be utilized for the development of HOME-ARP PSH.

2. Reducing Regulatory Barriers:

- Several CoC members attend the monthly Michigan Homeless Policy Council (MHPC) meetings, and have done so since the inception of the statewide effort to address racial inequities in the homeless system. The CoC has a standing representative on the MHPC. Attendees have elevated the need to challenge state and local laws that generate barriers in housing. Usage of land banks, landlord registry policies, and other topics have been brought forward in the meetings. CoC members advocate that addressing the root causes of homelessness will yield a bigger and longer lasting impact in ending homelessness. The MHPC has drafted a strategic plan to end homelessness, and some of these suggestions have been incorporated into the plan.
- In February 2022, CoD released an RFP for a consultant to conduct a market study that included a housing policies and processes assessment. In 2023, the selected consultant team will work analyze barriers in the current policies that prevent the City from reaching housing stability goals. In addition, the consultants will create recommendations to improve housing development and affordability within the CoC, including the regulatory landscape of development and housing stability and affordability.
- Members from the CoC participated in MSHDA's Racial Equity Impact Assessment to inform changes to the 2024-2025 QAP. The goal of the assessment is to garner opportunities for advancing equity in communities developed with Low-Income Housing Tax Credits (LIHTC). CoC members participated through a survey and in focus groups.

1E. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	06/26/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	05/08/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
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1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	No

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
 Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	125
2.	How many renewal projects did your CoC submit?	43
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

1. In the annual local competition, projects submit an Annual Performance Report (APR) from HMIS or their Comparable Database for the prior calendar year. This data is used to analyze housing outcomes. For TH, RRH, and TH-RRH projects, housing outcomes are calculated by dividing the number of leavers to permanent housing by the total number of leavers. For PSH projects, housing outcomes are calculated by dividing the number of stayers plus leavers to permanent destinations by the total number of people served.

2. The CoC analyzes length of time to housing for PSH and RRH projects quarterly. This analysis is conducted by the HMIS Lead Agency using project-level data. The analysis looks at the length of time it takes a project to complete the Housing Move in Date data element as compared to the date when the project received the referral from CE.

3. The specific severity of needs the CoC considers when ranking and selecting projects is related to project type. PSH projects are ranked above other projects because these projects serve a highly vulnerable population, specifically persons experiencing chronic homelessness. Since the implementation of CE, all persons are assessed via a common assessment tool, which determines the best housing intervention for the person. The CoC has additionally adopted HUD’s Order of Priority, prioritizing the chronically homeless for PSH over non-chronically homeless. Adopting this common assessment tool and the orders of priority has resulted in a greater level of continuity amongst our PSH providers in the severity of needs in the persons being served. Therefore, all PSH providers are serving persons who have high levels of need and are highly vulnerable.

4. The CoC considers the severity of needs and vulnerabilities of persons served in CoC funded projects by ranking PSH projects above other renewal and new projects. PSH projects have different (lower) performance expectations for income and employment measures, in recognition that persons in PSH, who are chronically homeless, have greater barriers to increasing income/employment and, as PSH is a long-term program having a sustainable source of income is less urgent a need than for participants in short-term RRH and TH programs. While ranking projects, if a project serving a highly vulnerable population falls into Tier 2 during the ranking process, or is the only project of that kind in the CoC, the CoC board may decide to instead place that project into Tier 1.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	

Describe in the field below:	
1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.

(limit 2,500 characters)

1. The primary race over-represented in CoC homeless system are people who identify as Black/African American. According to data analysis conducted by the Statewide Racial Equity project, in 2021, 78.3% of the population in Detroit was Black/African American, but 84% of the homeless population was Black/African American.

The CoC obtained input from a variety of persons when determining rating factors used to review project applications. Collaborative Applicant staff, CoC board, and two CoC committees were specifically a part of determining rating factors for renewal and new projects. The CoC’s committees comprised of PWLEH were also involved. Of those who chose to disclose this information, 52% identified as Black/African American, 37% identified as white, 6% identified as American Indian/Alaskan Native/Indigenous, 2% identified as Asian/Asian American, and 4% identified as Hispanic/Latino (note: these percentages do not account for individuals who identified as multi-racial). Proposed rating factors for renewal projects are subject to a public comment process, and comments were accepted from anyone in the CoC who chose to respond. The Detroit CoC is committed to ensuring a diversity of voices and opinions throughout the decision-making process.

2. Several groups of people were involved in review, selection, and ranking of project applications, including Collaborative Applicant staff, committees, and CoC board. Of those who chose to disclose this information, 54% identified as Black/African American, 38% identified as white, 4% identified as American Indian/Alaskan Native/Indigenous, 2% identified as Asian/Asian American, and 2% identified as Hispanic/Latino (note: these percentages do not account for individuals who identified as multi-racial). The Detroit CoC is committed to ensuring a diversity of voices and opinions throughout the decision-making process.

3. All program participants in CoC funded projects are referred to those projects from the Coordinated Entry system. As a result, the extent to which the participants in those projects mirror the overall homeless system demographics is a reflection of our CE system, and less a reflection on the actual projects themselves, as the projects have little control over their “front door”. The CoC will consider in future competitions incorporating rating and ranking factors related to how projects remove barriers faced by people of different races and ethnicities.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	

Describe in the field below:	
1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1. The CoC has a policy and process dictating circumstances in which a project will be reallocated. Projects may be reallocated for one of two reasons: project performance or community need. Reallocation based on performance: All renewal projects are evaluated and scored on objective, published criteria. If a renewal project scores under 70%, that project will be reallocated unless an appeal is granted. Projects that score under 70% may appeal and provide rationale for why the project should continue to be funded. If the appeal is not granted, the project will be reallocated. The reallocation may be either a total reallocation of the project’s budget or a partial reallocation.

Reallocation based on need: The CoC uses data (gaps analysis, annual HMIS data, and CE data) to ensure the projects submitted to HUD align with community needs. If the CoC board decides to reallocate a project for reasons other than performance, that decision must be supported by data. Projects selected for reallocation for not meeting a community need are able to appeal this decision.

2. Using the CoC’s published renewal project evaluation criteria and reallocation policies, 7 renewal projects were identified a possible reallocation due to low project performance. All 7 of these projects fell below the CoC’s 70% scoring threshold.

3. Of the 7 projects identified for reallocation, 6 are being partially reallocated. The reason for the partial reallocation is that the projects all had aspects of poor performance, resulting in their not meeting the CoC’s 70% score threshold. The projects all appealed the reallocation decision (as is allowable per CoC policy). However, their appeals were denied and the decision to reallocate was upheld.

4. Of the 7 projects identified for reallocation, 1 project fell below the CoC’s scoring threshold due to poor performance but is not being reallocated. In accordance with CoC policy, the project appealed this reallocated decision. Based on the rationale provided in the appeal, the appeal was granted and the CoC board approved the project to be submitted for full funding. This project will be placed on a corrective action plan in the coming year to address deficiencies. The CoC also determined all projects submitted for funding this year were needed by the CoC.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/13/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/25/2023
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	

You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/25/2023
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2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored—For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Statewide
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/27/2023
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2022 HMIS Data Standards; and	

(limit 2,500 characters)

Not applicable: All bed coverage rates in the table above are greater than 84.99%.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	
	Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes

2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/25/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/27/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:	
	1. engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process;	
	2. worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and	
	3. included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count.	

(limit 2,500 characters)

1. The CoC consulted with youth-serving organizations and providers consulted with youth with lived experience to receive input on how to engage youth and how to ask questions related to SOGIE (sexual orientation, gender identity, and expression), HIV/AIDS status, disabilities and substance and mental health needs.

2. Youth homeless service providers were a part of the unsheltered point in time count. Additionally, several youth likewise participated in the unsheltered street count. The CoC planned to have special events to reach out specifically to youth however, due to an uptick in COVID-19 cases the special events were canceled. Instead, youth teams (which included persons with lived experience of homelessness) were assembled to count youth in known locations and administer the specialized youth survey.

3. The conversations the CoC had with youth-serving organizations while planning for the PIT also included discussions on known locations where youth tend to be. Additionally, youth teams participating in the PIT counted in those areas where youth were most likely to be identified.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

1. There were changes in providers contributing data for the count which includes a change in emergency shelter capacity. In 2022, two temporary emergency shelter hotel/motel projects came online that allowed our community to serve 319 additional clients for PIT 2022. However, in 2023 the Hotel/Motel programs that were funded with COVID-19 relief funds to fund temporary emergency shelters began to ramp down which resulted in approximately 200-bed loss of capacity. Although our CoC had more hotel/motel providers for 2023 PIT, there was much less capacity available. Some shelters did not ramp back up to full capacity from COVID-19 bed restrictions. Another factor was that Housing Choice Vouchers also increased from 2022 to 2023 enabling the CoC to house more people.
2. The Detroit CoC did not conduct an unsheltered PIT Count in 2023.
3. In 2022 there were more short-term shelter beds readily available due to Covid-19 relief funding which resulted in an increase of the number of people we were able to serve in shelters. However, in 2023 with the increase of HCV more people were able to be housed and with the reduction of short-term beds less people were served in short-term temporary emergency shelters. These changes resulted in a 16% decrease of persons in shelter for PIT 2023.
4. The Detroit CoC did not conduct an unsheltered PIT count in 2023.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
	1. describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
	2. describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1. The CoC determined risk for first-time homelessness by using diversion and prevention assessment and screening tools when people first access CE.

- All persons who access CE are asked questions to assist them with identifying other options for safe housing and divert them from shelter. Risk factors include a lack of natural supports and a lack of income.
- Prevention programs prioritize people most at risk of homelessness or eviction. A screening tool is used to determine homeless risk. Eviction risk is determined by where the person is in the court process. This prioritization process ensures the persons facing the most urgent eviction crisis, and most at-risk of eviction, are prioritized first.

2. Strategies used to reduce the number of first time homeless:

- Diversion: Every attempt is made to divert persons seeking ES to a safe housing other than shelter. In CY22, 1,106 households were diverted from shelter an average of 4 households per day. This total represented 13% of people with a CE intake. Data show families were diverted at higher rates than individuals,
- Prevention: The past year has seen record levels of funding to prevent people from becoming homeless. The City of Detroit allocated \$842,435 in ESG/CDBG funding for prevention in 21-22, and \$962,770 for 22-23. Over the past year, the CoC distributed \$96.8 mm in ERAP. SSVF also provides prevention funding.
- A prevention provider is located within the 36th District Court building, to provide early identification and intervention for people in the eviction process.
- New housing resource helpline launched May 2023 to provide diversion/prevention resources for people at risk
- CE: Screening occurs at CE to determine risk of eviction or homelessness; persons at greater risk are prioritized.
- CE: The Detroit CoC is committed to ensuring the CE system is easily accessible and navigable for those experiencing, or at-risk of, homeless. Ongoing efforts are made to identify how to reduce barriers to CE, such as offering different methods for people to access CE (phone, walk in, mobile outreach, etc) in order to better divert people from homelessness.
- The CoC has found that people who are provided legal representation when going through the eviction process are less likely to end up experiencing homelessness and will promote the provision of resources to provide legal representation.

3. CAM Governance committee (diversion), prevention workgroup

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:
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1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	
	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1. Strategies:

- Over the past year the CoC worked with a Realty company to assist with recruiting landlords, increasing the pool of landlords willing to rent to program participants.
- The CoC is strategic about increasing the supply of housing funded via tax credits or other sources
- The CoC looks for ways to increase program staff capacity and quality of services, and analyzing on quarterly basis how long it takes to move a person from PSH/RRH referral to move-in to further identify points in the process where improvement is needed.
- “Moving Up” is used to move people from PSH/RRH into an HCV, freeing up PSH/RRH r for another person experiencing homelessness. The provision of EHV over the past 2 years has helped move people out of homelessness more quickly.
- Navigation services are provided to people assessed for PSH to help them exit shelter and access housing quickly.
- Navigation services to people in ES who may not otherwise receive such services and to people who are unsheltered as a part of our Street Outreach teams. In its first year of operation, this new program has proven successful in helping people in ES gain housing. Over the past year, this program has helped 133 households in shelter lease up with HCV.
- LOT data is provided quarterly to City of Detroit for program monitoring.
- Consideration is being given to the role shelters play in helping people exit homelessness quickly and how shelter capacity can be enhanced.
- The CoC will advocate for the reduction of barriers to housing, such as the need for documentation and advocate for increased resources to assist people with acquiring that documentation.

2. The CE assessment tools assess for the length of time a person has been homeless. First priority for PSH is chronically homeless with highest service needs and longest time homeless. Second priority is chronically homeless with longest time homeless. For RRH, LOT is a prioritization tie-breaking factor after prioritizing those who are unsheltered and/or fleeing domestic violence. The CoC continually analyzes its prioritization factors to ensure the most vulnerable and those with the longest lengths of time homeless are prioritized for housing.

3. The following CoC workgroups are responsible for implementing the above strategies: PSH & RRH workgroups, Moving Up, and Chronic and Veterans By-Name-List workgroups, and PSH case consult. The CoC's Performance and Evaluation Committee oversees above strategies.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section V.B.5.d.	
	In the field below:	
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.	

(limit 2,500 characters)

1. Strategies to improve ES performance:
- Performance expectations for ES are incorporated into City of Detroit contracts
 - Monthly ES workgroups a peer-sharing venue to trouble-shoot barriers to housing people
 - Performance and Evaluation Committee reviews quarterly shelter outcome data to determine systems changes may be needed to improve performance
 - Increased HCV targeted to persons in ES, and improved communication related to HCV, increasing person’s ability to exit shelter to permanent housing
 - Shelters with especially poor performance receive technical assistance; at times their funding may be reallocated to higher-performing providers
 - Shelter time limits lifted, allowing people to stay in shelter longer and increase chance of PH exit
 - New ESG-funded project implemented to provide Navigation services to people in shelter not otherwise eligible for Navigation. Navigation services increase the person’s ability to exit shelter to permanent housing. Over the past year, this program has helped 133 households in shelter lease up with HCV and another 101 households maintain their eligibility for HCV.
- Strategies to address performance in TH, RRH, and SH:
- CoC and ESG RRH evaluated on PH exit rates
 - CoC TH evaluated on PH exits rates
 - HCV used to transition persons in RRH to a permanent subsidy
 - The CoC will work with the VA to develop strategies to improve outcomes for SH projects (Low Demand GPD)
 - TH projects targeted to special populations to successfully address unique needs

2. PSH performance is high at 99% over the past three years. Strategies to maintain/increase this rate:
- The CoC uses data and gaps analysis to ensure the availability of appropriate, needed models of PSH
 - PSH projects evaluated on housing retention and Housing First
 - The CoC has been developing PSH quality standards; projects will be evaluated on those standards. Tech. assist. provided for projects not meeting quality standards
 - PSH providers receive training on best practices in service provision in PSH
 - Persons receiving PSH receive navigation services to assist with locating and moving into housing
 - Clients may be transferred from one PSH project to another to retain housing
 - Moving Up HCV used to transition persons in PSH to other PH
 - PSH case consult mtgs to avoid terminations

3. All provider workgroups (PSH, RRH, ES) oversee the outcomes of their projects. Performance & Evaluation Committee reviews and monitors project outcomes

2C-4.	Returns to Homelessness—CoC’s Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC’s strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC’s strategy to reduce the rate of additional returns to homelessness; and	

3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.
----	--

(limit 2,500 characters)

1. People who return to homelessness are identified when accessing CE, re-entering ES, or via contact with Street Outreach. Prior HMIS entries confirm if the person is returning to homelessness.

2. The following strategies are used to decrease returns to homelessness:
 - PSH programs are able to receive tech. assist. to build capacity to align services with best practices and quality standards, with the goal of programs being able to retain persons in housing or successful exits for program leavers.
 - CoC funded projects evaluated annually on rates of people returning to homelessness within 6 months of exit from their project to PH.
 - Bi-weekly PSH case conference identify strategies to assist persons at risk of losing their housing. If needed, PSH clients are transferred to another PSH provider to prevent loss of housing.
 - As resources allow, providers follow-up after a person exits, allowing for re-engagement if persons become at risk of re-entering homelessness.
 - ES programs have received funding to increase case management capacity and have been trained on case management provision, to assist clients with accessing housing.
 - Increased HCVs allowed persons on RRH or ES to transition to a permanent subsidy, decreasing risk of future homelessness.
 - CE diverts people from entering ES.
 - Prevention resources are targeted to people at-risk of homelessness.
 - If SO determines an unsheltered person is housed in PSH/RRH, they redirect the client back to housing.
 - The CoC has some projects targeted to special populations to successfully address unique needs.
 - Analysis of the CoC's Stella data shows single adults and persons who only use shelters have the highest rates of returns to homelessness. This analysis will help our CoC better understand where additional strategies are needed.
 - The CoC's newly implemented Capacity Building & Training Manager role will help ensure provider agencies receive training on best practices in service delivery including providing services in a trauma-informed and culturally informed manner. Improving the quality of services provided may reduce the risk of people returning to homelessness.
 - Recognize need to help ensure PSH staff are able to help clients access other perm housing resources client may qualify for (ex- senior housing, tax credit projects)

3. Entities responsible for these strategies:
 - Performance & Evaluation Committee, general oversight
 - PSH, RRH, ES, and Prevention Workgroups

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	

In the field below:	
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and

3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.
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(limit 2,500 characters)

1. In 2019 the CoC began developing a partnership between the CoC, Coordinated Entry, and Detroit's Workforce Development Department (Detroit At Work) to create greater alignment between workforce development system and homeless service system to create greater access to employment for people experiencing homelessness. Over the course of 2022, this partnership included direct referrals from CE to Detroit At Work. Upon contacting CE, households were asked three simple questions if they were interested in being referred to Detroit At Work (regardless of current employment status). In 2022, 647 households were referred to DAW from CE. Of the households referred to DAW in 2022, 168 received employment-related services.

People who call the main housing helpline in Detroit, even if they are not experiencing homelessness, may also receive a referral to employment services if such a referral would help meet their needs.

Additionally, a representative from Detroit At Work joined the CoC board in 2020. As of 2022, this individual remains on the CoC board and is currently working with an organization connecting job seekers with educational and employment opportunities.

2. Over the course of 2022, 168 households referred to Detroit at Work from CE received employment related services. DAW staff then worked with these households to get them connected to employment services. Additionally, the ERAP program in Detroit (known locally as CERA) developed new & improved partnership with the workforce development system. The DAW program connects ready to work Detroiters who are at risk of eviction or recently evicted to employment opportunities. The DAW Career Center quickly links CERA household members to job opportunities. These job opportunities focus on employers with short hiring processes. Housing case managers are utilized to ensure that households follow-up with DAW.

3. Performance and Evaluation committee provides general oversight for income and employment outcomes. CAM Governance committee provides oversight the work of CE, including strategy to refer people accessing CE to workforce development.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section V.B.5.f.	

	In the field below:	
	1. describe your CoC's strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

1. The CoC uses several strategies to increase non-employment cash income for persons served in homeless programs:
 - All CoC-funded projects are evaluated annually on the extent persons served by the project increase their non-employment cash income. Holding projects accountable for this outcome helps to ensure the projects are taking all steps necessary (including reporting accurate data) on how they increase client's non-cash income.
 - Street Outreach providers intentionally assist people with applying for SSI/SSDI benefits
 - Most homeless providers assist client access and navigate State's on-line benefits application portal (MiBridges)
 - The CoC also provides timely and relevant information to agencies about opportunities for clients to receive new, or increases in, non-employment cash income. This information is shared via the email listserv and at meeting.
 - 98% of CoC project applications submitted in FY2023 indicate program participants have access to SSI/SSDI technical assistance. 79% of project applications indicated the person providing this technical assistance completed SOAR training in the past 24 months; in the coming year the CoC will explore if additional SOAR training is needed for providers and/or promote SOAR training that is available.
 - The CoC HMIS Lead Agency will also continue to stress to agencies the importance of accurate data entry on income sources; data entry training will be provided for those agencies that need this assistance.

2. Position responsible for overseeing your CoC's strategy to increase non-employment cash income: Performance and Evaluation Committee

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
Dr. Maya Angelou ...	PH-PSH	47	Both
Campbell Street PSH	PH-PSH	45	Both
Mariners Inn PSH ...	PH-PSH	49	Housing

3A-3. List of Projects.

1. What is the name of the new project? Dr. Maya Angelou Village PSH
2. Enter the Unique Entity Identifier (UEI): GU6PNN4SSUP4
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 47
5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? Campbell Street PSH
2. Enter the Unique Entity Identifier (UEI): FBRMQ5EJHM81
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 45
5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? Mariners Inn PSH Expansion
2. Enter the Unique Entity Identifier (UEI): J4UDGCJ122M3

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your 49
CoC's Priority Listing:

5. Select the type of leverage: Housing

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

4A. DV Bonus Project Applicants for New DV Bonus Funding

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	Yes
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

4A-2.	Information About the Project Applicant for the New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project.	
	NOFO Section I.B.3.I(3)	

Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:

1.	Applicant Name	Michigan Coalition to End Domestic and Sexual Violence (MCEDSV)
2.	Project Name	Domestic Violence Coordinated Entry
3.	Project Ranking on Priority Listing	53

	4. Unique Entity Identifier (UEI)	X2EJLES6WUT3
	5. Amount Requested	\$528,000

4A-2a.	Addressing Coordinated Entry Inadequacies through the New SSO-CE DV Bonus Project.	
	NOFO Section I.B.3.I.(3)(c)	
	Describe in the field below:	
	1. the inadequacies of your CoC's current Coordinated Entry that limits its ability to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and	
	2. how the proposed project addresses inadequacies identified in element 1 of this question.	

(limit 2,500 characters)

1. Because so much of housing is geared to addressing and prevention of homelessness through provision of housing, the comprehensive reasons victims of violence are made homeless are often missed. DV is not a one-time event but a pattern of behavior by the perpetrator intentionally designed to harm, hurt and destabilize the victim. As a result of the perpetrator's intentional efforts to get a victim fired, get her evicted, or other abusive acts, the victims face homelessness. Not only is our current CE able to catch the complexity of the existing abuse, it also cannot tailor a response to the perpetrators' ongoing abuse. Detroit's current CE lacks the ability to serve DV victims. There is little coordination between the DV service delivery system and homeless system, meaning survivors may not be able to access all available resources in a trauma informed, survivor centered and safe way. While the current CE has some ongoing data access to open DV beds, this information may be incomplete and sporadic, leading to under-utilization of resources. Furthermore, the community in total does not have an ability to aggregate data between comparable databases and HMIS leaving it hard to craft a system that truly captures the needs of DV survivors.

2. To address this, the project proposes to have a dedicated CE access and navigation point with staff comprehensively trained in DV and safety planning staffed by the Mich. Coalition to End Domestic and Sexual Violence (MCEDSV). The DV specific CE will use DV best practices to address the needs of survivors that are currently not being provided through the existing CE process. MCEDSV will do safety planning with every caller and in person intake using trauma informed interviewing. Safety planning for survivors of DV requires in-depth training for new staff. Staff using motivational (trauma informed) interviewing helps a victim identify perpetrator generated risks and systems generated risk to develop a safety plan unique to the individual. In addition to safety, MCEDSV staff will also use the information gathered from trauma informed interviewing to evaluate the client for diversion and shelter. Diversion can include staying in the marital home, providing flexible funding assistance and eviction defense. Immediate shelter needs will also be addressed. MCEDSV will receive and track emergency DV shelter bed availability and also develop a way to aggregate data from its comparable database in this project.

	4A-2b. Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New SSO-CE DV Bonus Project.	
	NOFO Section I.B.3.I.(3)(d)	

	Describe in the field below how the new project will involve survivors:
1.	with a range of lived expertise; and
2.	in policy and program development throughout the project's operation.

(limit 2,500 characters)

1. The majority of MCEDSV staff are survivors of violence, some of our staff have also been homeless. Over the last five years, MCEDSV has worked to engage persons with lived experience of violence in our work, including survivors who have been homeless both through active staff recruitment and the solicitation of feedback. All clients are provided the opportunity to give feedback either in person or via written service to the process. In response to this feedback and parallel to emerging best practices across the field, MCEDSV moved from a form written safety plan with check boxes to a trauma informed, iterative safety plan guided by the victim's identification of their own personal risks. This has resulted in a much more usable plan for the victim. MCEDSV intentionally hires PWLE either as DV/HT/SA survivors or as persons who have experienced homelessness or both. We have done that through intentionally reviewing all hiring processes from where we post to how we value lived experience. We have changed our job postings to include community action centers, immigrant and LGBTQ community centers as well as targeting survivor friendly businesses including certain hair salons. Concurrently we changed our salary matrix to include salary bumps equal to education for persons who have lived experience for roles in which the funder does not require an advanced degree.

2. In the development of this project, MCEDSV will create and compensate an advisory board of survivors who have also been homeless to advise on the project as well as review all policies and procedures for the project. This group of advisors will work in collaboration with UMOJA, MCEDSV BIPOC identified anti-oppression group to ensure the policies and procedures are person centered, trauma informed and intersectional.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	3,178
2.	Enter the number of survivors your CoC is currently serving:	2,779
3.	Unmet Need:	399

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(c)	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

1. The following methodology was used to calculate the number of DV survivors needing housing/services vs. those receiving housing/services:

- **Total Needing Housing/Services:** This data was calculated by counting the total number of de-duplicated clients who reported being survivors of domestic violence (according to a 'yes' response to HUD data element 4.11), who were screened by Detroit's coordinated entry access sites and/or had an open entry in one of Detroit's 177 homeless service or prevention projects during FY2021-2022. The data also includes the number of de-duplicated referrals received by DV providers (minus those referred through CE).

- **Total Receiving Housing/Services:** Same calculation as above excluding CE access data and only focusing on clients receiving services by one of Detroit's homeless service/prevention providers or DV providers during FY2021-2022.

2. Data was sourced from Detroit CoC HMIS with aggregate data provided by DV partners via Empower & QuickBase comparable databases.

3. N/A

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)	
	Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.	

Applicant Name
Freedom House Det...

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	Freedom House Detroit
2.	Project Name	TH-RRH for DV Pgm 2024
3.	Project Rank on the Priority Listing	52
4.	Unique Entity Identifier (UEI)	HB3HABN9VJT6
5.	Amount Requested	\$735,371
6.	Rate of Housing Placement of DV Survivors–Percentage	95%
7.	Rate of Housing Retention of DV Survivors–Percentage	100%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. Rate Calculations: The housing placement rate was taken from an APR generated from Detroit’s HMIS and covering the period of 01/01/2022 - 12/31/2022 (calendar year 2022). The housing retention rate is taken from HMIS recidivism data run by the local HMIS lead agency, the Homeless Action Network of Detroit (HAND). HAND found that FHD’s former clients have a near 0% rate of returning to homelessness. This recidivism data is supported by several contextual factors:
 - a. Although FHD lacks the funding needed to track client outcomes after exiting to permanent housing, its legal aid program continues to serve many clients post-exit—for asylum interview preparation, family reunification, work authorization renewals, and naturalization after exiting the program—and continues to be a primary source of community for many former clients. Through this service channel or community grapevine, new or recurring instances of homelessness would become known, and such instances have not been found.
 - b. As the only shelter and transitional housing provider in Michigan solely dedicated to people seeking humanitarian protection, clients who did not sustain their housing would likely return to FHD for shelter.
2. Safe Housing Destinations: Yes, the rates provided account for exits to safe housing destinations. FHD currently uses HMIS and tracks destinations based on HUD-designated destination responses.
3. Data Source: All data is generated from HMIS.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;	
3.	determined which supportive services survivors needed;	
4.	connected survivors to supportive services; and	
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1. Quick Move to Housing: These survivors are not eligible to obtain employment until more than six months after they submit their application for protection which can take months to prepare. FHD leverages this time by helping clients address health needs, learn English, begin resume building, and navigate public transit. As soon as work authorization is granted, FHD moves swiftly to help survivors begin job searching, opening savings accounts, and searching for suitable housing.

2. Prioritizing Survivors: Under the inclusive terms of HUD’s Category 4 definition of homelessness, survivors of persecution and torture are victims of domestic violence. At FHD, over 70% of clients are torture survivors. By these standards, every client served by FHD is a DV survivor. FHD is Michigan’s only full-service provider for people seeking humanitarian protection. FHD acts as the housing assessment and resource agency (HARA) for this population because HAND, the City of Detroit, and the CoC agreed this population lacks the acculturative knowledge needed to navigate the US homeless system.

3. Determining Supp Svcs: For 40 years, FHD has continued to develop programming to meet this population’s needs addressed by four key program areas: housing, healthcare, employment, and legal aid, all provided through an acculturative lens. Using trauma-informed practices, survivors meet with their care team to set self-sufficiency goals in each of these areas based on survivor choice.

4. Connecting to Supp Svcs: FHD directly provides shelter and transitional housing, case coordination, legal aid, basic needs, and large systems navigation coaching (public transit, state ID documents, etc.). It partners with medical and mental health care, job training, ESL, and computer literacy providers to ensure survivors can meet their goals. Most of FHD’s clients are ineligible for mainstream benefits until after they receive a grant of humanitarian protection—which can take years.

5. Sustaining Housing: Over the last ten years, FHD’s average rate of exits to permanent housing is 90%. This population does not have a history of chronic homelessness. FHD’s clients were thrown into first-time homelessness because of persecution and violence in their home countries. FHD focuses its efforts on acculturative literacy that prepares clients to sustain housing—including housing literacy, employment training, and using public transportation.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality.	

(limit 2,500 characters)

1. Intake Privacy: For meetings where sensitive information may be revealed, FHD has two private meeting rooms as well as white noise machines to mask the conversation from people passing in the hallway. Typically, people seeking humanitarian protection do not travel with their perpetrators. If domestic violence is suspected within a client household, FHD staff will conduct separate intakes with each adult.

2. Placement: Staff work with the client to ensure a clear understanding of the perpetrator's location and other sources of potential danger--such as local, cultural communities that may be connected to perpetrators back home. Only housing options located away from local dangers and perpetrators will be selected. Staff also train clients on the use of 911 and how to access staff during non-office hours.

3. Confidentiality: Typically, people seeking humanitarian protection travel on their own, in fear of authorities and without transportation and American currency. For its clients' safety, FHD cannot afford to have a remote, confidential location. FHD has over 15 years of experience in handling personal identifiable information. Its standard operating procedures cover client releases of information, timely data entry, use of password protected databases only, securing written records with a lock and key, confidentiality agreements, and more.

4. Staff Training: Annually, site staff are required to participate in CPR and active shooter response training. All staff and clients are trained to respond to potentially unsafe situations using an internal protocol that alerts staff to direct clients to their rooms until the danger has passed. Staff take annual privacy training are trained not to share client location or details with anyone outside of staff. Privacy practices are updated in policy manuals.

5. Site Security: If a perpetrator is local and a photo is available, the perpetrator's name and face are provided to staff to help them identify the person and external doors are kept locked. FHD does not have bars on its windows because that feature could actually be triggering for persons who have been tortured and held captive. All hallway lights remain on 24/7 for the safety and protection of clients. Common areas and hallways are supervised by staff. The congregate site is staffed nearly 24 hours per day. Please also see the response to 4A-3d #2 (placement, above).

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(d)
	Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

- FHD focuses on following when evaluating survivor’s safety:
- a. Perpetrator Location and Relationship to Survivor: Most of FHD clients’ perpetrators are government officials located in their home countries. Violence perpetrated by authorities typically involves torture and detainment/captivity. In rare circumstances, FHD serves survivors whose perpetrators are local or family members. The safety needs for these two populations are different. FHD’s security measures are designed to serve the first population. When survivors with local or family perpetrators present, FHD works with the survivor to determine where they will feel most safe. In such cases, the survivor may need a single-gender and/or hidden-location provider.
 - b. Site Security, Data Protocols, and Staff Training: FHD has processes and protocols in place to ensure the physical security of the site and security/confidentiality of data; all staff are trained on these protocols.
 - c. Service Outcomes: Clients have safe housing where they are not at risk of homelessness, exploitation, being returned to their home countries, or in fear of their perpetrators. Clients have a legal representative working their case, so they can formally request protection and gain status as applicants seeking protection and apply for work authorization. Clients receive health care to treat wounds from violence they experienced. Clients gain acculturative knowledge, like how to navigate US systems and to speak English, so they can earn a living.
 - d. Trauma-Informed Approaches: To ensure clients feel respected and have a sense of agency, FHD prioritizes client choice in housing placement and all services. It asks clients for feedback and employs an interventionist, rather than punitive, approach to disruptive client behaviors. FHD provides access to mental health counseling. It employs strengths-focused care management. It ensures cultural responsiveness and inclusivity in service delivery—through language assistance (at least 5 languages are spoken at the house at one time). FHD connects clients to cultural and recreational experiences and offers support to parents who may be challenged by new cultural norms and raising children in a congregate setting.
 - e. Improvement Areas: Safety and privacy procedures are continually evaluated to meet client needs. If funded, FHD will reevaluate scattered site housing safety protocols—testing and updating the procedure for clients who have emergencies after 5pm.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of the project applicant’s experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	

4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. **Prioritize Client Choice in Housing Placement:** In marginalized communities, choice means nothing without equity. At the moment of arrival to FHD, this client population has only been in the US for a few months; most do not speak English. Unlike US-born unhoused persons, FHD’s clients have to learn about large US systems, including housing, banking, employment, and more; they must apply for protection with the federal government and receive work authorization before they can support themselves. They are not eligible for mainstream benefits. Moreover, these clients are arriving having recently survived mental, physical, and emotional traumas due to experiences of violence, upheaval, torture, detainment, dangerous journeys, and family separations.

If FHD is to provide equitable choice to its clients, it has to help clients prepare for those choices, and it can only do so by addressing the challenges listed above. Therefore, in keeping with evidence-based practices for unhoused, refugee populations as well as trauma-informed and victim-centered approaches, FHD provides clients with and connects them to the resources they need to begin physically and mentally recovering and to learn how to navigate their new community. As clients acculturate and heal, they continually work with their case manager to develop their care plan and make informed, housing decisions. This model ensures that every client receives the same knowledge and that FHD’s clients have a level of knowledge approaching that of US-born unhoused persons as related to housing literacy and housing options. Client choice is not the result of reaching prescribed milestones; rather client choice is a result of acquiring the basic knowledge necessary to make a choice in a new country.

2. **Environment of Mutual Respect:** Along with case manager meetings, House Meetings provide opportunities for shelter and TH clients to voice their opinions and concerns, build confidence, and affect change in policies and procedures. Upon arrival, staff inform clients of the expectations and rules of the house, so clients have a clear understanding of what to expect. Instead of punitive measures to address disruptive client behaviors, staff employ an intervention process, working with clients as partners to address the underlying causes of these behaviors and move toward a resolution.

3. **Trauma Information for Clients:** Clients are encouraged to attend and given free transportation to counseling appointments with a local mental health provider. In these sessions, clients learn about PTSD, its causes and symptoms, and how it can impact their relationships with others, including their housemates. Counseling teaches clients coping skills to manage their PTSD. The therapists are trained in serving victims of torture, so they practice evidence-based therapy geared towards refugees and victims of torture.

4. **Strengths-Focused Care Management:** Case managers meet with clients to build and adjust the clients’ care plans according to the client’s skills, objectives, experiences, and health needs. Case managers encourage clients to participate in all offered services and opportunities. FHD utilizes an interdepartmental coordinated care model because clients communicate their trauma in various ways, sharing different pieces of their stories with different staff.

5. **Cultural Responsiveness and Inclusivity:** FHD employs a diverse staff and board. Annually, all staff are required to take cultural competency training. FHD serves clients who come to the US from all over the world. On any given day, at

least three languages are spoken and cultures from multiple regions across the globe are represented. FHD has bilingual staff who speak multiple languages fluently, and it recruits volunteers or utilizes third party language services to ensure clients and staff effectively communicate.

6. Connections: In addition to peer supports (client-facing staff with lived experience, client-volunteer roles, congregate housing housemates, alumni panels, and moving into neighborhoods where former clients have formed a community), FHD offers transportation to/from cultural and religious activities, job training programs, and recreation excursions to the local YMCA.

7. Parenting Supports: The site manager and social services director provide regular parent meetings to discuss challenges parents are facing raising children in a community setting and to help parents provide support for other parents. FHD enrolls all school-aged children in school. FHD also connects every child client and their family with the local Homeless McKinney-Vento Youth Liaison to ensure children have access to all potential resources available to them. Each eligible child is also referred to mental health services for children who have witnessed DV situations.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

(limit 5,000 characters)

Housing Search and Counseling:

- Housing Literacy: FHD guide clients through the housing search process, helping them find affordable, safe options that are accessible to public transportation, food, work, and schools; helping them understand the contents and purpose of lease agreements; coaching clients on rent reasonableness—safety, privacy, and affordability; and assessing safest locations—which may be near or far from a client’s local, cultural community. (While such communities can be supportive, they can also be detrimental—either carrying the same prejudices that threatened the client back home or having connections to perpetrators back home.)

- Housing Advocacy: FHD will cultivate a landlord network that welcomes and respects foreign-born tenants. This network is important because clients lack traditional documentation and work histories that typically serve as a tenant’s credentials. FHD will provide interpreter and translator support during housing search, lease negotiations, and at lease signing; housing search coaching and resources; and transportation to view housing options.

Long-term Housing Stability and Safety Planning:

- Humanitarian Protection: FHD guides clients through the legal process, prepares the application for protection; coordinates evidence collection; represents clients at all official proceedings and advocates on their behalf; prepares clients for legal interviews and other procedural appointments; coordinates interpreters and translators; and petitions for employment authorization. Protection is a client’s surest path to housing stability and safety.
- Identity Documents: FHD guides clients through applying for a state driver’s license or ID and social security card.
- Public Transportation & Driving: FHD provides free transportation using its own vehicles as well as bus passes for public transportation and provides public transportation training. Transportation is necessary for medical and mental health and legal appointments as well job search and work.
- Mental Health Counseling: FHD encourages clients to attend counseling appointments with a local service partner to learn about PTSD, coping skills, and its impact on family and housemates. (FHD is poised to hire two therapists onto its staff to ensure greater mental health support and accessibility for all clients.)
- Medical Care and Health Literacy: FHD cultivates relationships with medical, dental, and vision care partners and helps grow trust between those providers and the residents. FHD partners with a local university to provide triage support for clients presenting any array of symptoms. FHD’s health disparities program offers health literacy workshops and vaccine and testing clinics to FHD’s clients and the broader community.
- k-12 Enrollment: FHD ensures all school-age children are enrolled in school and in the McKinney-Vento homeless youth program for resources like back to school supplies.
- Training for English as an Additional Language (TEAL): FHD connects clients with service partners who offer English language learning classes.

Building a Credit History: FHD helps clients apply for social security numbers and open bank accounts. FHD is also partnering with PNC to offer financial literacy training to clients. In the US, FHD’s clients must start saving money and building a credit history from scratch.

Job Preparation: FHD cultivates relationships with employers, so clients can

access volunteer opportunities that provide American workplace experience. FHD also coaches clients on building resumes; (in many other countries, a curriculum vitae is used), navigating job search sites, and interview preparation. FHD partners with technical skills and certification training programs, so clients can gain post-secondary education credentials in a technical field.

Family Reunification: After clients exit FHD’s housing programs, they continue to receive follow-on, pro bono or reduced-cost legal services, including work authorization renewals, changes of status, and family reunification. As with US-born unhoused persons, FHD’s clients’ well-being and stability benefits from reuniting with their families.

Crisis DV Services: FHD is staffed nearly 24/7, so anyone seeking humanitarian protection can arrive at any time day or night. Its business line is available 40 hours a week to respond to calls for assistance. Even persons who do not qualify are provided with information and referral resources, so they can try to find help elsewhere.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

Describe in the field below examples of how the new project(s) will:	
1.	prioritize placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants’ strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. **Prioritize Client Choice in Housing Placement:** In marginalized communities, choice means nothing without equity. Upon arrival to FHD, this client population has only been in the US for a few months; most do not speak English. Unlike US-born unhoused persons, FHD’s clients have to learn about large US systems, including housing, banking, employment, and more; they must apply for protection with the federal government and receive work authorization before they can support themselves. They are not eligible for mainstream benefits. Moreover, these clients are arriving having recently survived mental, physical, and emotional traumas due to experiences of violence, upheaval, torture, detainment, dangerous journeys, and family separations.

If FHD is to provide equitable choice to its clients, it must help clients prepare for those choices, and can only do so by addressing the challenges listed above. Therefore, in keeping with evidence-based practices for unhoused, refugee populations as well as trauma-informed and victim-centered approaches, FHD will provide clients with and connect them to resources they need to begin physically and mentally recovering and to learn how to navigate their new community. As clients acculturate and heal, they will continually work with their case manager to develop their care plan and make informed, housing decisions. This model ensures every client receives the same knowledge and that FHD’s clients have a level of knowledge approaching that of US-born unhoused persons as related to housing literacy and housing options. Client choice is not the result of reaching prescribed milestones; rather client choice is a result of acquiring the basic knowledge necessary to make a choice in a new country.

2. **Environment of Mutual Respect:** Along with case manager meetings, House Meetings will provide opportunities for clients to voice their opinions and concerns, build confidence, and affect change in policies and procedures. Upon arrival, staff will inform clients of the expectations and rules of the house, so clients have a clear understanding of what to expect. Instead of punitive measures to address disruptive client behaviors, staff will employ an intervention process, working with clients as partners to address the underlying causes of these behaviors and move toward a resolution.

3. **Trauma Information for Clients:** Clients will be encouraged to attend and given transportation to counseling with a local mental health provider. In these sessions, clients learn about PTSD, its causes and symptoms, and how it can impact their relationships with others, including their housemates. Counseling will teach clients coping skills to manage their PTSD. The therapists are trained in serving victims of torture, so they practice evidence-based therapy geared towards refugees and victims of torture.

4. **Strengths-Focused Care Management:** Case managers will meet with clients to build and adjust the clients’ care plans according to the client’s skills, objectives, experiences, and health needs. Case managers will encourage clients to participate in all offered services and opportunities. FHD will utilize an interdepartmental coordinated care model because clients communicate their trauma in various ways, sharing different pieces of their stories with different staff.

5. **Cultural Responsiveness and Inclusivity:** FHD will continue to employ a diverse staff and board. Annually, all staff will be required to take cultural competency training. FHD serves clients who come to the US from all over the

world. On any given day, at least three languages are spoken and cultures from multiple regions across the globe are represented. FHD has bilingual staff who speak multiple languages fluently, and uses volunteers or 3rd party language services to ensure clients and staff effectively communicate.

6. Connections: In addition to peer supports (client-facing staff with lived experience, client-volunteer roles, congregate housing housemates, alumni panels, and moving to neighborhoods where former clients have formed a community), FHD will offer transportation to/from cultural and religious activities, job training programs, and recreation at the local YMCA.

7. Parenting Supports: The site manager and social services director will provide regular parent meetings to discuss challenges parents face raising children in a community setting and to help parents provide support for other parents. FHD will enroll all school-aged children in school. FHD will connect every child client and their family with the local Homeless McKinney-Vento Youth Liaison to ensure children have access to all potential resources available to them. Each eligible child will be referred to mental health services for children who have witnessed DV situations. If funded, FHD will be able to hire an additional case manager who will outreach to local schools to train them on FHD’s population and their unique needs.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(f)		
Describe in the field below how the new project will involve survivors:		
1.	with a range of lived expertise; and	
2.	in policy and program development throughout the project’s operation.	

(limit 2,500 characters)

1. Range of Lived Experience: Nearly all of FHD’s clients have suffered a form of persecution because of their race, religion, nationality, membership in a particular social group (women or LGBTQ, for instance), or political opinion. They come from countries across the globe. In 2022, 29 countries, 5 continents, and 17 languages were represented at the house. To ensure sustainability and success, FHD engages current and former clients, people with firsthand or family immigrant experiences, and traditionally marginalized populations, including women and people of color.

2. Policy and Program Development:

- Client-Level Feedback: Along with direct communications to staff, FHD holds house meetings where all clients can ask questions, give feedback, and recommend changes. FHD provides interpretation support for these meetings. Client feedback is addressed on the spot or taken into the next staff meeting to determine the best solution. In response to client feedback, FHD launched a driver’s license and insurance training for clients, many of whom come with international driver’s licenses; added additional activities promoting mental health wellness and lifelong peer support; and increased the frequency of Ask the Doctors sessions that teach clients to be their own health advocates.

- Leadership: The board of directors represents a variety of individuals from different backgrounds and cultural experiences and is split equally between women and men and includes Latine, Arab-American, and Black or African American members. FHD’s by-laws require at least one member to have lived experience. Today, three members are former clients. The board president immigrated to the US from Romania, and the chief executive officer (CEO) is a woman who immigrated to the US from Mexico.

- Staff/Hiring: Three former clients currently serve on the site team, one of whom is the manager of that team. To provide job pathways for alumni (former clients) and other immigrant communities, FHD prioritizes multilingual job candidates, is actively seeking funding for an in-house fellowship program that would provide on the job training for former clients, engages alumni to volunteer on the board and in client activities, and restructured staffing to ensure a pathway for career advancement for foreign-born and lived-experience job candidates who need entry level positions, so they can learn through on the job training as they improve their English fluency and professional skills.

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
 - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
 - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	MI-501 PHA Homele...	09/22/2023
1C-7. PHA Moving On Preference	No	MI-501 Moving On ...	09/22/2023
1D-11a. Letter Signed by Working Group	Yes	MI-501 Letter Sig...	09/21/2023
1D-2a. Housing First Evaluation	Yes	MI-501 Housing Fi...	09/21/2023
1E-1. Web Posting of Local Competition Deadline	Yes	MI-501 Web Postin...	09/21/2023
1E-2. Local Competition Scoring Tool	Yes	MI-501 Local Comp...	09/22/2023
1E-2a. Scored Forms for One Project	Yes	MI-501 Scored For...	08/16/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	MI-501 Notificati...	09/21/2023
1E-5a. Notification of Projects Accepted	Yes	MI-501 Notificati...	09/13/2023
1E-5b. Local Competition Selection Results	Yes	MI-501 Final Proj...	09/21/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	MI-501 Web Postin...	09/25/2023

1E-5d. Notification of CoC-Approved Consolidated Application	Yes	MI-501 Notificati...	09/26/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	MI-501 FY2023 HDX...	09/21/2023
3A-1a. Housing Leveraging Commitments	No	MI-501 Housing Le...	09/22/2023
3A-2a. Healthcare Formal Agreements	No	MI-501 Healthcare...	09/22/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: MI-501 PHA Homeless Preference

Attachment Details

Document Description: MI-501 Moving On Preference

Attachment Details

Document Description: MI-501 Letter Signed by Working Group

Attachment Details

Document Description: MI-501 Housing First Evaluation

Attachment Details

Document Description: MI-501 Web Posting Local Competition Deadline

Attachment Details

Document Description: MI-501 Local Competition Scoring Tool

Attachment Details

Document Description: MI-501 Scored Forms for One Project

Attachment Details

Document Description: MI-501 Notification of Projects Rejected-Reduced

Attachment Details

Document Description: MI-501 Notification of Projects Accepted

Attachment Details

Document Description: MI-501 Final Project Scores for All Projects

Attachment Details

Document Description: MI-501 Web Posting CoC Approved Consolidated Application

Attachment Details

Document Description: MI-501 Notification of CoC Approved Consolidated Application

Attachment Details

Document Description: MI-501 FY2023 HDX Report

Attachment Details

Document Description: MI-501 Housing Leveraging Commitment

Attachment Details

Document Description: MI-501 Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	08/01/2023
1B. Inclusive Structure	09/21/2023
1C. Coordination and Engagement	09/20/2023
1D. Coordination and Engagement Cont'd	09/26/2023
1E. Project Review/Ranking	09/26/2023
2A. HMIS Implementation	09/26/2023
2B. Point-in-Time (PIT) Count	09/26/2023
2C. System Performance	09/26/2023
3A. Coordination with Housing and Healthcare	09/26/2023
3B. Rehabilitation/New Construction Costs	09/21/2023
3C. Serving Homeless Under Other Federal Statutes	09/26/2023

4A. DV Bonus Project Applicants	09/26/2023
4B. Attachments Screen	09/26/2023
Submission Summary	No Input Required

Attachment 1C-7: PHA Homeless Preference

CoC: MI-501

Attached are excerpts from the admin plans for the Detroit Housing Commission and Michigan State Housing Development Authority noting their homeless preference for HCV.



Binder2

2

**DHC FY 2023 ANNUAL PLAN
CFP FY 2023 5-YEAR ACTION PLAN**

FINAL

The family's response maybe in writing and may be delivered by mail or other means as DHC prescribes within its notice to the applicant. Responses can also be completed through the DHC Applicant portal. Responses must be received by DHC not later than 10 business days from the date of DHC's update request. If the family fails to respond within 10 business days, the family's application will be removed from the waiting list without further notice, and the applicant will have no right to an informal review. If the notice is returned by the post office, the applicant will be removed from the waiting list without further notice, and the applicant will have no right to an informal review.

If a family is removed from the waiting list for failure to respond, the Chief Operating Officer of Rental Assistance, or designee, may reinstate the family if s/he determines the lack of response was due to DHC error or to circumstances beyond the family's control. The family must offer specific and compelling documentation to substantiate its claim. If the applicant did not respond to DHC's request because of a family member's disability, DHC may reinstate the family on the waiting list if the disability is substantiated in accordance with the reasonable accommodation process established in Chapter 2.

In all cases, the family must make a written request to be reinstated to the list within sixty (60) calendar days of the date the family was removed from the list.

4-2G. REASONABLE ACCOMODATIONS

If requested as a reasonable accommodation for a person with a disability, an extension of 10 business days to respond to the update request may be granted upon review of the request in accordance with Chapter 2 of this Admin Plan.

4-2 H. REMOVAL FROM THE WAITING LIST

If at any time an applicant family is on the waiting list, and DHC determines that the family is not eligible for assistance (see Chapter 3), the family must be removed from the waiting list.

If a family is removed from the waiting list because DHC has determined the family is not eligible for assistance, a notice must be sent to the family's address of record provided on the initial application or updated address as has been submitted by the family. The notice will state the reason(s) the family was removed from the waiting list and will inform the family if they are eligible to request an informal review and how to request such review regarding DHC's decision (see Chapter 16).

PART III: SELECTION FOR HCV ASSISTANCE

4-3 A. OVERVIEW

As vouchers become available, families on the waiting list will be selected for assistance in accordance with the policies described in this part. The order in which families receive assistance from the waiting list depends on the selection method chosen by DHC and is impacted in part by any selection preferences that the family qualifies for. The source of HCV funding also may affect the order in which families are selected from the waiting list.

DHC will maintain a clear record of all information required to verify that the family is selected from the waiting list according to DHC's selection policies.

4-3 B. SELECTION AND HCV FUNDING SOURCES

1. Special Admissions

HUD may award funding for specifically named families living in specified types of units, e.g., a family that is displaced by demolition of public housing; a family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term.

If HUD awards DHC funding that is targeted for families living in specified units:

- DHC will use the assistance for eligible families living in these units; and
- DHC may admit such a family that is not already on DHC's waiting list, or without considering the family's current waiting list position.

DHC will maintain separate records of these admissions that demonstrate that the family was admitted with HUD-targeted assistance.

2. Selection Method

DHC will describe the method for selecting applicant families from the waiting list, including the system of admission preferences that DHC will use.

3. Local Preferences

DHC is permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits DHC to establish other local preferences, at its discretion. Any local preferences established must be consistent with DHC's Admin Plan and the consolidated plan and must be based on local housing needs and priorities.

DHC will select families from the HCV Tenant Based Waiting List based on the following preferences using a point system:

- Families terminated from DHC's HCV program due to insufficient funding 50 Points
- Families displaced by a natural disaster or government action 30 Points
- Mainstream Disabled 25 Points

Verification of Preference

All preferences will be verified. For example, the preference associated with insufficient funding will be validated through DHC's termination records and notices. Persons claiming displacement by natural disaster or government action will have to provide acceptable government documentation such as FEMA status. Persons claiming MSD classification will be verified for specific program requirements.

The preferences identified below are unique in classification and require specific program referrals. The preference selection is also limited to specific number or annual allocation based on the classification.

The referral applicants with these preferences will be placed on program specific waiting lists with a priority (point) selection based on funding availability following an annual selection of 200 names from the DHC traditional HCV Tenant Based Waiting list. DHC has established a point system to determine applicant selection based on the severity of housing need. Selection from the referral program waiting lists will be identified through the following point system:

- Displacement by DHC: 20 points
- VAWA Victims: 15 points
- Victims of Human Trafficking: 13 points
- Displaced Families with a Child(ren) Six of Younger with Elevated Blood Lead Levels: 12 points
- Homeless and Transitioning from Permanent Supportive Housing: 10 points
- VASH Voucher Holders Transitioning from Permanent Supportive Housing: 5 points

The selection of applicants will follow the order of date and time based on receipt of the completed referral. Based on the uniqueness of the programs and the referral requirement an applicant should be listed on one list. An applicant could be and will remain on the traditional HCV Tenant Based Waiting list.

Local Preference Related to the Mainstream Disabled Voucher Program (MSD Program)

The mainstream disabled program is a target funded program requiring a preference to the tenant-based voucher waiting list for 75 vouchers. A preference is available for up to 75 vouchers to families that include non-elderly, (persons 18 to under 62 years of age at

contract) persons with disabilities. DHC will provide an admission preference to MSD Program-eligible households that are in one or more of the following groups:

- a. Transitioning out of institutional or other segregated settings.
- b. At serious risk of institutionalization.
- c. Currently experiencing Homelessness in Wayne and Macomb County.
- d. Previously experienced homelessness and is a resident of permanent supportive housing or a rapid rehousing project in Wayne and Macomb County.
- e. At risk of experiencing homelessness in Wayne and Macomb County.

A preference does not guarantee program eligibility.

DHC has established partnerships with the following four partners: The Out-Wayne Continuum of Care (Out-Wayne COC), the Detroit Continuum of Care (Detroit COC) the Macomb County Continuum of Care (Macomb COC) and The Information Center (TIC).

DHC will enter an agreement with each of its partners. Each agreement will be established based on the population to be served. The terms and conditions of each agreement must be agreed to and signed by DHC's Executive Director. DHC will not accept referrals from an agency, organization or consortia that denies its services to members of any federally protected class under fair housing laws.

The waitlist for this preference will never close.

Local Preference Related to Homelessness and Transitioning from Permanent Supportive Housing

DHC will provide housing assistance with up to 225 vouchers per year through the Housing Choice Voucher Program to eligible persons who are referred for assistance through formal agreements with partnering organizations. All applicants assisted in this category must apply with and be referred to DHC by an agency, organization, or consortia, that provides services to the homeless with which DHC has a formal agreement. Each agreement will be established based on the population to be served and the terms and conditions presented to and agreed upon by the Executive Director. DHC has the right to limit the number of partner organizations to insure administrative efficiency. DHC will not accept referrals from an agency, organization or consortia that denies its services to members of any Federally protected class under fair housing laws.

In furtherance of its fight against homelessness, a local preference is available for families that "participate in a homeless program" or that are "transitioning from permanent supportive housing" and are referred to DHC by an organization with which DHC has a formal agreement. The waitlists for these categories will never close.

Local Preference Related to VASH Voucher Holders Transitioning from Permanent Supportive Housing

A local preference is available for families receiving VASH assistance who no longer require permanent supportive housing as mutually agreed upon by the adult family members and MSHDA and the area VA Medical Center. The transition from permanent supportive housing requires the family to have participated in the VASH program for the last five years. The family must be referred to DHC by an agency, organization, or consortia with which DHC has a formal partnering agreement. The terms and conditions of all agreements will be based on the population to be served. Agreements must be signed by DHC's Executive Director. DHC will not accept referrals from an agency, organization or consortia that denies its services to members of any Federally protected class under fair housing laws.

DHC will provide housing assistance under this preference with up to 25 tenant-based vouchers per year through the Housing Choice Voucher Program. All families assisted under this preference must be referred to MSHDA and the area VA Medical Center by an agency, organization, or consortia with which DHC has a formal agreement. MSHDA and the area VA Medical Center must jointly approve and refer the family to DHC. DHC will enter formal agreements with MSHDA and the area VA Medical Center. These agreements must be signed by DHC's Executive Director.

This preference will have equal weight to other preferences but will be maintained on waitlist(s) separate from DHC's other HCV waitlists. The waitlist(s) for this preference will never close.

Local Preference – Displacement by DHC:

A resident who is displaced from a DHC-owned public housing property as a result of a failure of a building system, fire, flooding, environmental or other failure beyond DHC's control and where DHC has no suitable, available DHC-owned public housing replacement unit will be eligible for a local preference to receive a voucher from the Housing Choice Voucher Program upon referral by DHC. The preference does not guarantee program eligibility. Applicants will not be referred if alternate public housing accommodations have been offered and refused by the resident. Referral is limited to events where the Executive Director has approved the use of the preference in writing. The preference is limited to 50 vouchers annually. There will be a separate waitlist for this preference. The waitlist will never close.

Local Preference Related to VAWA Victims

DHC will offer a preference to families that include victims of domestic violence, dating violence, sexual assault, or stalking who has either been referred by a partnering service agency, a consortium, the Director of DHC's Resident Services or is seeking an emergency transfer under VAWA from the DHC's public housing program when the

PHA (Michigan State Housing Development Authority) Plan noting homeless preference and Moving Up preference.

<p>Streamlined Annual PHA Plan <i>(HCV Only PHAs)</i></p>	<p>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</p>	<p>OMB No. 2577-0226 Expires 03/31/2024</p>
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Purpose. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, including changes to these policies, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

Applicability. The Form HUD-50075-HCV is to be completed annually by **HCV-Only PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, Small PHA, or Qualified PHA do not need to submit this form. Where applicable, separate Annual PHA Plan forms are available for each of these types of PHAs.

Definitions.

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments if administering both programs, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceed 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceed 550, and that was designated as a standard performer in the most recent PHAS and SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined and is not PHAS or SEMAP troubled.

A.	PHA Information.																														
A.1	<p>PHA Name: <u>Michigan State Housing Development Authority</u> PHA Code: <u>MI-901</u> PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>07/01/2022</u> PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above) Number of Housing Choice Vouchers (HCVs) <u>30,362</u> PHA Plan Submission Type: <input checked="" type="checkbox"/> Annual Submission <input type="checkbox"/> Revised Annual Submission</p> <p>Availability of Information. In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at the main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website.</p> <p>Copies of the PHA Plan are available at the MSHDA offices located at:</p> <ul style="list-style-type: none"> 735 E. Michigan Avenue, Lansing, Michigan 48912 3028 West Grand Boulevard, STE 4-600, Detroit, Michigan 48202 MSHDA website: www.michigan.gov/mshda Contact person: Deidre Butterworth at (517) 335-6275 or butterworthd@michigan.gov <p><input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Participating PHAs</th> <th style="width: 10%;">PHA Code</th> <th style="width: 25%;">Program(s) in the Consortia</th> <th style="width: 20%;">Program(s) not in the Consortia</th> <th style="width: 20%;">No. of Units in Each Program</th> </tr> </thead> <tbody> <tr> <td>Lead HA:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program	Lead HA:																								
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B.	Plan Elements.
B.1	<p>Revision of Existing PHA Plan Elements.</p> <p>a) Have the following PHA Plan elements been revised by the PHA since its last Annual Plan submission?</p> <p>Y N</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Financial Resources.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Rent Determination.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Operation and Management.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Informal Review and Hearing Procedures.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Homeownership Programs.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification.</p> <p>(b) If the PHA answered yes for any element, describe the revisions for each element(s):</p> <p>See Attachment A for revisions to applicable elements.</p>
B.2	New Activities. – Not Applicable

Progress Report.

Provide a description of the PHA's progress in meeting its Mission and Goals described in its 5-Year PHA Plan.

MSHDA's current 5-Year Plan covers fiscal years 2019-2024. This progress report reflects activities undertaken since **January 1, 2019**.

1. Expand the supply of assisted housing

- Applied for additional Mainstream Vouchers through the HUD 2019 NOFA application
- Applied for and awarded 5 additional VASH vouchers to be utilized in the Iron Mountain VA Medical Center's catchment area.
- Applied for and awarded 12 additional VASH vouchers to be utilized in the Saginaw VA Medical Center's catchment area.
- Awarded 590 Tenant-Protection Vouchers by HUD to be converted to Project-Based Vouchers for residents located in Bay, Berrien, Genesee, Kalamazoo, Lapeer, Livingston, Oakland, and Wayne Counties.
- Awarded 170 Tenant-Protection Vouchers by HUD to assist 170 families affected by a foreclosure of a property in Genesee County.
- Awarded 37 Enhanced Vouchers by HUD to assist families affected by mortgage prepayments in Oakland and Kalamazoo Counties.
- Awarded the transfer of the Greenville Housing Commission's HCV program by HUD. This includes 107 tenants/vouchers and 45 FSS slots.
- Public and private funds continue to be leveraged in the development of project-based vouchers with LIHTC and developer/owner funds.
- Awarded 779 Emergency Housing Vouchers (EHV) to assist individuals and families that are homeless, at risk of homelessness, fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, human trafficking or recently homeless.
- Applied for and granted an expedited waiver from HUD to establish 2022 payment standards at 120% of the 2022 Fair Market Rents.
- Applied for Stability Vouchers under Notice PIH 2022-24, with support from Continuum of Cares (COCs) throughout the state.
- Creation of a MSHDA HCV Housing Mobility Program offering housing mobility related services to increase the number of HCV families with children living in opportunity areas.

2. Improve the quality of assisted housing

- Continued to strive to obtain a SEMAP score equaling "high performer".
- Continued to research, develop, and implement a paperless file management system.
- Continued to research develop and implement an on-line application system for the Project-Based Voucher Program.
- Continued to improve the informal hearing process within MSHDA by working with the Michigan Office of Administrative Hearings and Rules (MOAHR) staff to short the time between request for informal hearing and the actual hearing.
- Conducted over 4,708 intensive HCV participant file audits to maintain quality control.
- Continued to perform monthly and quarterly performance reviews on contracted Housing Agents.
- Conducted or will have conducted over 568 quality control HQS inspections to monitor the quality of HQS inspections conducted by contracted Housing Agents.

3. Increase assisted housing choice

- Created a damage claim incentive program for landlords to access funds for damages to units caused by HCV participants that exceed normal wear and tear for which the security deposit does not cover.
- Created an owner leasing incentive fee program making available a one-time leasing incentive fee payment of \$600 per unit for all MSHDA approved move ins from June 1, 2022 to December 31, 2022.

- Held a virtual landlord outreach event to provide prospective landlords with an overview of the Housing Choice Voucher Program including benefits of participation and current owner incentive and damage claim programs.
- Continued to conduct outreach efforts to recruit new landlords by advertising and encouraging the use of the www.affordablehousing.com to list available rental units.
- Continued the HCV Homeownership program (Key to Own); the Key to Own Program has closed on 167 homes with voucher participants.
- Continued to implement use of housing choice vouchers in the Project-Based Voucher program. MSHDA awarded 612 project-based vouchers to twenty-six (26) multi-family developments. The PBVs continue to target supportive housing populations. See Attachment B for a current list of PBV developments and their locations.

4. Promote self-sufficiency and asset development of families and individuals

- Increased the number and percentage of employed persons in assisted families by evaluating the FSS participant's job marketability and providing referrals to the local Michigan Works! Agency. Current data reflects that 44% of all FSS participants are employed.
- Successfully graduated 342 participants from the FSS Program for a total escrow payout of over \$2,556,898.
- Enrolled over 1,875 new HCV participants in the FSS Program.
- Continued to provide or attract supportive services to improve participant employability by offering Job Placement Services, Financial Capability Counseling, Individual Development Accounts, or other housing case management services.
- Continued to provide or attract supportive services to increase independence for the elderly or families with disabilities.

5. Ensure equal opportunity in housing for all Americans

- Created a Diversity, Equity, and Inclusion division.
- Created a new fair housing specialist staffing position.
- Continued to ensure equal opportunity and affirmatively further fair housing.
- Continued to undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, familial status, gender identity, sexual orientation, and disability.

6. Partner with the designated Michigan Housing Assessment and Resource Agencies (HARAs) to serve as a one-stop shopping for housing

- Continued to partner with Continuum of Care bodies on the Campaign to End Homelessness. This includes continued efforts to reduce chronic homelessness by 20% annually; reducing family homelessness by 10% annually, reducing individual homelessness by 10% annually; and reducing youth homelessness 10% annually through a variety of programs and resources (ESG, LIHTC, HUD VASH Vouchers, SSI/SSDI outreach; CoC Program; and State Emergency Relief Program).
- Conducted outreach efforts to potential agencies to partner with on MSHDA housing projects or special initiatives. This includes continued partnerships with the Michigan Department of Health and Human Services and/or funded agencies on the Mainstream Voucher Program and Family Unification Program as well as the Michigan Department of Corrections on the MDOC Initiative.

	<p>7. Strive to reduce non-compliance by participants in the Housing Choice Voucher Program</p> <ul style="list-style-type: none"> Continued to investigate cases where suspicion of non-compliance exists by the participant, family members, landlord or property owner. Conducted 527 Informal Hearings due to non-compliance with program regulations and demanded repayment of federal subsidy, when applicable. Executed 2,489 repayment agreements totaling over \$4,831,212 in collectable debt. Continued fraud recovery efforts of approximately \$1,000,000 annually from landlords and participants.
B.4	Capital Improvements. – Not Applicable
B.5	<p>Most Recent Fiscal Year Audit.</p> <p>(a) Were there any findings in the most recent FY Audit?</p> <p>Y N N/A</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Unknown. As of December 28, 2022, the FY Audit results have not been provided to the Authority.</p> <p>(b) If yes, please describe:</p>
C.	Other Document and/or Certification Requirements.
C.1	<p>Resident Advisory Board (RAB) Comments.</p> <p>(a) Did the RAB(s) have comments to the PHA Plan?</p> <p>Y N</p> <p><input type="checkbox"/> <input type="checkbox"/> Resident Advisory Board comments will be provided after documentation has been shared and public hearings conducted.</p> <p>(b) If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>
C.2	<p>Certification by State or Local Officials.</p> <p>Form HUD 50077-SL, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.3	<p>Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan.</p> <p>Form HUD-50077-ST-HCV-HP, <i>PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.4	<p>Challenged Elements. If any element of the PHA Plan is challenged, a PHA must include such information as an attachment with a description of any challenges to Plan elements, the source of the challenge, and the PHA’s response to the public.</p> <p>(a) Did the public challenge any elements of the Plan?</p> <p>Y N</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p>If yes, include Challenged Elements.</p>
D.	Affirmatively Furthering Fair Housing (AFFH).
D.1	<p>Affirmatively Furthering Fair Housing (AFFH).</p> <p>Provide a statement of the PHA’s strategies and actions to achieve fair housing goals outlined in an accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5). Use the chart provided below. (PHAs should add as many goals as necessary to overcome fair housing issues and contributing factors.) Until such time as the PHA is required to submit an AFH, the PHA is not obligated to complete this chart. The PHA will fulfill, nevertheless, the requirements at 24 CFR § 903.7(o) enacted prior to August 17, 2015. See Instructions for further detail on completing this item.</p>

<p>Fair Housing Goal:</p> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p> <p>See Attachment A for fair housing strategies and goals.</p>
<p>Fair Housing Goal:</p> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p>
<p>Fair Housing Goal:</p> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p>

Instructions for Preparation of Form HUD-50075-HCV Annual PHA Plan for HCV-Only PHAs

A. PHA Information. All PHAs must complete this section. (24 CFR §903.4)

A.1 Include the full **PHA Name**, **PHA Code**, **PHA Type**, **PHA Fiscal Year Beginning** (MM/YYYY), **Number of Housing Choice Vouchers (HCVs)**, **PHA Plan Submission Type**, and the **Availability of Information**, specific location(s) of all information relevant to the public hearing and proposed PHA Plan.

PHA Consortia: Check box if submitting a Joint PHA Plan and complete the table. ([24 CFR §943.128\(a\)](#))

B. Plan Elements. All PHAs must complete this section. ([24 CFR §903.11\(c\)\(3\)](#))

B.1 Revision of Existing PHA Plan Elements. PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the “yes” box. If an element has not been revised, mark “no.”

Statement of Housing Needs and Strategy for Addressing Housing Needs. Provide a statement addressing the housing needs of low-income, very low-income and extremely low-income families and a brief description of the PHA’s strategy for addressing the housing needs of families who reside in the jurisdiction served by the PHA and other families who are on the Section 8 tenant-based assistance waiting lists. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income); (ii) elderly families (iii) households with individuals with disabilities, and households of various races and ethnic groups residing in the jurisdiction or on the public housing and Section 8 tenant-based assistance waiting lists. The statement of housing needs shall be based on information provided by the applicable Consolidated Plan, information provided by HUD, and generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. Once the PHA has submitted an Assessment of Fair Housing (AFH), which includes an assessment of disproportionate housing needs in accordance with 24 CFR 5.154(d)(2)(iv), information on households with individuals with disabilities and households of various races and ethnic groups residing in the jurisdiction or on the waiting lists no longer needs to be included in the Statement of Housing Needs and Strategy for Addressing Housing Needs. (24 CFR § 903.7(a)).

The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. ([24 CFR §903.7\(a\)\(2\)\(i\)](#)) Provide a description of the ways in which the PHA intends, to the maximum extent practicable, to address those housing needs in the upcoming year and the PHA’s reasons for choosing its strategy. ([24 CFR §903.7\(a\)\(2\)\(ii\)](#))

Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions. A statement of the PHA’s policies that govern resident or tenant eligibility, selection and admission including admission preferences for HCV. ([24 CFR §903.7\(b\)](#))

Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA’s anticipated resources, such as PHA HCV funding and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program and state the planned use for the resources. ([24 CFR §903.7\(c\)](#))

Rent Determination. A statement of the policies of the PHA governing rental contributions of families receiving tenant-based assistance, discretionary minimum tenant rents, and payment standard policies. ([24 CFR §903.7\(d\)](#))

Operation and Management. A statement that includes a description of PHA management organization, and a listing of the programs administered by the PHA. ([24 CFR §903.7\(e\)](#)).

Informal Review and Hearing Procedures. A description of the informal hearing and review procedures that the PHA makes available to its applicants. ([24 CFR §903.7\(f\)](#))

Homeownership Programs. A statement describing any homeownership programs (including project number and unit count) administered by the agency under section 8y of the 1937 Act, or for which the PHA has applied or will apply for approval. ([24 CFR §903.7\(k\)](#))

Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements. A description of any PHA programs relating to services and amenities coordinated, promoted, or provided by the PHA for assisted families, including those resulting from the PHA's partnership with other entities, for the enhancement of the economic and social self-sufficiency of assisted families, including programs provided or offered as a result of the PHA's partnerships with other entities, and activities subject to Section 3 of the Housing and Community Development Act of 1968 (24 CFR Part 135) and under requirements for the Family Self-Sufficiency Program and others. Include the program's size (including required and actual size of the FSS program) and means of allocating assistance to households. ([24 CFR §903.7\(l\)\(i\)](#)) Describe how the PHA will comply with the requirements of section 12(c) and (d) of the 1937 Act that relate to treatment of income changes resulting from welfare program requirements. ([24 CFR §903.7\(l\)\(iii\)](#)).

Substantial Deviation. PHA must provide its criteria for determining a "substantial deviation" to its 5-Year Plan. ([24 CFR §903.7\(r\)\(2\)\(i\)](#))

Significant Amendment/Modification. PHA must provide its criteria for determining a "Significant Amendment or Modification" to its 5-Year and Annual Plan.

If any boxes are marked "yes", describe the revision(s) to those element(s) in the space provided.

B.2 New Activities. This section refers to new capital activities which is not applicable for HCV-Only PHAs.

B.3 Progress Report. For all Annual Plans following submission of the first Annual Plan, a PHA must include a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year PHA Plan. ([24 CFR §903.11\(c\)\(3\)](#), [24 CFR §903.7\(r\)\(1\)](#))

B.4 Capital Improvements. This section refers to PHAs that receive funding from the Capital Fund Program (CFP) which is not applicable for HCV-Only PHAs

B.5 Most Recent Fiscal Year Audit. If the results of the most recent fiscal year audit for the PHA included any findings, mark "yes" and describe those findings in the space provided. ([24 CFR §903.7\(p\)](#))

C. Other Document and/or Certification Requirements.

C.1 Resident Advisory Board (RAB) comments. If the RAB had comments on the annual plan, mark "yes," submit the comments as an attachment to the Plan and describe the analysis of the comments and the PHA's decision made on these recommendations. ([24 CFR §903.13\(c\)](#), [24 CFR §903.19](#))

C.2 Certification by State of Local Officials. Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, must be submitted by the PHA as an electronic attachment to the PHA Plan. ([24 CFR §903.15](#)). Note: A PHA may request to change its fiscal year to better coordinate its planning with planning done under the Consolidated Plan process by State or local officials as applicable.

C.3 Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan. Provide a certification that the following plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public. This requirement is satisfied by completing and submitting form HUD-50077 ST-HCV-HP, *PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed*. Form HUD-50077-ST-HCV-HP, *PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed* must be submitted by the PHA as an electronic attachment to the PHA Plan. This includes all certifications relating to Civil Rights and related regulations. A PHA will be considered in compliance with the certification requirement to affirmatively further fair housing if the PHA fulfills the requirements of §§ 903.7(o)(1) and 903.15(d) and: (i) examines its programs or proposed programs; (ii) identifies any fair housing issues and contributing factors within those programs, in accordance with 24 CFR 5.154; or 24 CFR 5.160(a)(3) as applicable (iii) specifies actions and strategies designed to address contributing factors, related fair housing issues, and goals in the applicable Assessment of Fair Housing consistent with 24 CFR 5.154 in a reasonable manner in view of the resources available; (iv) works with jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement; (v) operates programs in a manner consistent with any applicable consolidated plan under 24 CFR part 91, and with any order or agreement, to comply with the authorities specified in paragraph (o)(1) of this section; (vi) complies with any contribution or consultation requirement with respect to any applicable AFH, in accordance with 24 CFR 5.150 through 5.180; (vii) maintains records reflecting these analyses, actions, and the results of these actions; and (viii) takes steps acceptable to HUD to remedy known fair housing or civil rights violations, impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction. ([24 CFR §903.7\(o\)](#)).

C.4 Challenged Elements. If any element of the Annual PHA Plan or 5-Year PHA Plan is challenged, a PHA must include such information as an attachment to the Annual PHA Plan or 5-Year PHA Plan with a description of any challenges to Plan elements, the source of the challenge, and the PHA's response to the public.

D. Affirmatively Furthering Fair Housing (AFFH).

D.1 Affirmatively Furthering Fair Housing. The PHA will use the answer blocks in item D.1 to provide a statement of its strategies and actions to implement each fair housing goal outlined in its accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5) that states, in relevant part: "To

implement goals and priorities in an AFH, strategies and actions shall be included in program participants' ... PHA Plans (including any plans incorporated therein) Strategies and actions must affirmatively further fair housing” Use the chart provided to specify each fair housing goal from the PHA’s AFH for which the PHA is the responsible program participant – whether the AFH was prepared solely by the PHA, jointly with one or more other PHAs, or in collaboration with a state or local jurisdiction – and specify the fair housing strategies and actions to be implemented by the PHA during the period covered by this PHA Plan. If there are more than three fair housing goals, add answer blocks as necessary.

Until such time as the PHA is required to submit an AFH, the PHA will not have to complete section D., nevertheless, the PHA will address its obligation to affirmatively further fair housing in part by fulfilling the requirements at 24 CFR 903.7(o)(3) enacted prior to August 17, 2015, which means that it examines its own programs or proposed programs; identifies any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with local jurisdictions to implement any of the jurisdiction’s initiatives to affirmatively further fair housing that require the PHA’s involvement; and maintain records reflecting these analyses and actions. Furthermore, under Section 5A(d)(15) of the U.S. Housing Act of 1937, as amended, a PHA must submit a civil rights certification with its Annual PHA Plan, which is described at 24 CFR 903.7(o)(1) except for qualified PHAs who submit the Form HUD-50077-CR as a standalone document.

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the Annual PHA Plan. The Annual PHA Plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA’s operations, programs, and services, and informs HUD, families served by the PHA, and members of the public for serving the needs of low- income, very low- income, and extremely low - income families.

Public reporting burden for this information collection is estimated to average 6.02 hour 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. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

ATTACHMENT A
FY 2022-23 ANNUAL PHA PLAN FOR HCV ONLY PHAs
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
(MSHDA) (MI-901)

B. Plan Elements

B.1 Revision of PHA Plan Elements:

Statement of Housing Needs and Strategy for Addressing Housing Needs

MSHDA is dedicated to serving the needs of the homeless, very low and extremely low-income Michigan residents. This is demonstrated in its administration of the Housing Choice Voucher Program via the on-going efforts:

- designating a homeless preference for county HCV waiting lists.
- designating a disabled preference for county HCV waiting lists.
- commitment to the Michigan Campaign to End Homelessness.
- working with partner agencies serving the elderly, families with disabilities, households of various races and ethnic groups.
- working with Continuum of Care groups across the State of Michigan.
- exceeding federal income targeting requirements by establishing that 80% of new admissions must be extremely low-income families and up to 20% of new admissions must be very low-income families.
- administering the HCV VASH Program in partnership with four VA medical facility sites across the State of Michigan (Battle Creek, Detroit, Saginaw, and Iron Mountain).
- administering Non-Elderly Disabled (NED) vouchers.
- administering the Affordable Assisted Housing Program (AAHP), in Macomb and Oakland Counties, which combines an HCV with the Michigan Medicaid Waiver to provide housing as an alternative to nursing home care.
- expanding the 2014-2015 Moving-Up Pilot that partners with the Michigan Department of Community Health (MDCH) and provides a resource for previously homeless populations utilizing Permanent Supportive Housing; MSHDA has committed over 600 vouchers for this pilot program.
- leveraging 100 vouchers with the Section 811 Project Rental Assistance Program.
- creating a State Innovation Model (SIM) Pilot Program that partners with the Michigan Department of Health and Human Services (MDHHS) to provide housing and supportive services to citizens that have very high utilization levels of emergency departments and emergency services that are also experiencing homelessness. MSHDA has committed up to 200 vouchers for this pilot program, which also includes Frequency Utilizers Systems Engagement (FUSE) programs.
- administering nearly 5,000 Project-Based Vouchers in over 200 developments across the state.
- offering a PBV waiting list preference in select PBV properties for Chronically Homeless, United States Veterans, Homeless Frequent Emergency Department Users with Care Needs, Highly Vulnerable Populations and Supportive Housing Populations.
- implementing a recertification of homelessness at the time of PBV waiting list draw, to ensure the applicant still meets the definition of homelessness.
- administrating more than 1,200 Project-Based Vouchers via the Rental Assistance Demonstration (RAD) in 22 properties across the state.
- administering over 180 Project-Vouchers as a result of public housing or multifamily properties converting to new assistance under HUD's At-Risk and Streamline Voluntary Conversions.
- continuing outreach efforts to find affordable and good quality units for voucher holders.
- identifying when to open and close county waiting lists to maintain up to date lists.
- implementing biennial HQS inspections for HCV housing units.
- administering an initiative in partnership with the Michigan Department of Corrections (MDOC) to enhance housing opportunities for persons exiting correctional facilities. MSHDA has allocated up to 200 vouchers for returning citizens that need long-term rental assistance.
- administering the Mainstream Voucher Program. The program provides voucher assistance to non-elderly and disabled households, with a preference granted to those experiencing homelessness, at-risk of homelessness, congregate housing facilities or at-risk of congregate housing placement. MSHDA was awarded 99 vouchers from HUD for this program. An additional 30 Mainstream Vouchers were awarded by HUD via the CARES Act funding.

- administering the Family Unification Program (FUP) in collaboration with the MDHHS. The program provides voucher assistance to FUP-eligible families and FUP-eligible youth experiencing housing barriers. MSHDA was awarded 81 vouchers from HUD for this program.
- administering Emergency Housing Vouchers (EHV). MSHDA was awarded EHVs and associated service funding from HUD and entered into MOUs with local CoCs and/or Planning Bodies for applicant referrals and delivery of service funding to mitigate barriers to obtain housing.

Deconcentration and Other policies that Govern Eligibility, Selection and Admissions

MSHDA promotes deconcentration of poverty and promotes income mixing in all areas by educating applicants at the time of their briefing on these issues.

Waiting lists exist for all 83 Michigan counties and are opened or closed as necessary. Applications are taken electronically. As of November 23, 2021, there are 28,960 applicants on the waiting lists. Of these, 25,567 are extremely low income; 2,582 are very low income; and 811 are low income. Families with children make up 45% of waiting list applicants; 9% are elderly and 18% are disabled.

MSHDA has a homeless preference and applications are taken from homeless families and added to the homeless preference waiting list when certified. A disability preference is given for those applicants where the head of household, co-head or spouse are disabled. Verification of disability is obtained upon selection from the waiting list.

A county residency preference is given for those applicants who either live or work in the county and can prove residency through a verified current address or verification from an employer. A Michigan residency preference is given for those applicants who either live or work in the state of Michigan and can prove residency through a verified current address or verification from an employer.

PBV applicants must apply through the Lead Agency/HARA or property management staff. Referrals are sent directly to the MSHDA contracted Housing Agent for placement on the PBV Waiting List.

Financial Resources

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2019 grants)		
a) Public Housing Operating Fund	Not applicable	
b) Public Housing Capital Fund	Not applicable	
c) Annual Contributions for Section 8 Tenant-Based Assistance	\$219,487,162	Section 8 Eligible expenses
d) Community Development Block Grant (CDBG)	Not applicable	
e) HOME	Not applicable	
Other Federal Grants (list below)		
FSS Program	\$ 1,178,500	FSS Program
Sec 811 Program	\$ 5,516,950	Sec 811 PRA Program
2. Prior Year Federal Grants (unobligated funds only) (list below)	None	
3. Public Housing Dwelling Rental Income	Not applicable	
4. Other income (list below)	None	
5. Non-federal sources (list below)	None	
Total resources	\$226,182,612	

Rent Determination:

MSHDA will continue to have a \$50 Minimum Total Tenant Payment (TTP). If the MSHDA HCV budget is significantly increased, the minimum TTP amount may be adjusted downward.

In December 2021, MSHDA received an expedited waiver approval from HUD to set the payment standards at 120% of the 2022 Fair Market Rents for its jurisdiction. MSHDA will conduct a review of the 2023 Fair Market Rents to determine payment standard levels and if necessary, request a similar approval to establish 2023 payment standards between 111-120% for its jurisdiction.

Homeownership:

MSHDA will continue administering its Section 8 Homeownership Program entitled the *Key to Own* Homeownership Program which has been operating since March 2004. The MSHDA *Key to Own* Homeownership Program has no set limits on the maximum number of participants. Currently, MSHDA has over 1,200 participants in the *Key to Own* Homeownership Program who are working on program requirements, i.e., credit scores, finding employment, debt reduction, etc. Since the program's inception, 624 MSHDA HCV participants have become homeowners.

Safety and Crime Prevention:

The MSHDA Office of Rental Assistance and Homeless Solutions (RAHS) is committed to the implementation of the VAWA of 2013. MSHDA will continue to undertake actions to meet this requirement in the administration of the Housing Choice Voucher (HCV) Program.

MSHDA's contracted Housing Agents participate in local Continuum of Care meetings and use those contacts and others known to them through the Family Self-Sufficiency Program to assist survivors of domestic violence (including dating violence, sexual assault, or stalking) and their children when cases are made known to them.

Many of the agencies participating in the Continuum of Care groups provide temporary housing/shelter to survivors of domestic violence and their children. MSHDA staff and Housing Agents work with the partnering Continuum of Care service agencies and partnering Housing Assessment and Resource Agencies (HARAs) to find resources for domestic violence survivors, and children and adult victims of dating violence, sexual assault, or stalking to make sure the family can maintain their housing assistance.

MSHDA provides the Notice of Occupancy Rights under VAWA (HUD 5380) and the Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking (HUD 5382) when a family is denied admission to the program, when a family is admitted to the program and when the family is terminated from the program. In addition, MSHDA has created an Emergency Move Plan for HCV and PBV participants and provides the Emergency Transfer Request for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking (HUD 5383) upon request.

D. Affirmatively Furthering Fair Housing (AFFH)

D.1 Affirmatively Further Fair Housing

The following strategies and actions were employed by MSHDA to achieve fair housing goals:

Strategy/Action #1:

Conduct Education and Testing to Reduce the incidence of Housing Discrimination: In partnership with local fair housing centers, MSHDA is providing training to landlords, local units of government, property managers, MSHDA staff, the general public, and other housing partners in fair housing law and practice to reduce the incidence of housing discrimination in Michigan. Fair housing centers are conducting fair housing testing on MSHDA-financed multifamily housing complexes and Housing Choice Voucher properties to evaluate compliance with state and federal law concerning protected classes. Fair housing centers provide guidance and assistance to housing providers with fair housing concerns. MSHDA is providing virtual educational opportunities to MSHDA customers and the public to bring greater awareness to rights under the

Fair Housing Act. Some of the topics covered include but are not limited to Criminal Records, Sexual Harassment, National Origin Discrimination, and Religious Discrimination.

Strategy/Action #2:

Increase access to housing for disadvantaged populations: Assists 28,000 low-income families with rent subsidies through MSHDA's HCV Program. The program includes a homeless preference and a disability preference to move individuals into safe, decent, and stable housing. The HUD VASH program administered by MSHDA combines the HCV rental assistance for homeless veterans with case management and clinical services provided by the Department of Veteran Affairs (VA). The Mainstream Voucher Program provides rental assistance to families that consist of a non-elderly person with disabilities. The voucher assistance provides the housing stability that many individuals desperately need, and the Department of Health and Human Services (DHHS) and the Housing Assessment and Resource Agencies (HARA) provide support services based on the individual's needs and affiliated program. The Family Unification Program (FUP) provides rental assistance to FUP-eligible families and youth. The rental assistance provides relief from housing barriers and the local Continuum of Care (CoC) and DHHS agencies provide supportive services to promote housing stability and self-sufficiency. The Emergency Housing Vouchers (EHVs) provide rental assistance for individuals and families who are homeless, at-risk of homelessness, recently homeless, and survivors of domestic violence, dating violence, sexual assault, stalking and human trafficking. The service funding that accompanies the EHV is utilized by the COCs and Local Planning Bodies to identify and mitigate barriers that these families may face in the renting a unit with an EHV.

Disseminate fair housing rights materials including information related to sexual harassment to approximately 28,000 households receiving assistance through MSHDA's Housing Choice Voucher Program. Additionally, distributes fair housing materials to approximately 9,000 landlords participating in the HCV Program.

Strategy/Action #3

Bring greater awareness to fair housing rights: MSHDA's Housing Education Program (HEP) partners with 35 Housing Counseling Agencies throughout Michigan which employs counselors and educators who hold HUD and other National Certifications to deliver individual counseling and educational classes in the following key areas: Homebuyer Education, Pre-Purchase Individual Counseling, Mortgage Default and Delinquency (Foreclosure) Counseling, Financial Literacy Group Education, Individual Budget and Credit Counseling, Rental Housing Education and Counseling, Disaster Relief Housing Counseling and Homeless Individual Counseling. Within each of these service types include Fair Housing training and individual client support with any Fair Housing concerns or possible violations. Housing Counselors are required to be HUD Certified and actively employed by a HUD approved 501c3 organization. Counselors are also required to receive ongoing professional development training to ensure they are delivering the most current information to the clients they serve, especially surrounding fair housing laws. MSHDA HEP is dedicated to Fair Housing and both our team as well as our agencies have deep working relationships with the Fair Housing offices throughout Michigan in the delivery of AFFH trainings and client referrals.: Regularly sponsor fair housing events hosted by local fair housing centers to support and expand fair housing efforts in training, awareness, testing, etc. to tackle impediments to fair housing choice. Incorporate fair housing training into existing regional meetings, conferences, and workshops with housing partners.

Strategy/Action #4

Fair Housing Information on MSHDA Website and Outreach efforts: Fair housing rights and complaint filing information on MSHDA's website to connect users to local and national fair housing resources. Local units of government, nonprofit organizations, and other organizations funded with state or federal resources through MSHDA prominently place fair housing posters and information for the public to view and are required to affirmatively further fair housing.

Strategy/Action #5

Enhance Access to Homeless Prevention Services: Employ the Coordinator for Michigan's Campaign to End Homelessness (MCTEH) and maintain the website (<https://www.michigan.gov/mcteh>) that provides pertinent information related to programming, workshops/training, and initiatives to assist regional and

community providers in serving individuals and families experiencing homelessness and those at risk of homelessness. Work closely with the MCTEH partners to host an annual Summit on Ending Homelessness to create content that addresses the needs and interest of individuals and providers involved in various levels of policy, funding, and homeless service delivery development throughout the entire state.

Attachment 1C-7: PHA Moving On Preference

CoC: MI-501

Attached are excerpts from the admin plans for the Detroit Housing Commission and Michigan State Housing Development Authority noting their Moving On Homeless Preference



Binder2

2

**DHC FY 2023 ANNUAL PLAN
CFP FY 2023 5-YEAR ACTION PLAN**

FINAL

The family's response maybe in writing and may be delivered by mail or other means as DHC prescribes within its notice to the applicant. Responses can also be completed through the DHC Applicant portal. Responses must be received by DHC not later than 10 business days from the date of DHC's update request. If the family fails to respond within 10 business days, the family's application will be removed from the waiting list without further notice, and the applicant will have no right to an informal review. If the notice is returned by the post office, the applicant will be removed from the waiting list without further notice, and the applicant will have no right to an informal review.

If a family is removed from the waiting list for failure to respond, the Chief Operating Officer of Rental Assistance, or designee, may reinstate the family if s/he determines the lack of response was due to DHC error or to circumstances beyond the family's control. The family must offer specific and compelling documentation to substantiate its claim. If the applicant did not respond to DHC's request because of a family member's disability, DHC may reinstate the family on the waiting list if the disability is substantiated in accordance with the reasonable accommodation process established in Chapter 2.

In all cases, the family must make a written request to be reinstated to the list within sixty (60) calendar days of the date the family was removed from the list.

4-2G. REASONABLE ACCOMODATIONS

If requested as a reasonable accommodation for a person with a disability, an extension of 10 business days to respond to the update request may be granted upon review of the request in accordance with Chapter 2 of this Admin Plan.

4-2 H. REMOVAL FROM THE WAITING LIST

If at any time an applicant family is on the waiting list, and DHC determines that the family is not eligible for assistance (see Chapter 3), the family must be removed from the waiting list.

If a family is removed from the waiting list because DHC has determined the family is not eligible for assistance, a notice must be sent to the family's address of record provided on the initial application or updated address as has been submitted by the family. The notice will state the reason(s) the family was removed from the waiting list and will inform the family if they are eligible to request an informal review and how to request such review regarding DHC's decision (see Chapter 16).

PART III: SELECTION FOR HCV ASSISTANCE

4-3 A. OVERVIEW

As vouchers become available, families on the waiting list will be selected for assistance in accordance with the policies described in this part. The order in which families receive assistance from the waiting list depends on the selection method chosen by DHC and is impacted in part by any selection preferences that the family qualifies for. The source of HCV funding also may affect the order in which families are selected from the waiting list.

DHC will maintain a clear record of all information required to verify that the family is selected from the waiting list according to DHC's selection policies.

4-3 B. SELECTION AND HCV FUNDING SOURCES

1. Special Admissions

HUD may award funding for specifically named families living in specified types of units, e.g., a family that is displaced by demolition of public housing; a family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term.

If HUD awards DHC funding that is targeted for families living in specified units:

- DHC will use the assistance for eligible families living in these units; and
- DHC may admit such a family that is not already on DHC's waiting list, or without considering the family's current waiting list position.

DHC will maintain separate records of these admissions that demonstrate that the family was admitted with HUD-targeted assistance.

2. Selection Method

DHC will describe the method for selecting applicant families from the waiting list, including the system of admission preferences that DHC will use.

3. Local Preferences

DHC is permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits DHC to establish other local preferences, at its discretion. Any local preferences established must be consistent with DHC's Admin Plan and the consolidated plan and must be based on local housing needs and priorities.

DHC will select families from the HCV Tenant Based Waiting List based on the following preferences using a point system:

- Families terminated from DHC's HCV program due to insufficient funding 50 Points
- Families displaced by a natural disaster or government action 30 Points
- Mainstream Disabled 25 Points

Verification of Preference

All preferences will be verified. For example, the preference associated with insufficient funding will be validated through DHC's termination records and notices. Persons claiming displacement by natural disaster or government action will have to provide acceptable government documentation such as FEMA status. Persons claiming MSD classification will be verified for specific program requirements.

The preferences identified below are unique in classification and require specific program referrals. The preference selection is also limited to specific number or annual allocation based on the classification.

The referral applicants with these preferences will be placed on program specific waiting lists with a priority (point) selection based on funding availability following an annual selection of 200 names from the DHC traditional HCV Tenant Based Waiting list. DHC has established a point system to determine applicant selection based on the severity of housing need. Selection from the referral program waiting lists will be identified through the following point system:

- Displacement by DHC: 20 points
- VAWA Victims: 15 points
- Victims of Human Trafficking: 13 points
- Displaced Families with a Child(ren) Six of Younger with Elevated Blood Lead Levels: 12 points
- Homeless and Transitioning from Permanent Supportive Housing: 10 points
- VASH Voucher Holders Transitioning from Permanent Supportive Housing: 5 points

The selection of applicants will follow the order of date and time based on receipt of the completed referral. Based on the uniqueness of the programs and the referral requirement an applicant should be listed on one list. An applicant could be and will remain on the traditional HCV Tenant Based Waiting list.

Local Preference Related to the Mainstream Disabled Voucher Program (MSD Program)

The mainstream disabled program is a target funded program requiring a preference to the tenant-based voucher waiting list for 75 vouchers. A preference is available for up to 75 vouchers to families that include non-elderly, (persons 18 to under 62 years of age at

contract) persons with disabilities. DHC will provide an admission preference to MSD Program-eligible households that are in one or more of the following groups:

- a. Transitioning out of institutional or other segregated settings.
- b. At serious risk of institutionalization.
- c. Currently experiencing Homelessness in Wayne and Macomb County.
- d. Previously experienced homelessness and is a resident of permanent supportive housing or a rapid rehousing project in Wayne and Macomb County.
- e. At risk of experiencing homelessness in Wayne and Macomb County.

A preference does not guarantee program eligibility.

DHC has established partnerships with the following four partners: The Out-Wayne Continuum of Care (Out-Wayne COC), the Detroit Continuum of Care (Detroit COC) the Macomb County Continuum of Care (Macomb COC) and The Information Center (TIC).

DHC will enter an agreement with each of its partners. Each agreement will be established based on the population to be served. The terms and conditions of each agreement must be agreed to and signed by DHC's Executive Director. DHC will not accept referrals from an agency, organization or consortia that denies its services to members of any federally protected class under fair housing laws.

The waitlist for this preference will never close.

Local Preference Related to Homelessness and Transitioning from Permanent Supportive Housing

DHC will provide housing assistance with up to 225 vouchers per year through the Housing Choice Voucher Program to eligible persons who are referred for assistance through formal agreements with partnering organizations. All applicants assisted in this category must apply with and be referred to DHC by an agency, organization, or consortia, that provides services to the homeless with which DHC has a formal agreement. Each agreement will be established based on the population to be served and the terms and conditions presented to and agreed upon by the Executive Director. DHC has the right to limit the number of partner organizations to insure administrative efficiency. DHC will not accept referrals from an agency, organization or consortia that denies its services to members of any Federally protected class under fair housing laws.

In furtherance of its fight against homelessness, a local preference is available for families that "participate in a homeless program" or that are "transitioning from permanent supportive housing" and are referred to DHC by an organization with which DHC has a formal agreement. The waitlists for these categories will never close.

Local Preference Related to VASH Voucher Holders Transitioning from Permanent Supportive Housing

A local preference is available for families receiving VASH assistance who no longer require permanent supportive housing as mutually agreed upon by the adult family members and MSHDA and the area VA Medical Center. The transition from permanent supportive housing requires the family to have participated in the VASH program for the last five years. The family must be referred to DHC by an agency, organization, or consortia with which DHC has a formal partnering agreement. The terms and conditions of all agreements will be based on the population to be served. Agreements must be signed by DHC's Executive Director. DHC will not accept referrals from an agency, organization or consortia that denies its services to members of any Federally protected class under fair housing laws.

DHC will provide housing assistance under this preference with up to 25 tenant-based vouchers per year through the Housing Choice Voucher Program. All families assisted under this preference must be referred to MSHDA and the area VA Medical Center by an agency, organization, or consortia with which DHC has a formal agreement. MSHDA and the area VA Medical Center must jointly approve and refer the family to DHC. DHC will enter formal agreements with MSHDA and the area VA Medical Center. These agreements must be signed by DHC's Executive Director.

This preference will have equal weight to other preferences but will be maintained on waitlist(s) separate from DHC's other HCV waitlists. The waitlist(s) for this preference will never close.

Local Preference – Displacement by DHC:

A resident who is displaced from a DHC-owned public housing property as a result of a failure of a building system, fire, flooding, environmental or other failure beyond DHC's control and where DHC has no suitable, available DHC-owned public housing replacement unit will be eligible for a local preference to receive a voucher from the Housing Choice Voucher Program upon referral by DHC. The preference does not guarantee program eligibility. Applicants will not be referred if alternate public housing accommodations have been offered and refused by the resident. Referral is limited to events where the Executive Director has approved the use of the preference in writing. The preference is limited to 50 vouchers annually. There will be a separate waitlist for this preference. The waitlist will never close.

Local Preference Related to VAWA Victims

DHC will offer a preference to families that include victims of domestic violence, dating violence, sexual assault, or stalking who has either been referred by a partnering service agency, a consortium, the Director of DHC's Resident Services or is seeking an emergency transfer under VAWA from the DHC's public housing program when the

PHA (Michigan State Housing Development Authority) Plan noting homeless preference and Moving Up preference.

<p>Streamlined Annual PHA Plan <i>(HCV Only PHAs)</i></p>	<p>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</p>	<p>OMB No. 2577-0226 Expires 03/31/2024</p>
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Purpose. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, including changes to these policies, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

Applicability. The Form HUD-50075-HCV is to be completed annually by **HCV-Only PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, Small PHA, or Qualified PHA do not need to submit this form. Where applicable, separate Annual PHA Plan forms are available for each of these types of PHAs.

Definitions.

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments if administering both programs, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceed 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceed 550, and that was designated as a standard performer in the most recent PHAS and SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined and is not PHAS or SEMAP troubled.

A.	PHA Information.																														
A.1	<p>PHA Name: <u>Michigan State Housing Development Authority</u> PHA Code: <u>MI-901</u> PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>07/01/2022</u> PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above) Number of Housing Choice Vouchers (HCVs) <u>30,362</u> PHA Plan Submission Type: <input checked="" type="checkbox"/> Annual Submission <input type="checkbox"/> Revised Annual Submission</p> <p>Availability of Information. In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at the main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website.</p> <p>Copies of the PHA Plan are available at the MSHDA offices located at:</p> <ul style="list-style-type: none"> 735 E. Michigan Avenue, Lansing, Michigan 48912 3028 West Grand Boulevard, STE 4-600, Detroit, Michigan 48202 MSHDA website: www.michigan.gov/mshda Contact person: Deidre Butterworth at (517) 335-6275 or butterworthd@michigan.gov <p><input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Participating PHAs</th> <th style="width: 10%;">PHA Code</th> <th style="width: 25%;">Program(s) in the Consortia</th> <th style="width: 20%;">Program(s) not in the Consortia</th> <th style="width: 20%;">No. of Units in Each Program</th> </tr> </thead> <tbody> <tr> <td>Lead HA:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program	Lead HA:																								
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B.	Plan Elements.
B.1	<p>Revision of Existing PHA Plan Elements.</p> <p>a) Have the following PHA Plan elements been revised by the PHA since its last Annual Plan submission?</p> <p>Y N</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Financial Resources.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Rent Determination.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Operation and Management.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Informal Review and Hearing Procedures.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Homeownership Programs.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification.</p> <p>(b) If the PHA answered yes for any element, describe the revisions for each element(s):</p> <p>See Attachment A for revisions to applicable elements.</p>
B.2	New Activities. – Not Applicable

Progress Report.

Provide a description of the PHA's progress in meeting its Mission and Goals described in its 5-Year PHA Plan.

MSHDA's current 5-Year Plan covers fiscal years 2019-2024. This progress report reflects activities undertaken since **January 1, 2019**.

1. Expand the supply of assisted housing

- Applied for additional Mainstream Vouchers through the HUD 2019 NOFA application
- Applied for and awarded 5 additional VASH vouchers to be utilized in the Iron Mountain VA Medical Center's catchment area.
- Applied for and awarded 12 additional VASH vouchers to be utilized in the Saginaw VA Medical Center's catchment area.
- Awarded 590 Tenant-Protection Vouchers by HUD to be converted to Project-Based Vouchers for residents located in Bay, Berrien, Genesee, Kalamazoo, Lapeer, Livingston, Oakland, and Wayne Counties.
- Awarded 170 Tenant-Protection Vouchers by HUD to assist 170 families affected by a foreclosure of a property in Genesee County.
- Awarded 37 Enhanced Vouchers by HUD to assist families affected by mortgage prepayments in Oakland and Kalamazoo Counties.
- Awarded the transfer of the Greenville Housing Commission's HCV program by HUD. This includes 107 tenants/vouchers and 45 FSS slots.
- Public and private funds continue to be leveraged in the development of project-based vouchers with LIHTC and developer/owner funds.
- Awarded 779 Emergency Housing Vouchers (EHV) to assist individuals and families that are homeless, at risk of homelessness, fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, human trafficking or recently homeless.
- Applied for and granted an expedited waiver from HUD to establish 2022 payment standards at 120% of the 2022 Fair Market Rents.
- Applied for Stability Vouchers under Notice PIH 2022-24, with support from Continuum of Cares (COCs) throughout the state.
- Creation of a MSHDA HCV Housing Mobility Program offering housing mobility related services to increase the number of HCV families with children living in opportunity areas.

2. Improve the quality of assisted housing

- Continued to strive to obtain a SEMAP score equaling "high performer".
- Continued to research, develop, and implement a paperless file management system.
- Continued to research develop and implement an on-line application system for the Project-Based Voucher Program.
- Continued to improve the informal hearing process within MSHDA by working with the Michigan Office of Administrative Hearings and Rules (MOAHR) staff to short the time between request for informal hearing and the actual hearing.
- Conducted over 4,708 intensive HCV participant file audits to maintain quality control.
- Continued to perform monthly and quarterly performance reviews on contracted Housing Agents.
- Conducted or will have conducted over 568 quality control HQS inspections to monitor the quality of HQS inspections conducted by contracted Housing Agents.

3. Increase assisted housing choice

- Created a damage claim incentive program for landlords to access funds for damages to units caused by HCV participants that exceed normal wear and tear for which the security deposit does not cover.
- Created an owner leasing incentive fee program making available a one-time leasing incentive fee payment of \$600 per unit for all MSHDA approved move ins from June 1, 2022 to December 31, 2022.

- Held a virtual landlord outreach event to provide prospective landlords with an overview of the Housing Choice Voucher Program including benefits of participation and current owner incentive and damage claim programs.
- Continued to conduct outreach efforts to recruit new landlords by advertising and encouraging the use of the www.affordablehousing.com to list available rental units.
- Continued the HCV Homeownership program (Key to Own); the Key to Own Program has closed on 167 homes with voucher participants.
- Continued to implement use of housing choice vouchers in the Project-Based Voucher program. MSHDA awarded 612 project-based vouchers to twenty-six (26) multi-family developments. The PBVs continue to target supportive housing populations. See Attachment B for a current list of PBV developments and their locations.

4. Promote self-sufficiency and asset development of families and individuals

- Increased the number and percentage of employed persons in assisted families by evaluating the FSS participant's job marketability and providing referrals to the local Michigan Works! Agency. Current data reflects that 44% of all FSS participants are employed.
- Successfully graduated 342 participants from the FSS Program for a total escrow payout of over \$2,556,898.
- Enrolled over 1,875 new HCV participants in the FSS Program.
- Continued to provide or attract supportive services to improve participant employability by offering Job Placement Services, Financial Capability Counseling, Individual Development Accounts, or other housing case management services.
- Continued to provide or attract supportive services to increase independence for the elderly or families with disabilities.

5. Ensure equal opportunity in housing for all Americans

- Created a Diversity, Equity, and Inclusion division.
- Created a new fair housing specialist staffing position.
- Continued to ensure equal opportunity and affirmatively further fair housing.
- Continued to undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, familial status, gender identity, sexual orientation, and disability.

6. Partner with the designated Michigan Housing Assessment and Resource Agencies (HARAs) to serve as a one-stop shopping for housing

- Continued to partner with Continuum of Care bodies on the Campaign to End Homelessness. This includes continued efforts to reduce chronic homelessness by 20% annually; reducing family homelessness by 10% annually, reducing individual homelessness by 10% annually; and reducing youth homelessness 10% annually through a variety of programs and resources (ESG, LIHTC, HUD VASH Vouchers, SSI/SSDI outreach; CoC Program; and State Emergency Relief Program).
- Conducted outreach efforts to potential agencies to partner with on MSHDA housing projects or special initiatives. This includes continued partnerships with the Michigan Department of Health and Human Services and/or funded agencies on the Mainstream Voucher Program and Family Unification Program as well as the Michigan Department of Corrections on the MDOC Initiative.

	<p>7. Strive to reduce non-compliance by participants in the Housing Choice Voucher Program</p> <ul style="list-style-type: none"> Continued to investigate cases where suspicion of non-compliance exists by the participant, family members, landlord or property owner. Conducted 527 Informal Hearings due to non-compliance with program regulations and demanded repayment of federal subsidy, when applicable. Executed 2,489 repayment agreements totaling over \$4,831,212 in collectable debt. Continued fraud recovery efforts of approximately \$1,000,000 annually from landlords and participants.
B.4	Capital Improvements. – Not Applicable
B.5	<p>Most Recent Fiscal Year Audit.</p> <p>(a) Were there any findings in the most recent FY Audit?</p> <p>Y N N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Unknown. As of December 28, 2022, the FY Audit results have not been provided to the Authority.</p> <p>(b) If yes, please describe:</p>
C.	Other Document and/or Certification Requirements.
C.1	<p>Resident Advisory Board (RAB) Comments.</p> <p>(a) Did the RAB(s) have comments to the PHA Plan?</p> <p>Y N <input type="checkbox"/> <input type="checkbox"/> Resident Advisory Board comments will be provided after documentation has been shared and public hearings conducted.</p> <p>(b) If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>
C.2	<p>Certification by State or Local Officials.</p> <p>Form HUD 50077-SL, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.3	<p>Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan.</p> <p>Form HUD-50077-ST-HCV-HP, <i>PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.4	<p>Challenged Elements. If any element of the PHA Plan is challenged, a PHA must include such information as an attachment with a description of any challenges to Plan elements, the source of the challenge, and the PHA’s response to the public.</p> <p>(a) Did the public challenge any elements of the Plan?</p> <p>Y N <input type="checkbox"/> <input type="checkbox"/></p> <p>If yes, include Challenged Elements.</p>
D.	Affirmatively Furthering Fair Housing (AFFH).
D.1	<p>Affirmatively Furthering Fair Housing (AFFH).</p> <p>Provide a statement of the PHA’s strategies and actions to achieve fair housing goals outlined in an accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5). Use the chart provided below. (PHAs should add as many goals as necessary to overcome fair housing issues and contributing factors.) Until such time as the PHA is required to submit an AFH, the PHA is not obligated to complete this chart. The PHA will fulfill, nevertheless, the requirements at 24 CFR § 903.7(o) enacted prior to August 17, 2015. See Instructions for further detail on completing this item.</p>

<p>Fair Housing Goal:</p> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p> <p>See Attachment A for fair housing strategies and goals.</p>
<p>Fair Housing Goal:</p> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p>
<p>Fair Housing Goal:</p> <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p>

Instructions for Preparation of Form HUD-50075-HCV Annual PHA Plan for HCV-Only PHAs

A. PHA Information. All PHAs must complete this section. (24 CFR §903.4)

A.1 Include the full **PHA Name**, **PHA Code**, **PHA Type**, **PHA Fiscal Year Beginning** (MM/YYYY), **Number of Housing Choice Vouchers (HCVs)**, **PHA Plan Submission Type**, and the **Availability of Information**, specific location(s) of all information relevant to the public hearing and proposed PHA Plan.

PHA Consortia: Check box if submitting a Joint PHA Plan and complete the table. ([24 CFR §943.128\(a\)](#))

B. Plan Elements. All PHAs must complete this section. ([24 CFR §903.11\(c\)\(3\)](#))

B.1 Revision of Existing PHA Plan Elements. PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the “yes” box. If an element has not been revised, mark “no.”

Statement of Housing Needs and Strategy for Addressing Housing Needs. Provide a statement addressing the housing needs of low-income, very low-income and extremely low-income families and a brief description of the PHA’s strategy for addressing the housing needs of families who reside in the jurisdiction served by the PHA and other families who are on the Section 8 tenant-based assistance waiting lists. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income); (ii) elderly families (iii) households with individuals with disabilities, and households of various races and ethnic groups residing in the jurisdiction or on the public housing and Section 8 tenant-based assistance waiting lists. The statement of housing needs shall be based on information provided by the applicable Consolidated Plan, information provided by HUD, and generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. Once the PHA has submitted an Assessment of Fair Housing (AFH), which includes an assessment of disproportionate housing needs in accordance with 24 CFR 5.154(d)(2)(iv), information on households with individuals with disabilities and households of various races and ethnic groups residing in the jurisdiction or on the waiting lists no longer needs to be included in the Statement of Housing Needs and Strategy for Addressing Housing Needs. (24 CFR § 903.7(a)).

The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. ([24 CFR §903.7\(a\)\(2\)\(i\)](#)) Provide a description of the ways in which the PHA intends, to the maximum extent practicable, to address those housing needs in the upcoming year and the PHA’s reasons for choosing its strategy. ([24 CFR §903.7\(a\)\(2\)\(ii\)](#))

Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions. A statement of the PHA’s policies that govern resident or tenant eligibility, selection and admission including admission preferences for HCV. ([24 CFR §903.7\(b\)](#))

Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA’s anticipated resources, such as PHA HCV funding and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program and state the planned use for the resources. ([24 CFR §903.7\(c\)](#))

Rent Determination. A statement of the policies of the PHA governing rental contributions of families receiving tenant-based assistance, discretionary minimum tenant rents, and payment standard policies. ([24 CFR §903.7\(d\)](#))

Operation and Management. A statement that includes a description of PHA management organization, and a listing of the programs administered by the PHA. ([24 CFR §903.7\(e\)](#)).

Informal Review and Hearing Procedures. A description of the informal hearing and review procedures that the PHA makes available to its applicants. ([24 CFR §903.7\(f\)](#))

Homeownership Programs. A statement describing any homeownership programs (including project number and unit count) administered by the agency under section 8y of the 1937 Act, or for which the PHA has applied or will apply for approval. ([24 CFR §903.7\(k\)](#))

Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements. A description of any PHA programs relating to services and amenities coordinated, promoted, or provided by the PHA for assisted families, including those resulting from the PHA's partnership with other entities, for the enhancement of the economic and social self-sufficiency of assisted families, including programs provided or offered as a result of the PHA's partnerships with other entities, and activities subject to Section 3 of the Housing and Community Development Act of 1968 (24 CFR Part 135) and under requirements for the Family Self-Sufficiency Program and others. Include the program's size (including required and actual size of the FSS program) and means of allocating assistance to households. ([24 CFR §903.7\(l\)\(i\)](#)) Describe how the PHA will comply with the requirements of section 12(c) and (d) of the 1937 Act that relate to treatment of income changes resulting from welfare program requirements. ([24 CFR §903.7\(l\)\(iii\)](#)).

Substantial Deviation. PHA must provide its criteria for determining a "substantial deviation" to its 5-Year Plan. ([24 CFR §903.7\(r\)\(2\)\(i\)](#))

Significant Amendment/Modification. PHA must provide its criteria for determining a "Significant Amendment or Modification" to its 5-Year and Annual Plan.

If any boxes are marked "yes", describe the revision(s) to those element(s) in the space provided.

B.2 New Activities. This section refers to new capital activities which is not applicable for HCV-Only PHAs.

B.3 Progress Report. For all Annual Plans following submission of the first Annual Plan, a PHA must include a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year PHA Plan. ([24 CFR §903.11\(c\)\(3\)](#), [24 CFR §903.7\(r\)\(1\)](#))

B.4 Capital Improvements. This section refers to PHAs that receive funding from the Capital Fund Program (CFP) which is not applicable for HCV-Only PHAs

B.5 Most Recent Fiscal Year Audit. If the results of the most recent fiscal year audit for the PHA included any findings, mark "yes" and describe those findings in the space provided. ([24 CFR §903.7\(p\)](#))

C. Other Document and/or Certification Requirements.

C.1 Resident Advisory Board (RAB) comments. If the RAB had comments on the annual plan, mark "yes," submit the comments as an attachment to the Plan and describe the analysis of the comments and the PHA's decision made on these recommendations. ([24 CFR §903.13\(c\)](#), [24 CFR §903.19](#))

C.2 Certification by State of Local Officials. Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, must be submitted by the PHA as an electronic attachment to the PHA Plan. ([24 CFR §903.15](#)). Note: A PHA may request to change its fiscal year to better coordinate its planning with planning done under the Consolidated Plan process by State or local officials as applicable.

C.3 Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan. Provide a certification that the following plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public. This requirement is satisfied by completing and submitting form HUD-50077 ST-HCV-HP, *PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed*. Form HUD-50077-ST-HCV-HP, *PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed* must be submitted by the PHA as an electronic attachment to the PHA Plan. This includes all certifications relating to Civil Rights and related regulations. A PHA will be considered in compliance with the certification requirement to affirmatively further fair housing if the PHA fulfills the requirements of §§ 903.7(o)(1) and 903.15(d) and: (i) examines its programs or proposed programs; (ii) identifies any fair housing issues and contributing factors within those programs, in accordance with 24 CFR 5.154; or 24 CFR 5.160(a)(3) as applicable (iii) specifies actions and strategies designed to address contributing factors, related fair housing issues, and goals in the applicable Assessment of Fair Housing consistent with 24 CFR 5.154 in a reasonable manner in view of the resources available; (iv) works with jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement; (v) operates programs in a manner consistent with any applicable consolidated plan under 24 CFR part 91, and with any order or agreement, to comply with the authorities specified in paragraph (o)(1) of this section; (vi) complies with any contribution or consultation requirement with respect to any applicable AFH, in accordance with 24 CFR 5.150 through 5.180; (vii) maintains records reflecting these analyses, actions, and the results of these actions; and (viii) takes steps acceptable to HUD to remedy known fair housing or civil rights violations, impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction. ([24 CFR §903.7\(o\)](#)).

C.4 Challenged Elements. If any element of the Annual PHA Plan or 5-Year PHA Plan is challenged, a PHA must include such information as an attachment to the Annual PHA Plan or 5-Year PHA Plan with a description of any challenges to Plan elements, the source of the challenge, and the PHA's response to the public.

D. Affirmatively Furthering Fair Housing (AFFH).

D.1 Affirmatively Furthering Fair Housing. The PHA will use the answer blocks in item D.1 to provide a statement of its strategies and actions to implement each fair housing goal outlined in its accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5) that states, in relevant part: "To

implement goals and priorities in an AFH, strategies and actions shall be included in program participants' ... PHA Plans (including any plans incorporated therein) Strategies and actions must affirmatively further fair housing” Use the chart provided to specify each fair housing goal from the PHA’s AFH for which the PHA is the responsible program participant – whether the AFH was prepared solely by the PHA, jointly with one or more other PHAs, or in collaboration with a state or local jurisdiction – and specify the fair housing strategies and actions to be implemented by the PHA during the period covered by this PHA Plan. If there are more than three fair housing goals, add answer blocks as necessary.

Until such time as the PHA is required to submit an AFH, the PHA will not have to complete section D., nevertheless, the PHA will address its obligation to affirmatively further fair housing in part by fulfilling the requirements at 24 CFR 903.7(o)(3) enacted prior to August 17, 2015, which means that it examines its own programs or proposed programs; identifies any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with local jurisdictions to implement any of the jurisdiction’s initiatives to affirmatively further fair housing that require the PHA’s involvement; and maintain records reflecting these analyses and actions. Furthermore, under Section 5A(d)(15) of the U.S. Housing Act of 1937, as amended, a PHA must submit a civil rights certification with its Annual PHA Plan, which is described at 24 CFR 903.7(o)(1) except for qualified PHAs who submit the Form HUD-50077-CR as a standalone document.

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the Annual PHA Plan. The Annual PHA Plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA’s operations, programs, and services, and informs HUD, families served by the PHA, and members of the public for serving the needs of low- income, very low- income, and extremely low - income families.

Public reporting burden for this information collection is estimated to average 6.02 hour 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. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

ATTACHMENT A
FY 2022-23 ANNUAL PHA PLAN FOR HCV ONLY PHAs
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
(MSHDA) (MI-901)

B. Plan Elements

B.1 Revision of PHA Plan Elements:

Statement of Housing Needs and Strategy for Addressing Housing Needs

MSHDA is dedicated to serving the needs of the homeless, very low and extremely low-income Michigan residents. This is demonstrated in its administration of the Housing Choice Voucher Program via the on-going efforts:

- designating a homeless preference for county HCV waiting lists.
- designating a disabled preference for county HCV waiting lists.
- commitment to the Michigan Campaign to End Homelessness.
- working with partner agencies serving the elderly, families with disabilities, households of various races and ethnic groups.
- working with Continuum of Care groups across the State of Michigan.
- exceeding federal income targeting requirements by establishing that 80% of new admissions must be extremely low-income families and up to 20% of new admissions must be very low-income families.
- administering the HCV VASH Program in partnership with four VA medical facility sites across the State of Michigan (Battle Creek, Detroit, Saginaw, and Iron Mountain).
- administering Non-Elderly Disabled (NED) vouchers.
- administering the Affordable Assisted Housing Program (AAHP), in Macomb and Oakland Counties, which combines an HCV with the Michigan Medicaid Waiver to provide housing as an alternative to nursing home care.
- expanding the 2014-2015 Moving-Up Pilot that partners with the Michigan Department of Community Health (MDCH) and provides a resource for previously homeless populations utilizing Permanent Supportive Housing; MSHDA has committed over 600 vouchers for this pilot program.
- leveraging 100 vouchers with the Section 811 Project Rental Assistance Program.
- creating a State Innovation Model (SIM) Pilot Program that partners with the Michigan Department of Health and Human Services (MDHHS) to provide housing and supportive services to citizens that have very high utilization levels of emergency departments and emergency services that are also experiencing homelessness. MSHDA has committed up to 200 vouchers for this pilot program, which also includes Frequency Utilizers Systems Engagement (FUSE) programs.
- administering nearly 5,000 Project-Based Vouchers in over 200 developments across the state.
- offering a PBV waiting list preference in select PBV properties for Chronically Homeless, United States Veterans, Homeless Frequent Emergency Department Users with Care Needs, Highly Vulnerable Populations and Supportive Housing Populations.
- implementing a recertification of homelessness at the time of PBV waiting list draw, to ensure the applicant still meets the definition of homelessness.
- administrating more than 1,200 Project-Based Vouchers via the Rental Assistance Demonstration (RAD) in 22 properties across the state.
- administering over 180 Project-Vouchers as a result of public housing or multifamily properties converting to new assistance under HUD's At-Risk and Streamline Voluntary Conversions.
- continuing outreach efforts to find affordable and good quality units for voucher holders.
- identifying when to open and close county waiting lists to maintain up to date lists.
- implementing biennial HQS inspections for HCV housing units.
- administering an initiative in partnership with the Michigan Department of Corrections (MDOC) to enhance housing opportunities for persons exiting correctional facilities. MSHDA has allocated up to 200 vouchers for returning citizens that need long-term rental assistance.
- administering the Mainstream Voucher Program. The program provides voucher assistance to non-elderly and disabled households, with a preference granted to those experiencing homelessness, at-risk of homelessness, congregate housing facilities or at-risk of congregate housing placement. MSHDA was awarded 99 vouchers from HUD for this program. An additional 30 Mainstream Vouchers were awarded by HUD via the CARES Act funding.

- administering the Family Unification Program (FUP) in collaboration with the MDHHS. The program provides voucher assistance to FUP-eligible families and FUP-eligible youth experiencing housing barriers. MSHDA was awarded 81 vouchers from HUD for this program.
- administering Emergency Housing Vouchers (EHV). MSHDA was awarded EHVs and associated service funding from HUD and entered into MOUs with local CoCs and/or Planning Bodies for applicant referrals and delivery of service funding to mitigate barriers to obtain housing.

Deconcentration and Other policies that Govern Eligibility, Selection and Admissions

MSHDA promotes deconcentration of poverty and promotes income mixing in all areas by educating applicants at the time of their briefing on these issues.

Waiting lists exist for all 83 Michigan counties and are opened or closed as necessary. Applications are taken electronically. As of November 23, 2021, there are 28,960 applicants on the waiting lists. Of these, 25,567 are extremely low income; 2,582 are very low income; and 811 are low income. Families with children make up 45% of waiting list applicants; 9% are elderly and 18% are disabled.

MSHDA has a homeless preference and applications are taken from homeless families and added to the homeless preference waiting list when certified. A disability preference is given for those applicants where the head of household, co-head or spouse are disabled. Verification of disability is obtained upon selection from the waiting list.

A county residency preference is given for those applicants who either live or work in the county and can prove residency through a verified current address or verification from an employer. A Michigan residency preference is given for those applicants who either live or work in the state of Michigan and can prove residency through a verified current address or verification from an employer.

PBV applicants must apply through the Lead Agency/HARA or property management staff. Referrals are sent directly to the MSHDA contracted Housing Agent for placement on the PBV Waiting List.

Financial Resources

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2019 grants)		
a) Public Housing Operating Fund	Not applicable	
b) Public Housing Capital Fund	Not applicable	
c) Annual Contributions for Section 8 Tenant-Based Assistance	\$219,487,162	Section 8 Eligible expenses
d) Community Development Block Grant (CDBG)	Not applicable	
e) HOME	Not applicable	
Other Federal Grants (list below)		
FSS Program	\$ 1,178,500	FSS Program
Sec 811 Program	\$ 5,516,950	Sec 811 PRA Program
2. Prior Year Federal Grants (unobligated funds only) (list below)	None	
3. Public Housing Dwelling Rental Income	Not applicable	
4. Other income (list below)	None	
5. Non-federal sources (list below)	None	
Total resources	\$226,182,612	

Rent Determination:

MSHDA will continue to have a \$50 Minimum Total Tenant Payment (TTP). If the MSHDA HCV budget is significantly increased, the minimum TTP amount may be adjusted downward.

In December 2021, MSHDA received an expedited waiver approval from HUD to set the payment standards at 120% of the 2022 Fair Market Rents for its jurisdiction. MSHDA will conduct a review of the 2023 Fair Market Rents to determine payment standard levels and if necessary, request a similar approval to establish 2023 payment standards between 111-120% for its jurisdiction.

Homeownership:

MSHDA will continue administering its Section 8 Homeownership Program entitled the *Key to Own* Homeownership Program which has been operating since March 2004. The MSHDA *Key to Own* Homeownership Program has no set limits on the maximum number of participants. Currently, MSHDA has over 1,200 participants in the *Key to Own* Homeownership Program who are working on program requirements, i.e., credit scores, finding employment, debt reduction, etc. Since the program's inception, 624 MSHDA HCV participants have become homeowners.

Safety and Crime Prevention:

The MSHDA Office of Rental Assistance and Homeless Solutions (RAHS) is committed to the implementation of the VAWA of 2013. MSHDA will continue to undertake actions to meet this requirement in the administration of the Housing Choice Voucher (HCV) Program.

MSHDA's contracted Housing Agents participate in local Continuum of Care meetings and use those contacts and others known to them through the Family Self-Sufficiency Program to assist survivors of domestic violence (including dating violence, sexual assault, or stalking) and their children when cases are made known to them.

Many of the agencies participating in the Continuum of Care groups provide temporary housing/shelter to survivors of domestic violence and their children. MSHDA staff and Housing Agents work with the partnering Continuum of Care service agencies and partnering Housing Assessment and Resource Agencies (HARAs) to find resources for domestic violence survivors, and children and adult victims of dating violence, sexual assault, or stalking to make sure the family can maintain their housing assistance.

MSHDA provides the Notice of Occupancy Rights under VAWA (HUD 5380) and the Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking (HUD 5382) when a family is denied admission to the program, when a family is admitted to the program and when the family is terminated from the program. In addition, MSHDA has created an Emergency Move Plan for HCV and PBV participants and provides the Emergency Transfer Request for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking (HUD 5383) upon request.

D. Affirmatively Furthering Fair Housing (AFFH)

D.1 Affirmatively Further Fair Housing

The following strategies and actions were employed by MSHDA to achieve fair housing goals:

Strategy/Action #1:

Conduct Education and Testing to Reduce the incidence of Housing Discrimination: In partnership with local fair housing centers, MSHDA is providing training to landlords, local units of government, property managers, MSHDA staff, the general public, and other housing partners in fair housing law and practice to reduce the incidence of housing discrimination in Michigan. Fair housing centers are conducting fair housing testing on MSHDA-financed multifamily housing complexes and Housing Choice Voucher properties to evaluate compliance with state and federal law concerning protected classes. Fair housing centers provide guidance and assistance to housing providers with fair housing concerns. MSHDA is providing virtual educational opportunities to MSHDA customers and the public to bring greater awareness to rights under the

Fair Housing Act. Some of the topics covered include but are not limited to Criminal Records, Sexual Harassment, National Origin Discrimination, and Religious Discrimination.

Strategy/Action #2:

Increase access to housing for disadvantaged populations: Assists 28,000 low-income families with rent subsidies through MSHDA's HCV Program. The program includes a homeless preference and a disability preference to move individuals into safe, decent, and stable housing. The HUD VASH program administered by MSHDA combines the HCV rental assistance for homeless veterans with case management and clinical services provided by the Department of Veteran Affairs (VA). The Mainstream Voucher Program provides rental assistance to families that consist of a non-elderly person with disabilities. The voucher assistance provides the housing stability that many individuals desperately need, and the Department of Health and Human Services (DHHS) and the Housing Assessment and Resource Agencies (HARA) provide support services based on the individual's needs and affiliated program. The Family Unification Program (FUP) provides rental assistance to FUP-eligible families and youth. The rental assistance provides relief from housing barriers and the local Continuum of Care (CoC) and DHHS agencies provide supportive services to promote housing stability and self-sufficiency. The Emergency Housing Vouchers (EHVs) provide rental assistance for individuals and families who are homeless, at-risk of homelessness, recently homeless, and survivors of domestic violence, dating violence, sexual assault, stalking and human trafficking. The service funding that accompanies the EHV is utilized by the COCs and Local Planning Bodies to identify and mitigate barriers that these families may face in the renting a unit with an EHV.

Disseminate fair housing rights materials including information related to sexual harassment to approximately 28,000 households receiving assistance through MSHDA's Housing Choice Voucher Program. Additionally, distributes fair housing materials to approximately 9,000 landlords participating in the HCV Program.

Strategy/Action #3

Bring greater awareness to fair housing rights: MSHDA's Housing Education Program (HEP) partners with 35 Housing Counseling Agencies throughout Michigan which employs counselors and educators who hold HUD and other National Certifications to deliver individual counseling and educational classes in the following key areas: Homebuyer Education, Pre-Purchase Individual Counseling, Mortgage Default and Delinquency (Foreclosure) Counseling, Financial Literacy Group Education, Individual Budget and Credit Counseling, Rental Housing Education and Counseling, Disaster Relief Housing Counseling and Homeless Individual Counseling. Within each of these service types include Fair Housing training and individual client support with any Fair Housing concerns or possible violations. Housing Counselors are required to be HUD Certified and actively employed by a HUD approved 501c3 organization. Counselors are also required to receive ongoing professional development training to ensure they are delivering the most current information to the clients they serve, especially surrounding fair housing laws. MSHDA HEP is dedicated to Fair Housing and both our team as well as our agencies have deep working relationships with the Fair Housing offices throughout Michigan in the delivery of AFFH trainings and client referrals.: Regularly sponsor fair housing events hosted by local fair housing centers to support and expand fair housing efforts in training, awareness, testing, etc. to tackle impediments to fair housing choice. Incorporate fair housing training into existing regional meetings, conferences, and workshops with housing partners.

Strategy/Action #4

Fair Housing Information on MSHDA Website and Outreach efforts: Fair housing rights and complaint filing information on MSHDA's website to connect users to local and national fair housing resources. Local units of government, nonprofit organizations, and other organizations funded with state or federal resources through MSHDA prominently place fair housing posters and information for the public to view and are required to affirmatively further fair housing.

Strategy/Action #5

Enhance Access to Homeless Prevention Services: Employ the Coordinator for Michigan's Campaign to End Homelessness (MCTEH) and maintain the website (<https://www.michigan.gov/mcteh>) that provides pertinent information related to programming, workshops/training, and initiatives to assist regional and

community providers in serving individuals and families experiencing homelessness and those at risk of homelessness. Work closely with the MCTEH partners to host an annual Summit on Ending Homelessness to create content that addresses the needs and interest of individuals and providers involved in various levels of policy, funding, and homeless service delivery development throughout the entire state.

Attachment 1D-11a: Letter Signed by Working Group

CoC: MI-501

August 25, 2023

Tasha Gray, Executive Director
Housing Action Network of Detroit (HAND)
3701 Miracles Blvd; STE 101
Detroit, MI 48201

RE: Lived Experience Work Group - (NOFO) for FY 2023 CoC Competition and Renewal

Dear Ms. Gray,

Members from both the Detroit CoC Advisors Group and Youth Action Board are providing this letter of support for the Detroit Continuum of Care application submission under the FY 2023 CoC Competition and Renewal - FR-6700-N-25.

The Detroit CoC Advisors Group (DAG) was established to drive decisions related to the homeless response and center People with Lived Experience of Homelessness (PWLEH) in the policy development, program design, quality improvement, and overall system management for the Detroit CoC. The Youth Action Board (YAB) was established to create pathways for youth to advocate for equitable policy and programming within the Detroit CoC and community at large. Both groups work diligently toward the overall goal of improving the quality and efficiency of the Detroit homeless service system. The members of these committees all have lived experience of homelessness. Ending homelessness remains a priority of both groups as they strive to ensure safe, stable, and permanent housing for all including black, brown & LGBTQ+ persons.

The DAG and YAB, through this letter, are indicating our support of the Detroit Continuum of Care application under FR-6700-N-25. We also affirm that we were integral members in the completion of the local CoC competition and designing the priorities promoted by the Detroit CoC in the written application.

If there are any questions regarding the information in this letter, feel free to contact any member listed below.


Respectfully,

The Detroit Advisors Group and Youth Action Board

Ajanae Robinson

Printed Name

___ DAG YAB ___ Both
Membership (Select one)



Signature

Alexandria Hicks

Printed Name

___ DAG YAB ___ Both
Membership (Select one)




Signature

Amber Matthews

Printed Name

___ DAG ___ YAB Both
Membership (Select one)



Signature

Armani Arnold

Printed Name

___ DAG YAB ___ Both
Membership (Select one)



Signature

Azaria Terrell

Printed Name

DAG YAB Both
Membership (Select one)



Signature

Briauna Travis

Printed Name

DAG YAB Both
Membership (Select one)



Signature

Deloris Cortez

Printed Name

DAG YAB Both
Membership (Select one)



Signature

Donna L. Price

Printed Name

DAG YAB Both
Membership (Select one)



Signature

Printed Name

DAG YAB Both
Membership (Select one)

Signature

Printed Name

DAG YAB Both
Membership (Select one)

Signature

Keyanna Evans

Printed Name

DAG YAB Both
Membership (Select one)



Signature

ReGina Hentz

Printed Name

DAG YAB Both
Membership (Select one)

Signature

Printed Name

DAG YAB Both
Membership (Select one)

Signature

Tarra Hicks

Printed Name

DAG YAB Both
Membership (Select one)




Signature

Julisa Abad

Printed Name

DAG YAB Both
Membership (Select one)

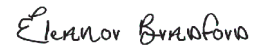


Signature

Eleanor Bradford

Printed Name

DAG YAB Both
Membership (Select one)



Signature

Attachment 1D-2a: Housing First Evaluation

CoC: MI-501

One of the areas of performance the CoC uses to monitor compliance with Housing First is the length of time it takes for a project to move a person into housing after they receive a referral. This data is reviewed quarterly. Attached is an example of a quarterly length of time report used in this evaluation.

LOT HOUSING ANALYSIS_OCT-DEC2022

File created on: 3/8/2023 12:28:26 PM

Median LOT

Project Type	Housing Type	Total Households	Median Days Referral to Entry	Median Days Entry to HMD	Median Days Referral to HMD
PH - Permanent Supportive Housing (disability required ..	PSH PBV	23	29	9	56
	PSH SRO	8	1	2	6
	PSH SS	52	3	74	88
PH - Rapid Re-Housing (HUD)	RRH	59	7	64	80

The view is broken down by Project Type, Housing Type, Total Households, median of Days Referral to Entry, median of Days Entry to HMD and median of Days Referral to HMD. The data is filtered on Relationship to Head of Household(10731)1, Transfers and Provider. The Relationship to Head of Household(10731)1 filter keeps Self (head of household). The Transfers filter keeps NEW. The Provider filter excludes Southwest Counseling Solutions - Detroit CoC - RAPID RH SSVF Veteran's Program 2011-2019(9868) and VOA - Detroit CoC - SSVF - RRH(10378).

Avg. LOT

Project Type	Housing Type	Total Households	Avg. Days Referral to Entry	Avg. Days Entry to HMD	Avg. Days Referral to HMD
PH - Permanent Supportive Housing (disability required ..	PSH PBV	23	33	37	70
	PSH SRO	8	3	3	6
	PSH SS	52	10	78	88
PH - Rapid Re-Housing (HUD)	RRH	59	9	73	81

The view is broken down by Project Type, Housing Type, Total Households, average of Days Referral to Entry, average of Days Entry to HMD and average of Days Referral to HMD. The data is filtered on Relationship to Head of Household(10731)1, Transfers and Provider. The Relationship to Head of Household(10731)1 filter keeps Self (head of household). The Transfers filter keeps NEW. The Provider filter excludes Southwest Counseling Solutions - Detroit CoC - RAPID RH SSVF Veteran's Program 2011-2019(9868) and VOA - Detroit CoC - SSVF - RRH(10378).

Avg. LOT by Provider

Housing Type	Provider	Total Households	Avg. Days Referral to Entry	Avg. Days Entry to HMD	Avg. Days Referral to HMD
PSH PBV	CCSS - Detroit CoC - Antisdel Apartments(9866)	3	24	102	125
	CCSS - Detroit CoC - Brady Permanent Supportive Housing(8579)	1	0	7	7
	CCSS - Detroit CoC - Brady PSH Expansion(13087)	2	1	6	6
	COTS-Detroit CoC - PSH-Buersmeyer's Manor SHP(2428)	1	0	72	72
	NSO - Detroit CoC - BELL HUD SHP Program(9147)	5	8	52	61
	NSO - Detroit CoC - Clay Apartments PSH(12309)	1	5	148	153
	Ruth Ellis Center - Detroit CoC - Clairmount Center PSH(13369)	10	64	5	68
PSH SRO	CCSS -Detroit CoC - Scott PSH(10996)	1	2	0	2
	CCSS -Detroit CoC - Travis PSH(11619)	4	3	3	7
	CCSS- Detroit CoC - Webb PSH(10997)	2	3	5	8
	DRMM - Detroit CoC - Permanent Housing Dept. - Cornerstone (formerly My Own Place)(116)	1	5	0	5
PSH SS	Central City Integrated Health - Detroit CoC - CoC Bonus(10833)	4	12	78	90
	Central City Integrated Health - Detroit CoC - S+C County(11338)	3	1	52	53
	Central City Integrated Health - Detroit CoC -Supportive Housing Program(224)	9	3	106	108
	Community & Home Supports - Detroit CoC - PSH II Leasing(11722)	2	13	55	68
	Community & Home Supports - Detroit CoC - PSH(8755)	3	52	55	107
	COTS - Detroit CoC - S+C (with NSO)(11560)	1	33	258	291
	COTS-Detroit CoC-Pathways PSH(10160)	4	1	83	84
	MDHHS - COTS Permanent Supportive Housing - Detroit CoC - Shelter Plus Care(12802)	3	6	76	83
	MDHHS - Development Centers - Detroit CoC - S+C [Formerly at Detroit East](12803)	1	12	38	50
	MDHHS - Development Centers - Detroit CoC - S+C(12804)	1	5	92	97
	MDHHS - NSO - Detroit CoC - SPC(12809)	1	15	78	93
	MDHHS - SWCS - Detroit CoC - MDHHS Shelter Plus Care(12811)	2	0	63	63
	MDHHS - Traveler's Aid Society - Detroit CoC - Shelter Plus Care(12789)	1	27	8	35
	Neighborhood Legal Services- Detroit CoC- PSH Project Hope II(11411)	1	17	81	98
	Neighborhood Legal Services- Detroit CoC- PSH Project Hope(10984)	1	0	24	24
	NSO - Detroit CoC - HUD SHP Program(8584)	1	34	55	89
	SWCS - Detroit CoC - RA Consolidation (formerly S+C II [Chronic])(11558)	4	0	76	76
	TASMD- Detroit CoC - Project Infinity(123)	1	14	93	107
	TASMD-Detroit CoC - Beit(122)	1	6	18	24
	Wayne Metro CAA - Detroit CoC - PSH(12710)	8	8	77	85
RRH	AFG - Detroit CoC - Detroit Youth Collaborative RRH Initiative(11613)	12	16	52	68
	AFG - Detroit CoC - Rapid Rehousing - City ESG/CDBG(13287)	1	8	20	28
	AFG - Detroit CoC - Rapid Rehousing - State ESG-CV II(12973)	1	9	244	253
	Central City Integrated Health - Detroit CoC - RRH - City ESG/CDBG(13391)	1	18	149	167
	Neighborhood Legal Services - Detroit - RRH - City ESG/CDBG(12792)	1	4	127	131
	Neighborhood Legal Services Michigan - Detroit CoC- Project Permanency - COC RRH Families(10727)	2	4	60	64
	Neighborhood Legal Services Michigan-Detroit CoC- COC RRH - NLSM CARES(10983)	16	8	68	76
	NSO-Detroit CoC- RRH(11324)	8	10	21	32
	Ruth Ellis Center - Detroit CoC - RRH - City ESG/CDBG(13378)	1	0	116	116
	Southwest Counseling Solutions - Detroit CoC - HUD CoC RRH(11040)	14	0	104	104
	Wayne Metro CAA - Detroit CoC - RRH - State ESG-CV(12425)	1	15	147	162
	XXXCLOSED2022-Wayne Metro CAA - Detroit - RRH - City ESG/CDBG(12812)	1	57	25	82

The view is broken down by Housing Type, Provider, Total Households, average of Days Referral to Entry, average of Days Entry to HMD and average of Days Referral to HMD. The data is filtered on Relationship to Head of Household(10731)1 and Transfers. The Relationship to Head of Household(10731)1 filter keeps Self (head of household). The Transfers filter keeps NEW. The view is filtered on Provider, which excludes Southwest Counseling Solutions - Detroit CoC - RAPID RH SSVF Veteran's Program 2011-2019(9868) and VOA - Detroit CoC - SSVF - RRH(10378).

Avg. LOT by Provider_Export

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AFG - Detroit CoC - Detroit Youth Collaborative RRH Initiative(11613)	RRH	12	16	52	68
AFG - Detroit CoC - Rapid Rehousing - City ESG/CDBG(13287)	RRH	1	8	20	28
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CCSS - Detroit CoC - Antisdal Apartments(9866)	PSH PBV	3	24	102	125
CCSS - Detroit CoC - Brady PSH Expansion(13087)	PSH PBV	2	1	6	6
CCSS - Detroit CoC - Brady Permanent Supportive Housing(8579)	PSH PBV	1	0	7	7
CCSS -Detroit CoC - Scott PSH(10996)	PSH SRO	1	2	0	2
CCSS -Detroit CoC - Travis PSH(11619)	PSH SRO	4	3	3	7
CCSS - Detroit CoC - Webb PSH(10997)	PSH SRO	2	3	5	8
COTS - Detroit CoC - S+C (with NSO)(11560)	PSH SS	1	33	258	291
COTS-Detroit CoC - PSH-Buersmeyer's Manor SHP(2428)	PSH PBV	1	0	72	72
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MDHHS - SWCS - Detroit CoC - MDHHS Shelter Plus Care(12811)	PSH SS	2	0	63	63
MDHHS - Traveler's Aid Society - Detroit CoC - Shelter Plus Care(12789)	PSH SS	1	27	8	35
NSO - Detroit CoC - BELL HUD SHP Program(9147)	PSH PBV	5	8	52	61
NSO - Detroit CoC - Clay Apartments PSH(12309)	PSH PBV	1	5	148	153
NSO - Detroit CoC - HUD SHP Program(8584)	PSH SS	1	34	55	89
NSO-Detroit CoC- RRH(11324)	RRH	8	10	21	32
Neighborhood Legal Services - Detroit - RRH - City ESG/CDBG(12792)	RRH	1	4	127	131
Neighborhood Legal Services Michigan - Detroit CoC- Project Permanency - COC RRH Families(10727)	RRH	2	4	60	64
Neighborhood Legal Services Michigan-Detroit CoC- COC RRH - NLSM CARES(10983)	RRH	16	8	68	76
Neighborhood Legal Services- Detroit CoC- PSH Project Hope II(11411)	PSH SS	1	17	81	98
Neighborhood Legal Services- Detroit CoC- PSH Project Hope(10984)	PSH SS	1	0	24	24
Ruth Ellis Center - Detroit CoC - Clairmount Center PSH(13369)	PSH PBV	10	64	5	68
Ruth Ellis Center - Detroit CoC - RRH - City ESG/CDBG(13378)	RRH	1	0	116	116
SWCS - Detroit CoC - RA Consolidation (formerly S+C II [Chronic])(11558)	PSH SS	4	0	76	76
Southwest Counseling Solutions - Detroit CoC - HUD CoC RRH(11040)	RRH	14	0	104	104
TASMD - Detroit CoC - Project Infinity(123)	PSH SS	1	14	93	107
TASMD-Detroit CoC - Beit(122)	PSH SS	1	6	18	24
Wayne Metro CAA - Detroit CoC - PSH(12710)	PSH SS	8	8	77	85
Wayne Metro CAA - Detroit CoC - RRH - State ESG-CV(12425)	RRH	1	15	147	162
XXXCLOSED2022-Wayne Metro CAA - Detroit - RRH - City ESG/CDBG(12812)	RRH	1	57	25	82

The view is broken down by Provider, Housing Type, Total Households, average of Days Referral to Entry, average of Days Entry to HMD and average of Days Referral to HMD. The data is filtered on Relationship to Head of Household(10731)1 and Transfers. The Relationship to Head of Household(10731)1 filter keeps Self (head of household). The Transfers filter keeps NEW. The view is filtered on Provider and Housing Type. The Provider filter excludes Southwest Counseling Solutions - Detroit CoC - RAPID RH SSVF Veteran's Program 2011-2019(9868) and VOA - Detroit CoC - SSVF - RRH(10378). The Housing Type filter keeps PSH PBV, PSH SRO, PSH SS and RRH.

Attachment 1E-1: Web Posting of Local Competition Deadline

CoC: MI-501

Public Posting of Local Application Deadlines

In the FY2023 CoC competition, the Detroit CoC had different application deadlines for renewal projects and new projects. All deadlines were at least 30 days prior to the CoC application submission deadline.

Posting of New Project Application Deadlines

New project applications were due to the Collaborative Applicant by August 4, 2023. The application materials and the deadline was publicly posted on June 26, 2023, as shown in the screen shot below.

The screenshot shows a web browser window with the following elements:

- Browser Tabs:** ClickTime - Day View, Continuum of Care Funding — H
- Address Bar:** handetroit.org/continuum-of-care-funding
- Navigation Menu (Left):**
 - ABOUT
 - CAM TRANSITION
 - COC BOARD
 - CONTINUUM OF CARE FUNDING**
 - YHDP FUNDING
 - MSHDA FUNDING
 - HUD ASSESSMENT PAYMENTS
 - MEMBERSHIP MEETINGS
 - HOMELESS DOCUMENTATION
 - DOCUMENTS
 - HOMELESS PROGRAM FORMS
 - MOVING UP
 - TRAININGS
 - COVID-19 INFORMATION
 - VETERAN HOUSING FUND
- Main Content (Right):**
 - ### FY2023 CoC Local Project Application Materials
 - #### New Project Applications
 - The Detroit Continuum of Care is releasing a Request for Proposals (RFP) for agencies interested in applying for new Continuum of Care project funding. Applications may be submitted for projects that do not currently receive CoC funding or for currently-funded projects for which the agency would like to request additional funding.
 - Applications may also be submitted for projects specifically targeted to persons fleeing domestic violence.
 - Full details on this funding opportunity are found in the Request for Proposals, which may be accessed [here](#).
 - Applications for new project funding must be submitted by 12:00 pm (noon) on August 4, 2023.**
 - Entities interested in applying are strongly encouraged to attend the New Project Application webinar being held at 1:00 pm on July 5. The registration link for this webinar is [here](#).
 - #### On-Line Application Portal
 - Applications for new project funding must be submitted via an on-line application portal, which can be accessed here: https://webportalapp.com/sp/hud_application.
- System Tray (Bottom Right):** 10:19 AM 6/26/2023

Posting of Renewal Project Application Deadlines

Renewal project applications were due to the Collaborative Applicant by June 12, 2023. The application materials and the deadline was publicly posted on May 8, 2023. Information on the public posting of the renewal application materials was sent to all current CoC recipients on May 8, 2023, as evidenced by this email:

From: [Amanda Sternberg](#)
To: agood@alternativesforgirls.org; cthomas@alternativesforgirls.org; tyancey@alternativesforgirls.org; ccumcac@aol.com; aelster@casscommunity.org; egeorge@casscommunity.org; js1@chsinc.org; MN1@chsinc.org; mt1@chsinc.org; cjohnson@cotsdetroit.org; cnmorgan@cotsdetroit.org; amorrell@cotsdetroit.org; CGRIFFIN@cotsdetroit.org; kfarrow@centralcityhealth.com; kmarietti@centralcityhealth.com; cacuster@centralcityhealth.com; draudi@drmm.org; jagboka@drmm.org; bwillis@drmm.org; linda@drmm.org; dowens@drmm.org; rblumenfeld@drmm.org; jwhite1@dwihn.org; tjones@dwmha.com; edoeh1@dwmha.com; tjames@dwmha.com; lmccain@develctr.org; nwade@develctr.org; tbosley@develctr.org; JMcCormack@develctr.org; Tasha Gray; Kaitie Giza; Kiana Harrison; dave.sampson@marinersinn.org; svanever@marinersinn.org; cjackson@marinersinn.org; sspencer@marinersinn.org; kroach@mchsmi.org; kedmon@mchsmi.org; jgriggs@wcnls.org; gwhite@wcnls.org; pwilson@wcnls.org; llittle@nso-mi.org; debwiliams@nso-mi.org; jwojahn@nso-mi.org; luke.hassevoort@ruthelliscenter.org; mark.erwin@ruthelliscenter.org; staci.hirsch@ruthelliscenter.org; jebaugh@swsol.org; jscarlett@swsol.org; roslyn.baughman@tasmd.org; mdarlene266@gmail.com; KaiserP@michigan.gov; HendgesL2@michigan.gov; tallariqor@michigan.gov; mrobinson@waynemetrometro.org; lpiszker@waynemetrometro.org; rjones@waynemetrometro.org; mcenti@waynemetrometro.org; dbutler@waynemetrometro.org; wmdevelopment@waynemetrometro.org
Subject: Renewal of FY2023 CoC Renewal Project Application Materials and Informational Webinar
Date: Monday, May 8, 2023 10:32:00 AM
Importance: High

Hello,

Please review the message below for important information on the upcoming FY2023 Continuum of Care (CoC) competition:

- **The renewal project application polices, scoring criteria, and application form have been published to HAND's website here:** <https://www.handetroit.org/continuum-of-care-funding>
 - Self-scoring tools for this year will be published in the coming week.
- Renewal project applications are due to HAND by 12:00 pm (noon) on **June 12, 2023**. See the application materials for details.
- **Thursday, May 18, from 9:00 – 11:00 AM:** All agencies applying for *renewal* funding in the upcoming FY2023 CoC competition are **strongly encouraged** to attend the applicant webinar (Zoom link is [here](#)) where we will cover in detail the renewal project application materials, scoring criteria, and deadlines. This meeting will be recorded for later viewing, however, it is highly recommended a representative from your organization attend. All agencies currently receiving FY2022 CoC funding should attend this meeting, even if you have not yet received your FY2022 CoC grant agreement, as you will need to apply for renewal funding in the FY2023 funding round for continued funding for your projects.
- The May 18th meeting will cover *renewal project applicants* only. A separate meeting will be held for agencies that would like to apply for new or new expansion funding. Those dates are TBD.
- **Contacts:** Review the individuals in the "to" section of this message. If there are people at your organization be added/removed as a contact, let me know. This is the distribution list that will be used in the coming months to communicate information related to the CoC competition.
- All CoC competition materials will be posted to HAND's website. You are encouraged to "bookmark" this site for easy reference: <https://www.handetroit.org/continuum-of-care-funding>

Upcoming deadlines:

The following dates are provided to help you plan accordingly. As always, this timeline may be

subject to change pending the receipt of additional information from HUD:

- **May 18, 9:00 AM:** Webinar for renewal project applicants
- Mid June: Release of new project application materials (for applying for new or expansion funding) and informational webinar
- **June 12 (noon):** Renewal Project application materials due to HAND
- June – July: Review of renewal projects
- August (tentative): Appeals process
- August – September (tentative): eSNAPS entry
- October (tentative): Final project ranking list determined and projects submitted to HUD

Please let me know if you have any questions. Thank you!

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Screen Shot of Renewal Project Posting

Documentation of the public posting of the renewal application materials is given here. This is a screen grab of a webinar held on May 18, 2023 for all renewal projects. As can be seen in this screen grab, the renewal project application materials were publicly posted as of this date:

The screenshot displays a Zoom webinar interface. The main content is a webpage from handetroit.org/continuum-of-care-funding titled "VETERAN HOUSING FUND". The page features a red circle around the following text:

FY2023 CoC Local Project Application Materials

Renewal Project Applications

The FY2023 CoC Renewal Project Application Policies and Form may be accessed via the following links. Renewal project applications are due to HAND by 12:00 pm (noon) on June 12, 2023.

- FY2023 Renewal Project Application Policies may be accessed [here](#).
- Renewal application only (Word format, for downloading and completing) may be accessed [here](#).

Renewal project application webinar:

All agencies applying for renewal funding are encouraged to attend the applicant webinar on May 18, from 9:00 am - 11:00 am. The registration link for this webinar may be found [here](#).

Renewal Project Self-Scoring Tools

Renewal projects may complete a self-scoring tool to understand how their project may score. Completion of these tools is optional. Note there are different tools for the different types of projects.

- Permanent Supportive Housing (PSH)

Below the Zoom window, the Windows taskbar is visible, and a red circle highlights the system tray showing the date "5/18/2023".

Attachment 1E-2: Local Competition Scoring Tool

CoC: MI-501

This document contains the scoring criteria used to rate, review, and rank renewal projects. This information is given on pages 4 to 20 of this document.



Detroit Continuum of Care FY2023 HUD Continuum of Care Funding Competition Renewal Application and Evaluation Policies and Procedures and Application Form

Renewal Project Application Due Date: **12:00 PM (noon) on June 12, 2023**

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I. Background and Due Dates

As the Collaborative Applicant for the Detroit Continuum of Care (CoC), the Homeless Action Network of Detroit (HAND) manages the decision-making and application process for the FY2023 HUD Continuum of Care Homeless Assistance Funding application. HUD requires Continuums of Care (CoC) develop a process to determine whether projects eligible for renewal are (1) performing satisfactorily and (2) effectively addressing the needs for which they were designed.

This packet contains information about the process to be used for the FY2023 funding competition for renewal projects. Currently funded Continuum of Care (CoC) projects not being reallocated and expiring in calendar year 2024 must request renewal funding in the FY2023 funding process.

The information presented here has been developed before the release of HUD's Notice of Funding Opportunity (NOFO). Therefore, this information presented here is subject to change depending upon the content of the NOFO. All information and materials may also be found on HAND's website at www.handetroit.org/continuum-of-care-funding.

A webinar will be held on **May 18, 2023** from **9:00 – 11:00 AM** for current Detroit CoC grantees. Registration for the webinar is [here](#). All current CoC grantees are strongly encouraged to participate on this webinar. The webinar will be recorded and posted to HAND's website for later viewing.

Renewal project application materials are due to HAND by 12:00 PM (noon) on June 12, 2023.

II. FY2022 Continuum of Care Competition Awards

The list of projects awarded in the FY2022 CoC competition may be accessed here: www.handetroit.org/continuum-of-care-application-archives.

III. FY2023 CoC Renewal Project Application Timeline

The timeline below is subject to change upon the release of the FY2023 NOFO or other developments. Changes to the timeline will be communicated via email and posted to HAND's website at www.handetroit.org/continuum-of-care-funding.

MAY	
May 1	May CoC Board meeting <ul style="list-style-type: none">Board approval of renewal project evaluation criteria
May 8	Release of Renewal Project applications
May 18	Webinar for renewal project applicants at 9 –11 AM <ul style="list-style-type: none">Registration link is hereAttendance strongly encouraged, will be recorded
JUNE	
June 12 (12PM)	Renewal application materials due
JULY	
July (est)	FY2023 NOFO Released
Mid- July	Renewal Project Scores out
Late July	Appeals due
AUGUST	
Throughout August	eSNAPS project entry

Early August	Decisions on appeals
SEPTEMBER	
Throughout month	eSNAPS project entry
OCTOBER	
Early October	Final project priority ranking list decided
Mid October	CoC application and all projects submitted to HUD

IV. Renewal Project Eligibility

In order to be submitted to HUD for renewal, projects seeking renewal funding must meet the following basic eligibility criteria:

- 1) Submit completed renewal application and additional required documents to HAND as outlined in this document.
- 2) Meet the threshold score of at least 70% on their renewal project application or have been approved by the Appeals Committee to be submitted for renewal if under threshold score.
- 3) Meet the HUD application deadlines (ie, entry into eSNAPS) set by HAND.
- 4) Projects required by HAND to participate in technical assistance processes in previous competition years must be in compliance with requirements in the projects' technical assistance plan.
- 5) Meet all HUD eligibility criteria, as outlined in the FY2023 CoC Program NOFO (to be released), the July 2012 CoC Program Interim HEARTH Regulations, and other official documents published by HUD.

Renewal funding is not guaranteed. It is unknown if funds available in the FY2023 competition will be sufficient to fund all renewal projects. CoC projects not being reallocated and having current grant terms expiring in calendar year 2024 are eligible to submit their application to the Collaborative Applicant for renewal funding.

V. Audits and Funder Monitoring Reports

All projects seeking renewal funding will be required to submit the following:

- Organization's most recent financial audit, including the most recent A-133 audit, if applicable.
- HUD monitoring reports, or communication regarding monitoring findings from prior monitoring, from March 2022 to March 2023.
- Monitoring reports and additional applicable documentation from the City of Detroit for ESG/CDBG homeless program monitoring conducted from March 2022 to March 2023.

These audits and monitoring reports will be reviewed. Any outstanding items will result in a deduction of points from the overall project score. See **Section VIII** for scoring details.

If the CoC is made aware of outstanding audit findings other than what is given in the submitted documents (such as findings from another funder, the Office of Inspector General, etc) the CoC may take the results of that report into consideration as well. The CoC reserves the right to not fund renewal or new projects in the event of significant concerns regarding an organization's financial capacity.

VI. Renewal Project Threshold Scoring & Project Ranking

Based on the scoring criteria below, projects not scoring at least 70% of the points available will not be submitted for funding unless an appeal is granted. Projects granted an appeal will be submitted for funding and ranked according to the project priority ranking policies.

The CoC is required to prioritize and rank all projects seeking funding in the FY2022 CoC funding competition. The CoC Board is currently scheduled to vote to approve the FY2023 CoC Project Priority Ranking and Reallocation policies at its July 10, 2023 board meeting. Once finalized, the policies will be posted to: www.handetroit.org/continuum-of-care-funding.

VII. Summary of Changes to Renewal Project Scoring Criteria

Below is a summary of the significant changes to project scoring criteria from the FY2022 to the FY2023 competitions.

	Project type changes apply to				
	PSH	RRH	TH-RRH	TH	CE-SSO (CHS only)
Component #2: Housing Performance & Quality					
(A) Housing Retention or Exit to Perm Housing (Modified)	✓	✓	✓	✓	
(C) Length of Time from Referral to Housing Move-In Date (Modified)	✓	✓			
(D) Returns to homelessness (Modified)	✓	✓	✓	✓	
Component #4: HMIS Compliance					
(A) Agency Admin Mtg Attend (Modified)	✓	✓	✓	✓	✓
(B) Data Quality and Completeness (Modified))	✓	✓	✓	✓	✓
(D) Known Exit Destinations (Modified)	✓	✓	✓	✓	✓
(E) Accurate Reporting for Quarterly PIT/Housing Move-in Date Audit for CoC Project (New)	✓	✓			
(F) Accurate Reporting for Quarterly PIT/Housing Move-in Date Audit for non-CoC PSH or RRH Project (New)	Agencies with non-CoC funded PSH or RRH only				
Component #6: CAM Participation					
(A) Referral Outcome Reporting for CoC Project (Modified)	✓	✓	✓	✓	
Component #8: DV Projects Only					
(A) Increasing Participants Safety (New)		DV only	DV only		

VIII. Renewal Project Scoring

Except where otherwise indicated, renewal projects will be scored based upon the following components. The total number of points a project may earn will vary on the project type as given below. Details on these scoring components are given in the following pages. New/modified elements from FY2022 are in **red**.

	PSH	RRH	TH	TH-RRH	HMIS	CE-SSO (CHS)
Component #1: Income & Employment						
(A) Leavers w/cash income	5	7	7	7	N/A	N/A
(B) Leavers w/non-cash benefits	5	5	5	5	N/A	N/A
(C) Leavers w/earned income	3	5	5	5	N/A	N/A
(D) Leavers w/increase in total income	2	3	3	3	N/A	N/A
(E) Stayers w/health insurance	2	N/A	N/A	N/A	N/A	N/A

	PSH	RRH	TH	TH-RRH	HMIS	CE-SSO (CHS)
Component #1 Sub-Total	17 (14%)	20 (16%)	20 (19%)	20 (17%)	N/A	N/A
Component #2: Housing Performance and Quality						
(A) Housing Retention or Exit to Permanent Housing	25	25	25	25	N/A	N/A
(B) Utilization Rates	10	10	10	10	N/A	N/A
(C) Length of Time from Referral to Housing Move In	10	10	N/A	N/A	N/A	N/A
(D) Returns to homelessness	5	5	5	5	N/A	N/A
(E) Service Staff and Program Availability	3	N/A	N/A	N/A	N/A	N/A
(F) Facilitation & Tracking Referrals	2	N/A	N/A	N/A	N/A	N/A
Component #2 Sub-Total	55 (44%)	50 (41%)	40 (38%)	40 (34%)	N/A	N/A
Component #3: Financial Performance						
(A) Grant Amount expended	8	8	8	8	8	8
(B) Negative Points for Outstanding Findings	Up to -10 for outstanding findings					
Component #3 Sub-Total	8 (6%)	8 (7%)	8 (8%)	8 (7%)	8 (9%)	8 (11%)
Component #4: HMIS Compliance						
(A) Agency Admin Mtg Attend	3	3	3	3	N/A	3
(B) Data Quality & Completeness	10	10	10	10	N/A	10
(C) Accurate Recording of Annual Assessment	1	1	1	1	N/A	1
(D) Known Exit Destinations	3	3	3	3	N/A	3
(E) 2023 HIC Submission	5	5	5	5	N/A	5
(F) PIT Audit Changes (CoC PSH & RRH Projects Only)	3	3	N/A	3	N/A	3
(G) PIT Audit Changes (non-CoC PSH & RRH projects)	2	2	2	2	N/A	2
Component #4 Sub-Total	27 (22%)	27 (22%)	24 (23%)	27 (23%)	N/A	27 (38%)
Component #5: Inclusion of Persons with Lived Experience						
(A) Consumer participation	2	2	2	2	2	2
(B) Meaningful Participation of PWLE	6	6	6	6	6	6
(C) Negative points for substantiated grievances	Range of negative points possible for substantiated grievances					
Component #5 Sub-Total	8 (6%)	8 (7%)	8 (8%)	8 (7%)	8 (9%)	8 (11%)
Component #6: CAM Participation						
(A) Referral Outcome reporting: CoC project	2	2	2	2	N/A	N/A
(B) Referral Outcome reporting: All other projects	2	2	2	2	N/A	N/A
(C) New Client Entries	2	2	2	2	N/A	N/A
(D) Housing Move in Date Completion	4	4	N/A	4	N/A	N/A
(E) HMIS Lead Agency staff generating reports from HMIS to support CAM process	N/A	N/A	N/A	N/A	2	N/A
(F) HMIS Lead Agency staff providing CAM-specific HMIS training	N/A	N/A	N/A	N/A	2	N/A

	PSH	RRH	TH	TH-RRH	HMIS	CE-SSO (CHS)
(G) HMIS Lead Agency staff providing customized HMIS reports to support CAM	N/A	N/A	N/A	N/A	2	N/A
Component #6 Sub-Total	10 (8%)	10 (8%)	6 (6%)	10 (9%)	6 (7%)	N/A
Component #7: CAM Implementing Partner						
(A) PSH Packet Submissions for completed Navigation Appointments	N/A	N/A	N/A	N/A	N/A	8
(B) Accurate Submission of PSH Packets	N/A	N/A	N/A	N/A	N/A	8
(C) Accuracy of HCV Apps by CAM Nav.	N/A	N/A	N/A	N/A	N/A	8
(D) Client satisfaction with Navigation	N/A	N/A	N/A	N/A	N/A	4
Component #7 Sub-Total	N/A	N/A	N/A	N/A	N/A	28 (39%)
Component #8: Domestic Violence Projects Only						
(A) Increasing participant safety	N/A	N/A	N/A	4	N/A	N/A
Component #8 Sub-Total	N/A	N/A	N/A	4 (3%)	N/A	N/A
Component #9: HMIS Lead Only						
Proportional Points from CoC Application	N/A	N/A	N/A	N/A	70	N/A
Component #9 Sub-Total	N/A	N/A	N/A	N/A	70 (76%)	N/A
TOTAL POINTS POSSIBLE	125	123	106	117	92	71
Informational Only Questions:						
• Agency Consumer Grievance Process and Documentation (Organizational Question 5)						
• PSH Match Returns Narrative (Organizational Question 6)						
• Eviction/Terminations in 2022 (Project Application Question 3)						
• Client to Case Manager Ratio (Project Application Question 4)						
• Provision of In-Person Case Management (Project Application Question 5)						

Weighting of Evaluation Components

Percentages in parenthesis in the chart above indicate the proportion the component is worth for the given project type. Not all evaluation components are weighted equally for each project type due variation in the total number of evaluation components applicable to a project type. Additionally, within project types there may be an individual project for which an evaluation component does not apply, resulting in those points being removed from the total number of points that project can earn, further changing how the components are weighted.

Deducting Points for Late, Incomplete, or Incorrect Submissions

Points will be deducted from the application score for late, incomplete, or incorrect submissions. Points will be deducted in this way:

- Late, incomplete, or incorrect items HAND can access on its own via other means (ex: publicly accessible audit report or A-133): 1-point deduction for each item
- Late, incomplete, or incorrect items HAND cannot access on its own via other means that must come from the applicant (ex: documentation of consumer participation or signature page): 3 point deduction for each item

If, after the points are deducted, the project score is less than 70%, the project will need to submit an appeal to be considered for placement on the project ranking list.

The number of items required for submission will vary from project to project. Projects should carefully review the submission checklists on pages 27 and 32 for the required items to be submitted. Agencies are encouraged to contact HAND staff if they are unclear as to the applicability of items to be submitted.

Outstanding Assessment Invoices

Agencies with an outstanding balance on HUD assessments due to HAND by the time the application is due to HUD will not have their renewal project application(s) submitted to HUD for funding via eSNAPS.

COMPONENT #1: Mainstream Resources & Employment

Value = 17 to 20 points total, depending on project type

Reporting Period: 1/1/2022 – 12/31/2022; Data Source: CYAPR

Applies To: PSH, RRH, TH-RRH, and TH	
	Scoring Range and Points Possible
<p>(A) <u>Leavers with Any Cash Income (5 to 7 points depending on project type)</u> Projects will be scored on the percentage of adult leavers who leave the project with one or more sources of cash income. The higher the percentage of people with one or more sources of cash income, the higher the score. "Cash income" includes both earned and non-earned income.</p>	<p><u>PSH</u></p> <ul style="list-style-type: none"> • 65% - 100%: 5 • 40% - 64%: 3 • Below 40%: 0 <p><u>RRH, TH-RRH, & TH</u></p> <ul style="list-style-type: none"> • 70% - 100%: 7 • 60% - 69%: 5 • 50% - 59%: 3 • Below 50%: 0
<p>(B) <u>Leavers with Any Non-Cash Benefits (5 points)</u> Projects will be scored on the percentage of adult leavers who leave the project with one or more sources of non-cash benefits. The higher the percentage of adults leaving with one or more sources of non-cash benefits, the higher the score. Non-cash benefits includes food stamps, other TANF benefits, or health insurance (including Medicaid/Medicare).</p>	<p><u>PSH, RRH, TH-RRH, & TH</u></p> <ul style="list-style-type: none"> • 85% - 100%: 5 • 60% - 84%: 3 • Below 60%: 0
<p>(C) <u>Leavers with Earned Income/Employment (3 to 5 points depending on project type)</u> Projects will be scored on the percentage of adult leavers who leave the project with earned income (ie, employment). The higher the percentage of adults leaving with earned income, the higher the score.</p>	<p><u>PSH</u></p> <ul style="list-style-type: none"> • 10% - 100%: 3 • 5% - 9%: 1 • Below 5%: 0 <p><u>RRH, TH-RRH & TH</u></p> <ul style="list-style-type: none"> • 20% - 100%: 5 • 15% - 19%: 3 • 10% - 14%: 1 • Below 10%: 0
<p>(D) <u>Increases in Total Cash Income for leavers & stayers (2 to 3 points depending on project type)</u> Projects will be scored on the percentage of persons (leavers and stayers) who have an increase in any income (earned or other). Measure will be based on both those who exited the project and those who were still in the project as of 12/31/2022.</p>	<p><u>PSH</u></p> <ul style="list-style-type: none"> • 40% - 100%: 2 • 10% - 39%: 1 • Below 10%: 0 <p><u>RRH, TH-RRH, & TH</u></p> <ul style="list-style-type: none"> • 25% - 100%: 3 • 15% - 24%: 2 • 10% - 14%: 1 • Below 10%: 0

Applies To: PSH, RRH, TH-RRH, and TH	
	Scoring Range and Points Possible
(E) <u>PSH Only: Stayers with Health Insurance (2 points)</u> PSH projects will be scored on the percentage of project stayers as of 12/31/2022 who have health insurance. Measure will exclude persons who have not yet had an annual update.	<u>PSH</u> <ul style="list-style-type: none"> • 80% - 100%: 2 • 50% - 79%: 1 • Below 50%: 0

COMPONENT #2: Housing Performance and Quality
Value =50 to 55 points total, depending on project type
Reporting Period: 1/1/2022 – 12/31/2022;
Data Source: CYAPR, self-reported, and additional data from HMIS

Applies to: PSH	
	Scoring Range and Points Possible
(A) <u>Retention in Permanent Housing (25 points)</u> Measure: Percentage of participants who either remain in the PSH project as of 12/31/2022 or who have exited PSH project to another permanent housing destination. The following will be excluded from the calculations: <ul style="list-style-type: none"> • Clients with exit destinations of death, foster care, hospital/residential non-psychiatric facility, and nursing home. • Also excluded will be clients entered into and exited from the project in 2022 but never had a housing move-in date. 	<ul style="list-style-type: none"> • 95% – 100%: 25 • 90% - 94%: 20 • 80% - 89%: 10 • Below 80%: 0
(B) <u>Utilization Rates (10 points)</u> Measure: Overall average project occupancy rates on the following dates: 1/26/22, 4/27/22, 7/27/22, 10/26/22, 12/28/22. Projects that began ramping up new units at any point in 2022 will be evaluated on utilization expectations as given in that project’s ramp up plan.	<ul style="list-style-type: none"> • 90% – 100%: 10 • 75% – 89%: 5 • Below 75%: 0
(C) <u>Length of Time from Referral to Housing Move-In (10 points)</u> Projects will be scored based on the average length of time it took to move clients into housing in 2022. Measure will look at length of time from referral date to housing move-in date. Different standards will apply for different project types: PSH Project Based (non-SROs), PSH SROs, and PSH scattered-site. See Appendix B for information on how each PSH project will be categorized for this component.	<u>PSH Project-Based, non-SRO</u> <i>(average = 90 days)</i> <ul style="list-style-type: none"> • 89 days or less: 10 • 90 to 93 days: 5 • 94 to 105 days: 3 • >105 days: 0 <u>PSH SRO</u> <i>(average = 11 days)</i> <ul style="list-style-type: none"> • 10 days or less: 10 • 11 to 14 days: 5 • 15 to 26 days: 3 • >26 days: 0

Applies to: PSH	
	Scoring Range and Points Possible
	<p><u>PSH Scattered-Site</u> (average = 81 days)</p> <ul style="list-style-type: none"> • 80 days or less: 10 • 81 to 84 days: 5 • 85 to 96 days: 3 • >96 days: 0
<p>(D) <u>Returns to homelessness within 6 months of exit from project to permanent housing (5 points)</u> Projects will be scored based on the percentage of clients who exited the project to permanent housing at some point between 10/1/2021 – 12/31/2022 and who returned to homelessness within 6 months of that exit.</p>	<ul style="list-style-type: none"> • 3% or less: 5 • 4% - 5%: 3 • 6% - 15%: 1 • >15%: 0
<p>(E) <u>Service Staff and Program Availability (3 points)</u> Projects will be scored based on the extent to which supportive service staff, including on-call crisis staff, are available outside of typical business hours.</p>	<ul style="list-style-type: none"> • Services are available on flexible schedules, out of regular business hours, with on call crisis services available 24 hrs a day, 7 days a week: 3 • Services are available 8AM – 5PM Monday -Friday, with some weekend availability (4 – 12 hours scheduled on weekends): 2 • Services are available 9AM – 5PM Monday -Friday: 1
<p>(F) <u>Facilitation and Tracking of Referrals (2 points)</u> Projects will be scored based on agency response to the following question in the application:</p> <p>“The primary supportive housing service provider facilitates and tracks referrals, and in some cases transportation, to community service providers for tenants including, at a minimum, behavioral healthcare, primary healthcare, substance abuse treatment and support, employment services, and benefits assistance.”</p>	<ul style="list-style-type: none"> • Yes: 2 • No/unknown; or this information is not currently tracked: 0

Applies to: RRH, TH-RRH, and TH	
	Scoring Range and Points Possible
<p>(A) <u>Exits to Permanent Housing (25 points)</u> Measure: Percentage of participants who exit the program to a permanent housing destination.</p> <p>The following will be excluded from the calculations:</p>	<ul style="list-style-type: none"> • 90% – 100%: 25 • 80% – 89%: 20 • 75% – 79%: 15 • 70% – 74%: 10

Applies to: RRH, TH-RRH, and TH	
	Scoring Range and Points Possible
<ul style="list-style-type: none"> • Clients with exit destinations of death, foster care, hospital/residential non-psychiatric facility, and nursing home. • For RRH projects only, also excluded will be clients entered into and exited from the project in 2022 but never had a housing move-in date. 	<ul style="list-style-type: none"> • Below 70%: 0
<p>(B) Utilization Rates (10 points) Measure: Overall average project occupancy rates on the following dates: 1/26/22, 4/27/22, 7/27/22, 10/26/22, 12/28/22.</p> <p>Projects that began ramping up new units at any point in 2022 will be evaluated on utilization expectations as given in that project’s ramp up plan.</p>	<ul style="list-style-type: none"> • 90% – 100%: 10 • 75% – 89%: 5 • Below 75%: 0
<p>(C) Length of Time from Referral to Housing Move-In (10 points) (RRH only) Projects will be scored based on the average length of time it took to move clients into housing in 2022. Measure will look at length of time from referral date to housing move-in date.</p>	<p>RRH <i>(average = 81 days)</i></p> <ul style="list-style-type: none"> • 80 days or less: 10 • 81 to 84 days: 5 • 85 to 96 days: 3 • >96 days: 0
<p>(D) Returns to homelessness within 6 months of exit from project to permanent housing (5 points) Projects will be scored based on the percentage of clients who exited the project to permanent housing at some point between 10/1/2021 – 12/31/2022 and who returned to homelessness within 6 months of that exit.</p>	<ul style="list-style-type: none"> • 3% or less: 5 • 4% - 5%: 3 • 6% - 15%: 1 • >15%: 0

COMPONENT #3: Financial Performance
Value = 8 points total
Reporting Period: Most recently completed project term; Data Source: Sage

Applies to: All Projects	
	Scoring Range and Points Possible
<p>(A) Grant Amount Expended (8 points) Projects will be scored based on the extent to which the agency has expended its most recently completed annual Continuum of Care grant. Scoring will be based on the following scales, which differ depending on the project type. HAND staff will pull this information directly from Sage. See Appendix A for the grant number and spending information reported in Sage that will be scored.</p>	<p><u>Projects without a rental assistance budget line:</u></p> <ul style="list-style-type: none"> • 90% - 100% expended: 8 • 85% - 89% expended: 4 • <85% expended: 0 <p><u>Projects with a rental assistance budget line:</u></p> <ul style="list-style-type: none"> • 85% - 100% expended: 8 • 75% - 84% expended: 4 • <75% expended: 0

Applies to: All Projects	
	Scoring Range and Points Possible
<p>(B) <u>Deduction for Outstanding Audit Findings (-10 points if applicable)</u> Points may be deducted from project score based on outstanding or unresolved findings in an agency audit or funder monitoring reports.</p>	<p>A total of up to 10 points may be deducted from a project’s score. These 10 points will be calculated as follows: Up to 2 points may be deducted from a project’s score <i>for each of the following that apply</i>:</p> <ul style="list-style-type: none"> • <i>Agency Financial Audit</i> (other than A-133 Audit): Repeat and/or unresolved audit findings from prior audit year. • <i>A-133 Audit</i>: Repeat and/or unresolved audit findings from prior audit year associated with CoC grants. • <i>A-133 Audit</i>: Repeat and/or unresolved audit findings from prior audit year associated with federal grants other than CoC grants. • <i>HUD CoC Program Monitoring report</i>: No Corrective Action Plan submitted by HUD’s deadlines, or Correction Action Plan submitted did not meet HUD’s approval. • <i>City Homeless Program Monitoring Report</i>: No Corrective Action Plan submitted by City’s deadlines, or Correction Action Plan submitted did not meet City’s approval.

COMPONENT #4: HMIS Compliance
Value = 24-27 points total, depending on project type
Reporting Period: 1/1/2022 – 12/31/2022 unless otherwise indicated; Data Source: HMIS records

Applies to: PSH, RRH, TH-RRH, TH, and CE-SSO	
<i>Note: These components except 4F are an agency score, in that if an agency has multiple projects, including projects of different types, the same score will be applied to all projects for that agency. Component 4F will be applied to the renewing project only.</i>	
	Scoring Range and Points Possible
<p>(A) <u>HMIS Agency Admin Meeting Attendance (3 points)</u> Agency will be scored based on attendance at HMIS Agency Administrator in 2022. The score received by the agency will be applied to all the agency’s renewing projects.</p> <p>The two “e-blasts” sent on 1/19/22 and 11/15/22 in lieu of an on-line meeting will automatically count as two meetings each agency attended. Example, if an agency attended 2 of the on-line Agency Admin meetings, they would be counted as having attended 4 meetings (2 e-blasts + 2 on-line meetings).</p>	<ul style="list-style-type: none"> • 6 or more mtgs (ie, 4 or more meetings + 2 eblasts): 3 • 5 or fewer mtgs (ie, 3 or fewer meetings + 2 eblasts): 0

Applies to: PSH, RRH, TH-RRH, TH, and CE-SSO	
<i>Note: These components except 4F are an agency score, in that if an agency has multiple projects, including projects of different types, the same score will be applied to all projects for that agency. Component 4F will be applied to the renewing project only.</i>	
	Scoring Range and Points Possible
<p>On-line Agency Admin meeting dates were:</p> <ul style="list-style-type: none"> • March 8, 2022 • May 31, 2022 • August 23, 2022 • April 19, 2022 • July 12, 2022 • October 2, 2022 <p><i>Data source: HMIS Agency Admin Meeting Attendance Records</i></p>	
<p>(B) Data Quality and Completeness (10 points) Agency will be scored based on the % of error rate for the following:</p> <ul style="list-style-type: none"> • Name (1 point) • Date of Birth (1 point) • Relationship to Head of Household (1 point) • Income Source at Entry (1 point) • Income Source at Exit (1 point) • Race (1 point) • Ethnicity (1 point) • Gender (1 point) • Client Location (1 point) • Disabling Condition (1 point) <p>Score will be based on all projects an agency reports in HMIS (excluding Warming Centers and Street Outreach). See Appendix C for the specific projects to be included for each organization. HMIS Lead Agency staff will generate these reports for scoring.</p> <p><i>Data source: CYAPR, questions 6a, 6b, 6c</i></p>	<p>Agencies may earn 1 point for each of the 10 data elements given where the error rate is 5% or less. Up to 10 points total may be earned (1 point for each data element)</p>
<p>(C) Accurate Recording of Annual Assessment (1 point) Agency will be scored based on the percentage of people served for which the annual assessment has been accurately recorded. The number of people without the required annual assessment (APR question 18) will be compared to the number of people served by the project.</p> <p>Score will be based on all projects an agency reports in HMIS (excluding Warming Centers and Street Outreach). See Appendix C for the specific projects to be included for each organization. HMIS Lead Agency staff will generate these reports for scoring.</p> <p><i>Data source: CYAPR, question 18, Number of adult stayers without required annual assessment</i></p>	<p>Percentage of persons served without required annual assessment:</p> <ul style="list-style-type: none"> • 5% or less: 1 • 6% or more: 0

Applies to: PSH, RRH, TH-RRH, TH, and CE-SSO	
<i>Note: These components except 4F are an agency score, in that if an agency has multiple projects, including projects of different types, the same score will be applied to all projects for that agency. Component 4F will be applied to the renewing project only.</i>	
	Scoring Range and Points Possible
<p>(D) <u>Known Exit Destinations (3 points)</u> Projects will be scored based on the extent to which they have at least 75% of clients exited exit to known destinations for <i>all</i> projects an organization has in HMIS.</p> <p>Score will be based on all projects an agency reports in HMIS (excluding Warming Centers and Street Outreach). See Appendix C for the specific projects to be included for each organization. HMIS Lead Agency staff will generate these reports for scoring.</p>	<ul style="list-style-type: none"> ● 75% - 100%: 3 ● <75%: 0
<p>(E) <u>Housing Inventory Chart Submission (5 points)</u> Projects will be scored based the extent to which the agency submitted <i>all</i> its required 2023 Housing Inventory Charts (HICs) by February 17, 2023.</p> <p><i>Data source: Record of HIC submission via the on-line submission form.</i></p>	<ul style="list-style-type: none"> ● All HICs submitted by due date: 5 ● All HICs not submitted by due date: 0
<p>(F) <u>Accurate Reporting for Quarterly Point-in-Time Count/Housing Move-In-Date Audit for CoC funded project (3 points) (PSH and RRH only)</u> Agency will receive a score based on the extent to which the agency refrains from making changes to its PIT count data following the quarterly Housing Move-In Date audits.</p> <p>HMIS System Administrator staff will select one of the four PIT dates from 2022 (1/26/22, 4/27/22, 7/27/22, 10/26/22). Agencies will not be informed which date was chosen until after the review is completed. The same date will be used for all agencies.</p> <p>The HMIS System Administrator will re-run the project APR for this date and compare the data in that APR to the data in the APR that was confirmed back when the audit was completed.</p> <p>If the data is different (ie, total served and total housed) 0 points will given. If the data is the same, 3 points will be given.</p> <p><u>Client Transfers</u> Client transfers occurred in 2022, sometimes due to projects ramping down or projects being over-extended in the number of people they served. Client transfers may have resulted in changes to a project’s PIT data, and will be handled as follows:</p> <ul style="list-style-type: none"> ● Agencies sending client transfers: Will be held accountable for changes to PIT data made because of client transfers, because these changes in PIT data point to elements of poor program planning and management. This may result in these agencies earning 0 points for this component. 	<p>No changes made to PIT count audit data after submission: 3</p> <p>Evidence that changes were made to PIT count audit data after submission: 0</p>

Applies to: PSH, RRH, TH-RRH, TH, and CE-SSO	
<i>Note: These components except 4F are an agency score, in that if an agency has multiple projects, including projects of different types, the same score will be applied to all projects for that agency. Component 4F will be applied to the renewing project only.</i>	
	Scoring Range and Points Possible
<ul style="list-style-type: none"> Agencies receiving client transfers: Will not be penalized for changes to PIT data made because of having to receive client transfers, as these agencies did not have control over another agency’s need to transfer clients to them as a result of ramp-downs. <p>Component F will apply only to the CoC funded project being renewed that report into HMIS. Domestic Violence projects that use a comparable database will not be scored on this component.</p>	
<p><u>(G) Accurate Reporting for Quarterly Point-in-Time Count/Housing Move-in-Date Audit for non-CoC funded PSH or RRH projects (2 points)</u></p> <p>Same as above for Component F above, only this score will apply to any non-CoC funded PSH and/or RRH project(s) an agency had in operation in 2022.</p> <p>These points will not apply to agencies that did not have non-CoC PSH or RRH projects in operation in 2022.</p>	<p>No changes made to PIT count audit data after submission: 2</p> <p>Evidence that changes were made to PIT count audit data after submission: 0</p>

NOTE: Organizations scoring low on the HMIS component (10 or less points) will be targeted for follow-up technical assistance to help remedy the deficiencies. These organizations must commit to working with HMIS staff to resolve the deficiencies identified.

COMPONENT #5: Inclusion of Persons with Lived Experience
Value = 8 points total
Data source: Self-report in project application & accompanying attachments as required

Applies to: All Project Types	
	Scoring Range and Points Possible
<p><u>(A) Consumer Participation in Agency Board or Equivalent (2 points)</u> Points will be awarded based on the extent to which the recipient and subrecipient (if applicable) demonstrates the participation of a homeless or formerly homeless individual on the agency’s board of directors or equivalent policymaking entity.</p> <p>This is an agency score. If an agency has multiple projects, including projects of different types, the same score will be applied to all projects for that agency. This requirement also applies to both recipients and subrecipients.</p> <p>Recipients and sub-recipients will be required to either demonstrate compliance with this regulation, including documentation of the</p>	<ul style="list-style-type: none"> Over the course of CY2022, organization had consumer participation and provided documentation of same: 2 Over the course of CY2022, the organization had no consumer participation: 0 <p>NOTE: Agencies responding in 2022 with “no consumer participation, but has a plan in place” will be expected, in the 2023 competition, to demonstrate progress on this plan to</p>

Applies to: All Project Types	
	Scoring Range and Points Possible
<p>individuals’ participation. If the project has a recipient and sub-recipients(s) points will be awarded based on the extent to which all entities associated with the grant are compliant with this regulation.</p> <p>For the purposes of the CoC’s local application process, documentation of participation of a homeless or formerly homeless person on a policy-making entity may include:</p> <ul style="list-style-type: none"> • Board roster identifying the person who is homeless or formerly homeless. NOTE: If a board roster is provided, that roster must clearly identify which board member is the person with lived experience. This can be done by highlighting the individual’s name or otherwise identifying on the roster that the individual is a person with lived experience. An agency will not be able to earn points if a board roster is submitted with no clear indication of who on the roster is the person with lived experience. • Meeting notes of other policy-making entities, with an identification that this entity has body has policy-making abilities for the CoC program and includes persons who are homeless or formerly homeless. • Note: If the agency has a policy to not disclose the homeless/formerly homeless status of an individual serving in a decision-making capacity in order to protect that individual’s privacy, the agency may submit a letter on agency letterhead explaining this. 	<p>secure consumer participation. If the agency is not able to demonstrate consumer participation in the 2023 application, they will earn 0 points in the 2023 application.</p>
<p><u>(B) Meaningful Participation of Persons with Lived Experience (6 points)</u></p> <p>Points will be awarded based on the agency’s response to the following narrative question:</p> <p>Describe how your agency ensures the meaningful participation of persons with lived experience (PWLE) within your homelessness programming. In your response, describe:</p> <ul style="list-style-type: none"> • How persons served by all your homeless/housing projects (not just the project receiving CoC funding) are invited to provide feedback and input into the programming. • How your agency responds to this feedback and input. • How PWLE are incorporated into the decision-making structures within your organization. • The extent to which your agency intentionally hires PWLE within your homelessness programming. • Describe at least one change your agency has made to your homeless programming over the past two years in response to the input received from PWLE. This change could have been made within the project that receives CoC funding or another homeless project within your agency. 	<p>The narrative response provided will be evaluated and scored by a review panel. The scoring scale to be used by the review panel is:</p> <ul style="list-style-type: none"> • 5 – 6 points: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4 points: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2 points: Very little evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 0 points: No clear evidence that agency incorporates PWLE

Applies to: All Project Types	
	Scoring Range and Points Possible
This is a score to be earned by the agency; those points will be applied to all of that agency's renewing projects.	
<p>(C) <u>Substantiated Grievances</u> Points may be deducted from project score based on substantiated grievances filed against that project in 2022. Additionally, if the agency has a substantiated grievance filed against it in 2022 for a non-CoC funded program, and that grievance included the agency retaliating against the client or non-compliance with the grievance committee's requirements, points will be deducted from all that agency's renewal projects. This component will look at grievances that were filed in 2022 and substantiated in either 2022 or the first quarter of 2023.</p>	See Appendix D for details on how substantiated grievances will be scored in FY2023.

COMPONENT #6: Participation in Coordinated Assessment Model (CAM)
Value = 6 to 10 points possible, depending on project type
Data source: Records of participation, including HMIS

Applies to: PSH, RRH, TH-RRH, and TH (except where indicated)	
	Scoring Range and Points Possible
<p>(A) <u>Referral Outcome Reporting (2 points)</u> Projects will be scored based on the extent to which outcomes to referrals received from CAM in 2022 are recorded in HMIS for the CoC project under review. Exceptions will be made when needed for project transfers. "Referral outcome" means the receiving agency has indicated in HMIS if the referral from CAM is accepted, declined, or canceled. HMIS Lead Agency staff will generate these reports for scoring.</p>	Percentage of referrals received in 2022 with outcome recorded in HMIS: <ul style="list-style-type: none"> • 85% - 100%: 2 • <85%: 0
<p>(B) <u>Referral Outcome Reporting: Non-CoC Funded Projects (2 points)</u> Agencies will be scored based on the extent to which outcomes to referrals to the non-CoC funded projects received from CAM in 2022 are recorded in HMIS. This is a score to be earned by the agency; those points will be applied to all of that agency's renewing projects. "Referral outcome" means the receiving agency has indicated in HMIS if the referral from CAM is accepted, declined, or canceled. Exceptions will be made when needed for project transfers.</p> <p>Score will be based on all projects an agency reports in HMIS (excluding Warming Centers and Street Outreach). See Appendix C for the specific projects to be included for each organization. HMIS Lead Agency staff will generate these reports for scoring.</p>	Percentage of 2022 referrals with outcome recorded in HMIS: <ul style="list-style-type: none"> • 75% - 100%: 2 • <75%: 0

Applies to: PSH, RRH, TH-RRH, and TH (except where indicated)	
	Scoring Range and Points Possible
<p>(C) <u>New Client Entries (2 points)</u> Projects will be scored based on the extent to which new project entries in 2022 to CoC project under review were from CAM. Exceptions will be made when needed for project transfers.</p> <p>If it is not clear from HMIS that a client originated from CAM, HAND staff will seek clarification from CAM's internal database (Salesforce) to reconcile data as needed. HMIS Lead Agency staff will generate these reports for scoring.</p>	<p>Percentage of new client entries in 2022 that were referrals via CAM:</p> <ul style="list-style-type: none"> • 100%: 2 • <100%: 0
<p>(D) <u>Housing Move in Date Completion (4 points) (PSH, RRH, and TH-RRH as applicable)</u> Projects will be scored based on the extent to which Housing Move in Dates (HMID) are completed for the CoC project under review. Exceptions will be made for new clients still in the housing search process and for some clients with an entry/exit but no HMID. See self-scoring tools for details.</p> <p>HMIS Lead Agency staff will generate these reports for scoring.</p>	<p>Percentage of clients with a HMID completed:</p> <ul style="list-style-type: none"> • 90- 100%: 4 • 80% - 89%: 2 • 70% - 79%: 1 • <70%: 0

Applies to: HMIS	
<p>(E) <u>Report Generation (2 points)</u> Projects will be scored based on HMIS Lead Agency staff generating reports from HMIS to support CAM process, including reports to support the implementation of new Coordinated Entry Data Standards.</p>	
<p>(F) <u>Provision of CAM-specific HMIS training (2 points)</u> Projects will be scored based on HMIS Lead Agency staff providing CAM-specific HMIS training, including training related to the implementation of new Coordinated Entry Data Standards.</p>	
<p>(G) <u>CAM Customized HMIS Reports (2 points)</u> Projects will be scored based on HMIS Lead Agency staff providing customized HMIS reports to support CAM, including reports to support the implementation of new Coordinated Entry Data Standards.</p>	

COMPONENT #7: CAM Implementing Partners Only (CHS)
Value = 28 points
Data source: Self report in application; HMIS

In the FY2023 competition, the following evaluation criteria will only apply to the CAM Implementing Partner, CHS. As of May 2023, the CAM Lead Agency (Southwest Counseling Solutions) is transitioning out of that role. Therefore, in the FY2023 competition, Southwest Counseling Solutions will not be evaluated and scored for its

CE-SSO grant. Future competitions will likely reincorporate those removed scored criteria for the CAM Lead Agency.

	Scoring Range and Points Possible
<p>(A) <u>PSH Packet Submissions for Completed Navigation Appointments (8 points)</u> Points will be earned based on the percentage of clients who scored for PSH and who completed their navigation appointment (denominator) and had a PSH packet submitted (numerator). Benchmark is that at least 70% of the clients have a PSH packet submitted.</p> <p><i>Data source: CAM Lead internal records. Data will be self-reported in the application, although some supporting documentation may also be required.</i></p>	<p>Percentage of clients with completed navigation appointment that had PSH packet submitted:</p> <ul style="list-style-type: none"> • 70% - 100%: 8 • 60% - 69%: 6 • 50% - 59%: 4 • < 50%: 0 pts
<p>(B) <u>Accurate Submission of PSH Packets (8 points)</u> Points will be earned based on the percentage of PSH packets submitted by CAM navigators that are correct on the first attempt, based on the documentation required at the time of packet submission for a person to be placed on the PSH Prioritization list. Benchmark is that at least 91% are correct upon first submission.</p> <p><i>Data source: CAM Lead internal records. Data will be self-reported in the application, although some supporting documentation may also be required.</i></p>	<ul style="list-style-type: none"> • 91% - 100%: 8 • 80% - 90%: 6 • 69% - 79%: 4 • <69%: 0
<p>(C) <u>Accuracy of Submission of HCV Applications by CAM Navigators (8 points)</u> Points may be earned based on the accuracy of HCV applications submitted by CAM Navigators. Benchmark is that at least 91% of applications are correct on the first submission.</p> <p><i>Data source: CAM Lead internal records. Data will be self-reported in the application, although some supporting documentation may also be required.</i></p>	<ul style="list-style-type: none"> • 91% - 100%: 8 • 80% - 90%: 6 • 69% - 79%: 4 • <69%: 0 pts
<p>(D) <u>Client Satisfaction with Navigation (4 points)</u> Points will be earned based on the overall average satisfaction reported by clients using the Access Points. Benchmark is that clients report an overall satisfaction rating of “4” on the scale of 1 to 5.</p> <p><i>Data source: Client satisfaction surveys administered by navigators. Data will be self-reported in the application.</i></p>	<ul style="list-style-type: none"> • Overall average rating of 4 or above: 4 • Overall average rating of 3: 2 • Overall average rating of <3: 0

In future funding cycles, the CoC board and CAM Governance Committee may develop additional or different evaluation criteria for the CE-SSO grants. Such evaluation criteria should consider the role these projects play with assisting persons experiencing homeless in accessing needed services and should align with the CAM policies and procedures.

COMPONENT #8: Domestic Violence Projects Only

Value = 4 points

Data source: narrative response in application

Applies to: All Project Types Specifically Funding to Serve People Fleeing Domestic Violence	
	Scoring Range and Points Possible
<p><u>(A) Increasing Participant Safety (4 points)</u> Points will be awarded based on the agency's response to the following narrative question:</p> <p>Describe the project's most important strategies for improving safety for people survivors of domestic violence (DV)/human trafficking (HT), and how the project assesses improvements to participant safety. Use specific examples where possible and see the scoring scale for how this question will be scored.</p>	<p>Scoring Scale:</p> <p>4 - 3 pts: Response clearly describes multiple strategies for improving safety for DV/HT survivors; clearly describes how the project assesses improvements to participant safety; provides at least one concrete, substantive, and current example of what this work looks like that are relevant to the project; demonstrates that working to improve safety for DV/HT survivors is a key part of the project.</p> <p>2 pts: Response describes at least one strategy for improving safety for DV/HT survivors and at least one way that the project assesses improvements to participant safety; provides an example of what this work looks like that may not be concrete, substantive, current or clearly relevant to the project.</p> <p>1 pts: Response describes at least one strategy for improving safety for DV/HT survivors, but does not provide concrete or substantive examples of what this work looks like or how the project assesses improvements to participant safety.</p> <p>0 pts: Response does not identify strategies for improving safety or demonstrate that the project has done work in this area.</p>

COMPONENT #9: HMIS Lead Agency Only (HAND)

Proportional Points from FY2022 CoC Application

Value = 70 points

Data source: Score received on the FY2022 CoC Application

In the FY2022 CoC Competition, HUD scored the Detroit CoC's HMIS implementation the following evaluation criteria:

- Timely submission of required data reports (including the Point in Time, Housing Inventory Count, System Performance Measures, and LSA)
- Bed coverage rates
- Working with Domestic Violence providers on ensuring they have a comparable database in place to collect/report data

HUD reviews and scores the responses given in the CoC application on these questions. The score received on the FY2022 CoC application for the HMIS section was 9 out of the 9 points possible (100%). This proportion (100%) will be applied to the total points the HMIS grant can receive for this component (70). The HMIS grants will receive 70 out of the 70 points possible (100%) for this component.

A value of 70 points was assigned to this section so the total amount of points the HMIS project may receive is 92 (as detailed in chart above). Having a total of 92 points possible allows for comparable weighing of components across the various project types.

Future evaluation criteria for HMIS grants may change depending upon the CoC-Board approved HMIS MOU and workplan.

Evaluation Process for HMIS Grants

- The HMIS Lead agency will complete an application form and a self-evaluation responding to and addressing all the scored components for the HMIS grant.
- This self-evaluation, and supporting documentation, will be reviewed by the Values & Funding Priorities Committee.
- Based upon the self-evaluation and supporting documentation, the Values & Funding Priorities Committee will make a recommendation as to whether or not the HMIS grants should be submitted for renewal funding based on the score from the self-evaluation. The Values & Funding Priorities Committee may request additional supporting documentation during their review.
- HMIS Lead Agency staff, Collaborative Application staff, and CoC Lead staff will be recused from any review of the HMIS project application material or discussion pertaining to the same.

Future Evaluation Criteria for HMIS Grants

The evaluation process for the HMIS grants in FY2023 uses the score received in FY2022 CoC application HMIS section as a proxy for scoring HMIS project performance. This is being done for the FY2023 competition due to absence of other objective criteria on which to evaluate and score this project. For future funding cycles, the CoC board and committee(s) may develop additional evaluation criteria for the HMIS project. This evaluation criteria *may* include:

- Progress against HMIS project plan
- Extent to which privacy plan, data quality plan, and/or security plans are implemented
- End-user satisfaction ratings
- Incorporation or expansion of innovative technology or strategies
- Timely submission of APR reports to HUD
- Additional requirements to be identified in the MOU between HMIS Lead and CoC Board

IX. Additional Evaluation Protocol

A. First and Second Time Renewal Projects

Projects with fewer than 12 full months of operation in CY2022 will be evaluated on scored components as follows. First and second time renewals initially funded as an expansion to an existing project are submitted for renewal funding as a part of the existing project, and therefore will be scored as part of the existing project.

Component	Stand-Alone Renewals <i>(not initially funded as an expansion)</i>	Expansion <i>(initially funded to expand an existing project)</i>
Components 1A-1E <i>(income/employment outcomes)</i>	Not Scored	Scored as part of existing project

Component	Stand-Alone Renewals <i>(not initially funded as an expansion)</i>	Expansion <i>(initially funded to expand an existing project)</i>
Components 2A-2F <i>(Housing outcomes and quality)</i>	Not Scored	Scored as part of existing project
Component 3A <i>(Spending Rates)</i>	Not Scored	Scored as part of existing project, based on most recently completed grant (see Appendix A).
Component 3B <i>(Outstanding/Unresolved Finding)</i>	Scored on any outstanding findings from agency financial audits.	
Components 4A-4G <i>(HMIS elements and HIC submission)</i>	Scored if agency already has programming in Detroit that requires HMIS participation, as this is an agency score.	
Components 5A & 5B <i>(Consumer participation and meaningful participation of PWLE)</i>	Scored if agency already has CoC funded programming in Detroit, as this is an agency score.	
Component 5C <i>(Substantiated grievances)</i>	Will apply if points are to be deducted from all projects an agency has, as given in the grievance scoring scale	
Component 6A <i>(Referral outcome reporting – CoC project)</i>	Scored only if project began receiving referrals from CAM in 2022	Scored as part of existing project
Component 6B <i>(Referral outcome reporting – All other projects)</i>	Scored if agency already has programming in Detroit that requires this reporting, as this is an agency score.	
Components 6C & 6D <i>(New client entries, Housing Move in Date completion)</i>	Scored only if project began serving people in 2022	Scored as part of existing project
Component 8A <i>(DV only, increasing safety)</i>	Not Scored	Scored as part of existing project

B. Protocol for Components or Subcomponents Unable to be Evaluated

In instances where a component is unable to be evaluated, the following protocol will be used:

- Situation: Project is prohibited by law from entering into HMIS.
 - Protocol: The value of any scoring components that rely solely on *HMIS* data (such as *HMIS* data completeness, data quality, etc) will be removed from the total number of points that project may earn. That project will then only be scored on the remaining components.
 - Protocol: For components that may be reported on via alternate internal agency records, those components will be evaluated and scored based on data the project submits to HAND in the format prescribed by HAND.
- Situation: The project had no (0) leavers, and the scored component is based on a leaver's status.
 - Protocol: If the project had no leavers, then the project will be scored for the component in question based only on the *stayers* in the program.
- Situation: There are additional factors that result in no data existing on which to evaluate a project.
 - Protocol: That scored component will be removed from the total number of points a project may earn. That project will then only be scored on the remaining components.
- Situation: An agency receives communication from the funder that the project will no longer be receiving funding and takes steps to ramp down a project, then to have the funder reverse its decision and renew the project's funding.
 - Protocol: In such a situation scoring criteria that may have been impacted by a partial project ramp down will be reviewed and revised as needed based on the specifics of the situation.

In instances where such protocol needs to be implemented, the situations will be vetted by the Values & Funding Priorities Committee to ensure that the protocol are being applied appropriately to the projects in question and decisions are applied consistently to projects in question.

C. Recipient/Subrecipient Responsibility

When there is a recipient/subrecipient relationship for a CoC grant, the table below clarifies which entity will be reviewed for which scoring components. The recipient/subrecipient relationship applies to those agencies in which a subrecipient(s) is identified in the project application and grant agreement, unless the Collaborative Applicant has been notified in writing of another relationship between two agencies resembling a recipient/subrecipient relationship being implemented on a less formal basis.

Scoring Component	Responsible Entity
#1 Income & Employment	
A) Leavers with Any Cash Income	<ul style="list-style-type: none"> • Project APR will be reviewed for this data (unless otherwise indicated). • The recipient is ultimately responsible for reviewing project performance data and submitting the APR to HUD.
B) Leavers with Any Non-Cash Benefits	
C) Leavers with Earned Income (Employment)	
D) Leavers & Stayers with Increase Income	
E) Stayers with health insurance (PSH only)	
For projects with multiple subrecipients, the performance of all subrecipients will be averaged together to determine the final score on a given component.	
#2 Housing Performance & Quality	
A) Housing Exits/Retention	<ul style="list-style-type: none"> • Project APR and other HMIS data will be reviewed for this data. • The recipient is ultimately responsible for reviewing project performance data and submitting the APR to HUD.
B) Utilization Rates	
C) Length of Time from Referral to Housing Move In	<ul style="list-style-type: none"> • Data will be generated by the HMIS Lead agency for individual subrecipient projects.
D) Returns to Homelessness	
E) Service staff and program availability (PSH only)	<ul style="list-style-type: none"> • These questions are based on self-report in the application and should be responded to based on how the direct services are provided.
F) Facilitation and Tracking Referrals (PSH only)	
For projects with multiple subrecipients, the performance of all subrecipients will be averaged together to determine the final score on a given component.	
#3 Financial Performance	
A) Project spending	<ul style="list-style-type: none"> • Recipient, via reporting in Sage
B) Points deducted (if applicable)	<ul style="list-style-type: none"> • Recipient, based on <i>their</i> audits or HUD/City of Detroit Monitoring report • The recipient <u>does not</u> need to submit financial audits, HUD or City of Detroit monitoring reports for their subrecipients
#4 HMIS Compliance	
A) Attendance at Agency Admin meetings	<ul style="list-style-type: none"> • Subrecipient attendance
B) Data Quality & Completeness	<ul style="list-style-type: none"> • Review will be based on projects identified in Appendix C. • A recipient will only be evaluated on these components for the individual project(s) they sub-grant out.
C) Accurate Recording of Annual Assessment	
D) Clients exiting to known destination	

Scoring Component	Responsible Entity
E) Submission of required information for Housing Inventory Count (HIC)	<ul style="list-style-type: none"> • Either the response received from the recipient or the subrecipient • A recipient will only be evaluated on the timely submission of the HIC related to the project(s) they sub-grant out. • For projects in which there are multiple subrecipients on one grant, the score received by the individual recipient on 4E will be averaged together for the final score for this component.
F) and G) Accurate Reporting for Quarterly PIT Count/Housing Move in Date Audit reports	<ul style="list-style-type: none"> • Subrecipient, as this is an HMIS data entry element the subrecipient is responsible for. • For projects in which there are multiple subrecipients on one grant, the score received by the individual recipient on 4F and 4G will be averaged together for the final score for this component.
#5 Consumer Participation	
A) Participation of a homeless or formerly homeless consumer on the board of directors or other equivalent policymaking entity; or description how the recipient and/or sub-recipient will become compliant with this regulation.	<ul style="list-style-type: none"> • Both the recipient and the subrecipient per the CoC Program Regulations.
B) Meaningful participation of Persons with Lived Experience	<ul style="list-style-type: none"> • If both the recipient and the subrecipient(s) are direct service providers, each agency will be expected to respond to the question. The score received for each agency's response will be averaged together for the final score. • If the recipient is not a direct service provider, the subrecipient(s) will be expected to respond to the question. The score received for each subrecipient's response will be averaged together for the final score.
C) Substantiated Grievances	<ul style="list-style-type: none"> • Recipient or Subrecipient, depending upon the nature of the grievance.
#6 CAM Participation	
A) Referral Outcome Reporting for CoC project C) New Client Entries D) Housing Move-in Date completion	<ul style="list-style-type: none"> • Subrecipient
B) Referral outcome reporting for non-CoC funded projects	<ul style="list-style-type: none"> • N/A: will not apply, as recipients will only be scored on performance of their subrecipient projects
For projects with multiple subrecipients, the performance of all subrecipients will be averaged together to determine the final score on a given component.	
#7 CAM Implementation Partner	
All subcomponents	<ul style="list-style-type: none"> • Recipient

Scoring Component	Responsible Entity
#8 Domestic Violence Only	
A) Increasing participant safety	<ul style="list-style-type: none"> • If both the recipient and subrecipient are both directly providing services, both will be evaluated on this component. • If only the subrecipient is directly providing services, only the subrecipient will be evaluated.
#9 HMIS Lead Only	
All subcomponents	<ul style="list-style-type: none"> • Recipient

X. Future Evaluation Criteria

A. Changes to Grant Expenditure Rates

The FY2024 competition will evaluate renewal project expenditures for their most recently completed CoC grant term at that time, which for most projects will be their 2022 – 2023 grant. For the FY2024 competition, the scoring scale for projects will be changed so that projects will need to have expended more funding in order to earn full points. Specifically, the scoring scales will be as follows:

<u>Non-Rental Assistance Projects</u>	<u>Rental Assistance Projects</u>
<ul style="list-style-type: none"> • 95% to 100%: Full points • 94% to 90%: Half points • 89% to 85%: Quarter points • less than 85%: 0 points 	<ul style="list-style-type: none"> • 90% to 100%: Full points • 89 to 80%: Half points • 79% to 75%: Quarter points • less than 75%: 0 points

B. Potential Future Evaluation Criteria

Applicants should assume any evaluation criteria included in FY2023 may be included as scored criteria in future competitions. Additionally, applicants should be aware future evaluations may include the following criteria:

- **PSH Dimensions of Quality Self-Assessment**
 - For PSH projects, future competitions may examine the extent to which PSH providers improved in needed areas of improvement as identified in the PSH Dimensions of Quality Self-Assessment completed in early 2020.
- **Scored criteria changed of removed due to the pandemic**
 - The following scored criteria included in the FY2020 competition were removed in the FY2021 competition because of the pandemic. As of the FY2023 competition, they have not yet been re-incorporated. Providers should anticipate these criteria may again be re-incorporated as scored criteria in a future competition:
 - CoC Meeting and Workgroup meeting attendance (all projects)
 - Training for Coordinated Entry participating agencies (CE-SSO projects, as applicable)
 - Scoring scales adjusted downward in response to the pandemic may, in a future competition, revert back to what they were prior to the pandemic or be additionally changed.
- **Other possible future evaluation criteria:**
 - Any “informational only” elements in the FY2023 application may become a scored element in the future.
 - Compliance with HMIS Data Standards
 - Length of time people remain homeless (for RRH and TH)

- Additional CAM participation criteria (all projects)
- Project draw down rates (all projects)
- Timely submission of APR reports to HUD (all projects)
- Participant eligibility (all projects)

XI. Additional Policies and Resources

Applicant agencies are encouraged to review and utilize the following policies and resources, which are posted on HAND's website at: www.handetroit.org/continuum-of-care-funding.

Self-Scoring Tools

- Self-Scoring Tools are provided so applicants may understand how performance rates are calculated, and to understand what their performance may be. The completion of these tools is optional.

Comments and Responses from Public Comment

- Public comments were received on the draft renewal project evaluation and scoring criteria and draft project priority ranking and reallocation policies. Comments received, and responses to those comments, are available on HAND's website.

FY2023 CoC Project Priority Ranking and Reallocation Policies

- These policies are to be presented to the CoC Board in July 2023 for approval. They will be posted to HAND's website upon approval.

Detroit CoC Funding Application Review and Ranking Process

- Details to the process used to review, score, and rank renewal and new CoC applications.

Detroit CoC Funding Appeals Policy

- As of the publication of these materials, the appeals policy was being reviewed to determine if changes are needed. The final appeals policy will be posted by July 2023 to HAND's website.

XII. HMIS Help Desks Requests

If agencies need assistance from the HMIS Lead Agency for any portion of their renewal application, this request must be submitted via the HMIS Help Desk. The link to the Help Desk is [here](#). In your request, please indicate it is related to your CoC renewal application. The HMIS Lead Agency cannot guarantee that requests for assistance for renewal applications received after June 5 will be able to be addressed by the application due date of June 12. Agencies are encouraged to plan accordingly.

XIII. Application Submission Instructions

Application materials must be emailed to Amanda Sternberg at amanda@handetroit.org by the due date. If your application packet is quite large, you may send materials in a ZIP file or via several emails. You will receive email confirmation of your submission. Email confirmation only confirms receipt of the sent documents; it does not indicate a thorough review of the materials has been completed.

XIV. Contact Information

If you have questions or need further information, contact Amanda Sternberg at amanda@handetroit.org or (313) 380-1714.

ORGANIZATIONAL APPLICATION

Each agency must complete only **one** organizational application. Each agency will also complete a separate project application (beginning on page 32) for each project being submitted for renewal funding.

Applicant Name	
-----------------------	--

Organizational Attachments Checklist			
		Included (✓)	Not Applicable (✓)
	Clearly label all attachments, using the attachment number given, even if attachments will not be numbered sequentially due to an attachment not being applicable. If an attachment does not apply, place a (✓) in the “Not Applicable” column.		
	Organizational Application Coversheet (this page)		
	Completed Organizational Questions (beginning on page 28 of this packet)		
Attachment Number	Attachment Description (One per agency) <i>Agencies only need to submit one (1) of each of the following, even if they are submitting multiple renewal applications</i>		
#1	Agency’s most recently completed A-133 audit		
#2	Agency’s most recently completed agency financial audit		
#3	Agency Grievance Policy & Procedure (Organizational Question 5)		
	<u>If monitored by City of Detroit between March 2022 and March 2023 (Organizational Question 1)</u>		
#4	Monitoring report from City of Detroit		
#5	Organization’s response to monitoring report		
#6	Documentation that monitoring concern or finding satisfied		
	<u>HUD Monitoring Reports or Communication dated between March 2022 and March 2023: (Organizational Question 2)</u>		
#7	Monitoring report from HUD		
#8	Organization’s response to monitoring report		
#9	Documentation from HUD monitoring concern or finding satisfied		
	<u>Participation of homeless/formerly homeless person (Organizational Question 3)</u>		
#10	Documentation of participation of homeless/formerly homeless person (may have multiple, if project has subrecipient(s))		
#11	Request for waiver of this requirement submitted to HUD or HUD’s approval of waiver request		

The Collaborative Applicant reserves the right to request additional project or organizational information at a later date if needed. Any items not included in the checklist that are requested and submitted at a later date above will not result in points deducted from the application.

Organizational Information

Applicant Name:	
Applicant Address: Street:	
City:	State: ZIP:
Applicant Contact Person	
Name:	Phone Number:
Title:	Email:
Contact information for Applicant Executive Director (if different from above)	
__ information same as above	Phone Number:
Name:	Email:
Contact Person for Grievances	
Provide information for the agency's point of contact for grievances. This is the person the CoC Lead Agency will initially contact if a grievance is filed with the CoC.	
Name:	Phone Number:
Title:	Email:

List of Project Applications Submitted: Please list below all of the individual project applications that are being submitted. A separate project application (and project-specific attachments, if needed) must be submitted for each project. The project application begins on page 32.

Organizational Question 1: City of Detroit Monitoring Reports

Any findings may require further review and, if unresolved, may result in negative points for the project.

The response in this section should encompass any type of monitoring from the City of Detroit, including financial monitoring from the Office of the Controller or programmatic monitoring from the Housing and Revitalization Department, and is inclusive of both on-site or desk monitoring:

Do you have a City of Detroit monitoring report, or communication regarding monitoring findings from prior monitoring, dated between *March 2022 and March 2023* for homelessness program funding?

___ No: Select “N/A” for Attachments #4 - #6 in the submission checklist.

___ Yes: Provide the following attachments as applicable.

Attached (✓)	
	Attachment #4: Monitoring report from the City of Detroit (the report that identifies any concerns or findings); OR <input type="checkbox"/> N/A: The City of Detroit has not yet provided our organization with their monitoring report
	Attachment #5: If monitoring report identified concerns, findings, or other items requiring a response, provide your organization’s response to these items; OR <input type="checkbox"/> N/A: The monitoring report did not contain any items requiring our organization’s response
	Attachment #6: Documentation from the City of Detroit that a monitoring concern or finding has been satisfied; OR <input type="checkbox"/> N/A: City of Detroit has not yet responded to our organization’s response to the monitoring report

Note: HAND will consult with the City of Detroit regarding the responses given in this section.

Organizational Question 2: HUD Monitoring Reports

Any findings may require further review and, if unresolved, may result in negative points for the project.

Do you have a HUD monitoring report, or communication regarding monitoring findings from prior monitoring, dated between *March 2022 and March 2023*?

___ No: Select “N/A” for Attachments #7 - #9 in the submission checklist.

___ Yes: Provide the following attachments as applicable.

Attached (✓)	
	Attachment #7: Monitoring report from HUD (the report that identifies any concerns or findings); OR <input type="checkbox"/> N/A: HUD has not yet provided our organization with their monitoring report

	Attachment #8: If monitoring report identified concerns, findings, or other items requiring a response, provide your organization's response to these items; OR <input type="checkbox"/> N/A: The monitoring report did not contain any items requiring our organization's response
	Attachment #9: Documentation from HUD that a monitoring concern or finding has been satisfied; OR <input type="checkbox"/> N/A: HUD has not yet responded to our organization's response to the monitoring report

Organizational Question 3: Client Participation

Scored Component 5A
 Value = up to 2 points

Place a check mark (✓) in the appropriate box(es) below to signify the extent to which the recipient and sub-recipient(s) are compliant with this policy.

	Recipient/Subrecipient had consumer participation on board or other policy making entity at some point in CY2022 (✓)	Documentation of such consumer participation is attached (attachment #10) (✓)	OR	Waiver for this requirement has been requested and/or approved by HUD and a copy is attached (attachment #11) (✓)
Project recipient				
Project subrecipient(s): Subrecipient name: _____				

If more than one subrecipient, additional rows may be added to the table. The questions must be answered for each sub-recipient associated with the grant.

NOTE: If a board roster is provided, that roster must clearly identify which board member is the person with lived experience. This can be done by highlighting the individual's name or otherwise identifying on the roster that the individual is a person with lived experience. An agency will not be able to earn points if a board roster is submitted with no clear indication of who on the roster is the person with lived experience.

Organizational Question 4: Meaningful Participation of Persons with Lived Experience

Value = up to 6 points

Describe how your agency ensures the meaningful participation of persons with lived experience (PWLE) within your homelessness programming. In your response, describe:

- How persons served by all your homeless/housing projects (not just the project receiving CoC funding) are invited to provide feedback and input into the programming.
- How your agency responds to this feedback and input.
- How PWLE are incorporated into the decision-making structures within your organization.
- The extent to which your agency intentionally hires PWLE within your homelessness programming.

- Describe at least one change your agency has made to your homeless programming over the past two years in response to the input received from PWLE. This change could have been made within the project that receives CoC funding or another homeless project within your agency.

Organizational Question 5: Agency Grievance Process

Value = not scored

Please briefly describe your agency's internal process for responding to client grievances or concerns. Additionally, please include as Attachment #3 a copy of your agency's client grievance policy and procedure. If you do not currently have such a policy and procedure, please indicate that.

Organizational Question 6: PSH Match Returns (to be answered by agencies with CoC-funded PSH only)

Value = not scored

To help the CoC better understand the circumstances under which a PSH match is returned to CAM, please answer the following questions:

1. What is your agency's process for determining when a PSH match needs to be returned to CAM?
2. What are the primary reasons for having to return a match to CAM and what challenges are typically encountered resulting in the need for the match to be returned?

Organizational Question 7: Continuous Quality Improvement Process (Optional)

Value = not scored

Agencies may provide, in one-half page or less, an explanation of how the agency incorporates continuous quality improvement within the agency. While this question will NOT be scored, an explanation may be included to help reviewers understand any special circumstances that contributed to any of the agency's project's performance.

FY2023 Renewal Project Application

Each agency must complete a separate project application for each project being submitted for renewal funding. The project application(s) must be submitted in addition to the organizational application above.

Project Name	
---------------------	--

Project Component Type	
<input type="checkbox"/> Permanent Supportive Housing	<input type="checkbox"/> Joint Component TH-RRH
<input type="checkbox"/> Rapid Rehousing	<input type="checkbox"/> Coordinated Entry Supportive Services Only (CE-SSO)
<input type="checkbox"/> Transitional Housing (TH)	<input type="checkbox"/> HMIS

Project Application Checklist		
	Included (✓)	Not Applicable (✓)
Clearly label all attachments, using the attachment number given, even if attachments will not be numbered sequentially due to an attachment not being applicable. If an attachment does not apply, place a (✓) in the “Not Applicable” column.		
Submission Checklist (this page)		
Completed Project Application (beginning on page 33 of this packet)		
#12 APR generated from HMIS for the project under review for the period of 1/1/2022 – 12/31/2022. See Appendix B for details.		
<u>If project had significant project changes (Project Application Question 1)</u>		
#13 Written communication to HUD requesting significant change		
#14 HUD’s written approval of the change requested		
<u>Signature Page</u>		
#15 Signed by Recipient		
#15 Signed by Subrecipient(s) <i>(will have multiple if more than one subrecipient)</i>		

The Collaborative Applicant reserves the right to request additional project or organizational information at a later date if needed. Any items not included in the checklist that are requested and submitted at a later date above will not result in points deducted from the application.

Project Information

Contact Person of Project Applicant		
Name:	Phone Number:	
Title:	Email:	
Project Address: (use administrative address if project provides scattered-site leasing or rental assistance)		
Street:		
City:	State:	ZIP:
Project Sub-recipient Organization Name (if applicable)		
Project Sub-recipient's Address (if applicable)		
Street:		
City:	State:	Zip:
Contact Person of Project Sub-recipient		
Name:	Phone Number:	
Title:	Email:	

Project Application Question 1: Significant Changes

Any changes noted may require additional review

Are there any significant changes in the project since the last funding approval?

Yes No

If "yes" complete the chart below to describe the change:

	Previous	New
Indicate change in the number of persons served		
Indicate change in the number of units		
Indicate change in project site location		
Indicate change in target population		
Indicate change in the project sponsor		
Indicate change in the component type		
Indicate change in the grantee/applicant		
Indicate change in the number of beds		
Line item or cost category budget changes more than 10%		
Other (explain)_____		

If "Yes," include as many of the following that apply as attachments to your application. Check "N/A" if not applicable:

Attached (✓)	
	Attachment #13: Written communication to HUD requesting the significant change
	Attachment #14:

	HUD's written approval of the change requested <input type="checkbox"/> N/A: HUD has not yet provided written approval of the requested change
--	---

Project Application Question 2: Financial Performance & APR Submission

Value = 8 points (Scored Component 3A)

Refer to **Appendix A**, which provides information on how much funding was expended for the project's most recently completed grant term as given in Sage. Answer the question below if it pertains to your project:

If the percentage of funds expended is less than 90% (if a non-rental assistance project) or less than 85% (if a rental assistance project), provide an explanation why not all funds were expended and what steps are being taken in the future to ensure greater expenditure of funds: *(max 1 paragraph)*

Project Application Question 3: Evictions and Program Terminations

*Value = not scored
Does not apply to CE-SSO or HMIS grants*

PSH, RRH, TH-RRH, and TH programs are required to report the following information in their project applications. This is informational only and will not be scored in FY2023. For these questions, "eviction" and "termination" mean different things for different types of projects:

Scattered-Site projects:

- "Eviction" means the landlord moves to evict the client for client non-compliance with lease agreements. The agency is expected to continue to work with the client to prevent eviction or move the client to a new unit. The client remains enrolled in the PSH, RRH, TH-RRH, or TH program.
- "Termination" means the agency is terminating the client from the program (and subsequently exiting from HMIS), although all attempts should be made to ensure the client does not exit to homelessness.

Project-Based projects (including TH and PSH projects):

- In general, for project-based projects, "eviction" and "termination" are synonymous.

Answer the following questions based on CY2022:

1) Over the course of 2022, how many households in this project received a legal eviction notice (or related notice such as a notice to quit, judgement, etc): _____

2) Of those households given in #1, how many ended up being legally evicted? _____

3) Of those households legally evicted, how many were also terminated from your program? _____

4) Of households given in #1, how many were able to have their eviction prevented? _____

5) Please give primary reasons people were evicted in 2022:

6) Over the course of 2022, how many households received a termination notice from the program?

- 7) Of those households given in #6, how many ended up being terminated? _____
- 8) Of households given in #6, how many were able to have their termination prevented? _____
- 9) Please give primary reasons for client terminations:

Project Application Question 4: Client to Case Manager Ratio

*Value = not scored
Does not apply to CE-SSO or HMIS grants*

The information below is being gathered for informational purposes only, to better understand CoC projects.

Client to Staff Ratio: Complete parts a - c below to indicate the expected client to case manager ratio for this project. Organization may use different titles for this position. Additionally, “household” in this instance includes single adults (households of one), families with children, or a household comprised only of adults.

In part “A” indicate the current client to case manager ratio will be for this project, in terms of staffing FTEs. For example, a client/case manager ratio of 20 households to 1 FTE would mean that one full-time case manager (or the equivalent) has a case load of 20 households. In part “B” indicate if the case manager will be expected to carry a caseload of clients from other programs. Part “C” is optional.

- A. Current household to case manager ratio for this project: _____
- B. Do the case managers on this project have clients from other programs on their case loads? If so, from what types of programs and approximately how many clients?
- C. Optional: Provide any additional comments on client/case manager ratios.

Project Application Question 5: Provision of In-Person Services

*Value = not scored
Does not apply to HMIS grant*

Agency are asked to provide a response to the following questions and should note that the extent to which projects are providing in-person case management services may be taken into greater consideration in future funding rounds. For the purposes of this question, “in-person” means that the staff person and client are in each other’s physical presence during the provision of case management. It does not refer to case management services that may be provided via phone calls, texts, emails, video calls, etc.

Please respond to the following:

- A) Describe the extent to which this project provided in-person case management services over the course of 2022.

- B) If this project did not provide case management services that were primarily in-person, please describe your agency’s plan to begin the resumption of in-person case management services.

QUESTION 6 APPLIES TO DOMESTIC VIOLENCE PROJECTS ONLY

Project Application Question 6: Increasing Safety of Persons Fleeing Domestic Violence/Human Trafficking

Value = 4 points (Scored Component 8A)

The following question should be answered by projects specifically funded with Domestic Violence Bonus Funding which are funded to specifically serve persons fleeing domestic violence or human trafficking:

Question: Describe the project's most important strategies for improving safety for people survivors of domestic violence (DV)/human trafficking (HT), and how the project assesses improvements to participant safety. Use specific examples where possible and see the scoring scale given above for how this question will be scored.

QUESTIONS 7 & 8 APPLY TO PSH PROJECTS ONLY

Project Application Question 7: Service Staff and Program Availability

Value = 3 points (Scored Component 2E)

Projects will be scored based on the extent to which supportive service staff, including on-call crisis staff, are available outside of typical business hours.

Of the following options, select the one most reflective of the available of supportive service staff, including on-call staff, for clients in the PSH program:

Services are available on flexible schedules, out of regular business hours, with on call crisis services available 24 hrs a day, 7 days a week

Services are available 8AM – 5PM Monday -Friday, with some weekend availability (4 – 12 hours on weekends)

Services are available 9AM – 5PM Monday -Friday

Project Application Question 8: Facilitation and Tracking of Referrals

Value = 2 points (Scored Component 2F)

Projects will be scored based on agency response to the following question in the application.

In response to this statement, select the most appropriate response for this PSH program:

“The primary supportive housing service provider facilitates and tracks referrals, and in some cases transportation, to community service providers for tenants including, at a minimum, behavioral healthcare, primary healthcare, substance abuse treatment and support, employment services, and benefits assistance”.

Yes

No/unknown

This information is not currently tracked

QUESTIONS 9 to 12 APPLY TO CAM Implementing Partner Only

The following questions only apply to the CAM Implementing Partner (CHS).

Project Application Question 9: PSH Packet Submission for Completed Navigation Appointments

Value = 8 (Scored Component 7A)

Response Required

Provide the following data:

- A. Number of households served from 1/1/2022 – 12/31/2022 who scored for PSH and had a completed navigation appointment: _____
- B. Number of households served from 1/1/2022 – 12/31/2022 that did *not* have a PSH packet submitted for the following reasons (these households will be excluded from the calculation) _____
 - Households who secured other housing and are no longer considered homeless for PSH eligibility purposes
 - Households who have moved away from the area and are no longer being served
 - Households who were still in the documentation-gathering process as of 12/31/2022
 - Households who, as of 12/31/2022, were no longer being actively navigated, per navigation policies, including those who are unable to be contacted
- C. Of the households given in “A” above, how many had a PSH packet submitted as of 12/31/2022?

- D. Number of households with a PSH packet submitted in 2022 who were carry-overs from 2021. These are households for whom navigation began at some point in 2021, but the packet was not submitted until 2022. These should not be households already included in either “A” or “C”. _____

Project Application Question 10: Accurate Submission of PSH Packets

Value = 8 (Component 7B)

Response Required

Provide the following data:

- A. Total PSH packets submitted by CAM Navigators in 2022: _____
- B. Of the PSH packets submitted by CAM Navigators in 2022 (A), number that were correct on the first submission: _____

Project Application Question 11: Accurate Submission of HCV Application

Value = 8 (Scored Component 7C)

Response Required

Provide the following data:

- A. Total HCV applications submitted by CAM Navigators in 2022: _____
- B. Of the HCV applications submitted by CAN Navigators in 2022 (A), number that were correct on the first submission: _____

Project Application Question 12: Client Satisfaction with Navigation

Value = 4 (Scored Component 7D)

Response Required

Based on the satisfaction scale of 1 to 5 over the course of calendar year 2022, what was the overall average satisfaction rating given by clients receiving Navigation? _____

Signature Page (Attachment #15)

This page is to be signed by the Executive Director of the recipient and subrecipient agency or his/her authorized representative. If a project has a more than one subrecipient, this page may be duplicated with each subrecipient signing the page. Electronic signatures are acceptable.

My signature below affirms the following:

- 1) If awarded Continuum of Care funds by the U.S. Department of Housing and Urban Development, this project will comply with all program regulations as found in the Continuum of Care Program Interim Rule 24 CFR Part 578. The project will also comply with all other applicable federal, State, and local regulations.
- 2) The organization will enter required project and client data into the Homeless Management Information System (HMIS) or a comparable database in accordance with the HMIS Data Standards and HMIS Policies & Procedures.
- 3) The funded project will participate in the Coordinated Assessment Model (CAM) and adhere to all Coordinated Entry (CAM) [policies and procedures](#).
- 4) Data submitted with this project application (including, but not necessarily limited data in the APR, Sage, in HMIS, or within the application itself) is complete, accurate, and correct.
- 5) It is understood that, should this project be eligible for an appeal, no appeal may be made based on having initially submitted incomplete, incorrect, or inaccurate data.
- 6) It is understood that details on the criteria and process for which my agency may submit an appeal to the Detroit CoC Board are found in the Appeals Policy and that any appeals decisions made by the Detroit CoC Board will be final. I can access a copy of the Appeals Policy at HAND's website (www.handetroit.org/continuum-of-care-funding).
- 7) It is understood that renewal and new projects will be submitted to HUD in accordance with the FY2023 Project Priority Ranking Policies and that such project ranking decisions are final. I can access a copy of the FY2023 Project Priority Ranking Policies at HAND's website (www.handetroit.org/continuum-of-care-funding).
- 8) It is understood that the Detroit CoC Board is responsible for making decisions on which new and renewal projects are submitted to HUD each year as part of the annual CoC competition, and that the ultimate decision in whether a project is funded is made by HUD. It is further understood that 24 CFR §578.35 describes certain situations in which an agency may submit an appeal directly to HUD. It is agreed that the submission of an appeal to HUD, in accordance with HUD's policies and procedures, is the final recourse that may be taken for the project.

Relinquishment of CoC Grants

9) (New Project Applications Only): If the new project funding applied for is awarded by HUD, it is expected that the grant agreement for that project will be executed and the project will be implemented. Failure to execute a grant agreement for new project funding may result in that funding being lost to the CoC. If my agency chooses to not execute a grant agreement for new project funding, that agency must attend a meeting with representatives of the CoC Lead Agency, the City of Detroit, and the CoC board to discuss why the agency

is choosing to not accept new project funding. Additionally, the agency will not be allowed to apply for new CoC project funding for five (5) years. The CoC board also reserves the right to take additional action if needed.

10) If at any time my agency decides to voluntarily relinquish a renewal CoC grant, my agency will notify the CoC Lead Agency of this decision in writing as soon as possible, but no less than, at least nine (9) months prior to the end of the current grant term.

11) If my agency voluntarily relinquishes a renewal grant, my agency will work with the CoC Lead Agency, CAM Lead Agency, and other stakeholders as needed to ramp down the project and ensure that clients being served by the project are able to retain or achieve stable housing by the time the grant ends.

12) It is understood that the CoC board will decide how to reallocate any relinquished funds.

Project Minimum Eligibility Requirements

13) It is understood that my project will serve clients based only on HUD’s minimum eligibility criteria and the project target population as written in the grant application. It is understood that clients will not be excluded from the project unless for the following (check that which applies to the project in question):

This project is limited to serving a single-sex population only due to having shared bathing and/or shared sleeping accommodations. This project will comply with the Equal Access requirements and serve persons based on the person’s self-identified gender.

LIHTC and/or PBV attached to this project have additional eligibility or exclusionary criteria over and above the HUD CoC program criteria. These criteria are: _____

This project cannot serve persons with a CSC conviction or sex offender registry status due to the project’s proximity to schools, child care centers, etc.

There are other funder requirements with additional eligibility or exclusionary criteria over and above the HUD CoC program criteria. If this box is checked, please also answer the following:

Name of funding source: _____

Eligibility or exclusionary criteria of that funding source: _____

Note: the CoC Lead may require additional documentation, such as a grant agreement, of other funder eligibility/exclusionary criteria.

Additional Requirement

14) It is understood that if my agency has an outstanding balance on HUD assessments due to HAND by the time the application is due to HUD, my project application(s) will not be submitted to HUD for funding via eSNAPS.

Agency: _____

Project Name: _____

Signed: _____ Date: _____
(Executive Director or authorized representative)

Name Printed: _____

Appendix A: Renewal Project Spending

The table below provides the percentage of a project's most recently completed grant term expended. This information was taken from the project's APR submission in Sage, and will be used for scoring Component 3.

Organization	Project Name	Project Type	Project Term Ending	Grant Number Under Review	Award	Amount Spent	Percentage Spent
AFG	RRH for Youth	RRH	6/30/2022	MI0571L5F012003	\$302,017	\$205,103	68%
AFG	DV TH-RRH	TH-RRH	N/A: Project is in the midst of expending its initial grant. Initial grant term ends 9/30/2023				
Cass Community Social Services	Webb PSH	PSH	7/31/2022	MI0467L5F012005	\$236,610	\$236,610	100%
Cass Community Social Services	Scott PSH	PSH	7/31/2022	MI0466L5F012005	\$226,088	\$226,088	100%
Cass Community Social Services	Travis PSH	PSH	8/31/2022	MI0569L5F012003	\$421,019	\$421,019	100%
Cass Community Social Services	Thomasson Apts	PSH	7/31/2022	MI0521L5F011600	\$1,172,161	\$1,172,161	100%
CCIH	Permanent Supportive Housing	PSH	9/30/2022	MI0071L5F012013	\$1,208,937	\$890,974	74%
CCIH	Leasing Project	PSH	9/30/2022	MI0439L5F012004	\$691,732	\$508,716	74%
Community & Home Supports	Perm Community Supports	PSH	12/31/2022	MI0468L5F012005	\$574,460	\$574,460	100%
Community & Home Supports	Perm Community Supports II	PSH	9/30/2022	MI0568L5F012003	\$1,413,602	\$1,413,602	100%
Community & Home Supports	Coordinated Assmn't and Navigation	CE-SSO	6/30/2022	MI0522L5F012004	\$847,538	\$847,538	100%
COTS	Buersmeyer Manor	PSH	6/30/2022	MI0030L5F012013	\$152,383	\$139,949	92%
COTS	<i>Pathways*</i>	<i>PSH</i>	<i>2/28/2023</i>	<i>MI0429L5F012108</i>	<i>\$853,814</i>	<i>TBD</i>	<i>TBD</i>
DRMM	Cornerstone	PSH	7/31/2022	MI0046L5F012013	\$1,442,831	\$1,365,912	95%
D/WMHA	<i>CCIH Permanent Housing*</i>	<i>PSH</i>	<i>4/30/2023</i>	<i>MI0075L5F012114</i>	<i>\$484,217</i>	<i>TBD</i>	<i>TBD</i>
DWIHN	Supportive Housing Program - DCI/Omega	PSH	10/31/2022	MI0074L5F012013	\$537,105	\$510,878	95%
DWIHN	<i>CCIH Rental Assistance</i>	<i>PSH</i>	<i>5/31/2023</i>	<i>MI0058L5F012114</i>	<i>\$397,015</i>	<i>TBD</i>	<i>TBD</i>
HAND	HMIS	HMIS	6/30/2022	MI0368L5F012006	\$390,233	\$390,233	100%
HAND	<i>CoC Planning*</i>	<i>Planning</i>	<i>12/31/2022</i>	<i>MI0674L5F012000</i>	<i>\$843,291</i>	<i>TBD</i>	<i>TBD</i>
HAND	YHDP CE-SSO	CE-SSO	N/A: Project is in midst of expending its initial grant. Initial grant term ends 11/30/2024				
Mariners Inn	Extended Residency	PSH	11/30/2022	MI0037L5F012013	\$249,739	\$249,739	100%

Organization	Project Name	Project Type	Project Term Ending	Grant Number Under Review	Award	Amount Spent	Percentage Spent
Methodist Children's Home	Teen Infant Parenting Services (TIPS)	TH	4/30/2022	MI0078L5F012013	\$362,392	\$362,392	100%
MDHHS	Consolidated Grant	PSH	4/30/2022	MI0059L5F012013	\$2,892,372	\$2,476,934	86%
NLSM	Project Hope	PSH	6/30/2022	MI0471L5F012004	\$610,839	\$610,839	100%
NLSM	Project Hope II	PSH	9/30/2022	MI0520L5F012004	\$831,747	\$831,747	100%
NLSM	Project Permanency One	RRH	9/30/202	MI0438L5F012006	\$1,239,030	\$1,239,030	100%
NLSM	NLSM Cares	RRH	6/30/2022	MI0499L5F012004	\$1,253,280	\$1,021,370	81%
NLSM	Project First Steps	TH-RRH	12/31/2022	MI0604D5F012002	\$934,394	\$934,394	100%
NSO	Bell Housing	PSH	12/31/2022	MI0338L5F012008	\$599,393	\$599,393	100%
NSO	SHP Leasing	PSH	5/31/2022	MI0308L5F012008	\$395,059	\$367,755	93%
NSO	NSO/COTS S+C	PSH	9/30/2022	MI0027L5F012008	\$122,964	\$101,223	82%
NSO	Detroit FUSE	PSH	9/30/2022	MI0367L5F012005	\$260,118	\$231,924	89%
NSO	NSO RRH	RRH	12/31/2022	MI0472L5F012005	\$326,194	\$316,607	97%
NSO	Clay Apartments	PSH	N/A: Project is in the midst of expending its initial grant. Initial grant term ends 9/30/2023				
Ruth Ellis	Clairmount PSH	PSH	N/A: Project is in the midst of expending its initial grant. Initial grant term ends 9/30/2023				
Southwest Counseling Solutions	Consolidated CE-SSO	CE-SSO	8/31/2022	MI0392L5F012007	\$959,341	\$959,341	100%
Southwest Counseling Solutions	CAM RRH	RRH	11/30/2022	MI0469L5F012005	\$416,955	\$416,955	100%
Southwest Counseling Solutions	Consolidated Leasing	PSH	9/30/202	MI0369L5F012008	\$998,001	\$863,330	87%
Southwest Counseling Solutions	Consolidated Rental	PSH	4/30/2022	MI0360L5F012010	\$1,332,166	\$1,332,166	100%
Travelers Aid	BEIT	PSH	8/31/2022	MI0029L5F012013	\$1,040,942	\$1,040,942	100%
Travelers Aid	Infinity	PSH	8/31/2022	MI0043L5F012013	\$1,126,150	\$1,126,150	100%
Wayne Metro Community Action Agency	Detroit PSH	PSH	9/30/2022	MI0641L5F012001	\$718,064	\$718,064	100%

**Projects received grant extensions from HUD, making final LOCCS draw not due until after June 2023. These projects will be evaluated and scored on final expenditures only if final LOOCS draws are completed in time to be included in project scoring.*

CONSOLIDATED PROJECTS

The following projects were consolidated in the FY2021 competition. For scoring purposes in FY2023, the spending rates of the individual projects will be combined as given here based on the individual project's most recently completed grant terms.

Organization	Project Name	Project Type	Project Term Ending	Grant Number Under Review	Award	Amount Spent	Percentage Spent
DWIHN	Southwest Housing Partners S+C	PSH	12/31/2022	MI0286L5F012012	\$285,856	\$ 231,074	81%
DWIHN	Southwest Counseling Matrix	PSH	10/31/2022	MI0066L5F012013	\$52,061	\$52,061	100%
TOTAL FOR DWIHN/SWCS CONSOLIDATED PROJECTS					\$337,917	\$283,135	84%
Cass Community Social Services	Cass Apartments	PSH	11/30/2022	MI0309L5F012008	\$361,015	\$361,015	100%
Cass Community Social Services	Brady PSH	PSH	4/30/2022	MI0085L5F012013	\$150,219	\$60,964	41%
TOTAL FOR CASS COMMUNITY SOCIAL SERVICES CONSOLIDATED PROJECT					\$511,234	\$421,979	83%

Appendix B: HMIS APRs and PSH Project Type

HMIS APR

Recipients must submit a CY2022 project APR to HAND by **June 12, 2023** with the rest of the application materials.

- **APR time period:** The APR must be run for **calendar year (CY) 2022 (1/1/2022 – 12/31/2022)**. Projects that started operations in 2022 are still required to submit an APR covering the entire calendar year.
- **Job aids:** Reference the following job aid for assistance in running, reviewing, and printing your APR:
 - [Running, Reviewing, and Printing the APR](#)
 - When saving the APR as a PDF, or when printing it, be sure all parts of all questions of the APR are printed. Double check to ensure that no columns or rows are accidentally “cut off”. You may need to switch the document to “landscape” view to ensure all data is visible.
 - [Finding and fixing data errors in the APR](#)
 - These, and additional job aids may be found at: www.handetroit.org/traininganddocumentation
- **Projects with multiple HMIS IDs:** If a project has more than one HMIS ID, use one of two options:
 - Run and submit a separate APR for each HMIS ID #; OR
 - Create a provider group that includes all the projects and run and submit one APR for that provider group.
- **Final Data:** The data submitted in these APRs will be used to evaluate and score renewal projects. This data will be considered accurate and final upon submission to HAND. There will not be an opportunity to correct any APR data after it is submitted. As a reminder, the data being submitted is for calendar year 2022. Agencies are expected to regularly review and ensure the accuracy of their project data throughout the year.
- **HMIS ID numbers:** The HMIS ID numbers for the projects are given below. However, if there is an error in the HMIS ID number for the project, please let Amanda know (amanda@handetroit.org), and submit the required APR using the correct HMIS ID number.

The list below is arranged by the name of the recipient (ie, grantee) of the project. It is ultimately the responsibility of the recipient to ensure the required APR is submitted to HAND on time, although the recipient may make a request of their subrecipient to assist with this.

Project Type for Component 2C

PSH & RRH Projects will be scored based on the length of time from referral to housing move in date. Points may be earned based on performance in comparison to local averages, as given. Details on scoring are given in Component 2C.

Different standards will apply for different project types: PSH scattered-site, PSH project-based projects (non-SROs), PSH SROs, and RRH. The table below indicates how each project is categorized for this scored component. This is provided as informational only, so agencies understand how their project was categorized.

Recipient	(Subrecipient) Program Name	Project Component	HMIS ID#	Project Type for 2C
Alternatives for Girls	RRH for Youth	RRH	11613	RRH
Alternatives for Girls	DV TH-RRH	TH-RRH	Data for this project will be submitted via APR exported from project's comparable database or another means to be specified by HAND	N/A
Cass Community Social Services	Cass Apartments (Antisdel & Brady)	PSH	8579 and 9866	PSH Project Based (non-SRO)
Cass Community Social Services	Scott PSH	PSH	10996	PSH SRO
Cass Community Social Services	Webb PSH	PSH	10997	PSH SRO
Cass Community Social Services	Travis PSH	PSH	11619	PSH SRO
Cass Community Social Services	Thomasson Apts	PSH	11931	PSH SRO
Cass Community Social Services	Brady PSH Services	PSH	13087	PSH Project Based (non-SRO)
Central City Integrated Health	Supportive Housing Program	PSH	224	PSH Scattered Site
Central City Integrated Health	Leasing Project	PSH	10833	PSH Scattered Site
Community & Home Supports	Permanent Community Support	PSH	8755	PSH Scattered Site
Community & Home Supports	Permanent Community Home Support II	PSH	11722	PSH Scattered Site
Community & Home Supports	Coordinated Assessment & Navigation Project	CE-SSO	N/A: CE APR not required in 2022	N/A
COTS	Buersmeyer Manor	PSH	2428	PSH Project Based (non-SRO)
COTS	Pathways to Housing	PSH	10160	PSH Scattered Site
Detroit Rescue Mission Ministries	Cornerstone PSH	PSH	116	PSH SRO
Detroit/Wayne Integrated Health	(DCI/COTS) Omega Project	PSH	1025	PSH Scattered Site
Detroit/Wayne Integrated Health	(CCIH) Permanent Housing	PSH	11339	PSH Scattered Site
Detroit/Wayne Integrated Health	(CCIH) S+C County	PSH	11338	PSH Scattered Site
Detroit/Wayne Integrated Health	(Southwest Counseling Solutions) Matrix S+C	PSH	3629	PSH Scattered Site
Detroit/Wayne Integrated Health	(Southwest Counseling Solutions) Southwest Housing Partners S+C	PSH	180	PSH Scattered Site

Recipient	(Subrecipient) Program Name	Project Component	HMIS ID#	Project Type for 2C
Homeless Action Network of Detroit	HMIS	HMIS	N/A	N/A
Methodist Children's Home Society	TIPS	TH	5823	N/A
Mariners Inn	Permanent Housing	PSH	185	PSH SRO
Michigan Department of Health and Human Services	Consolidated grant that includes: <ul style="list-style-type: none"> • COTS • Development Centers, Inc. • Development Centers, Inc (formerly Detroit East) • NSO • Southwest Counseling Solutions • TASMD 	PSH		PSH Scattered Site
			12802	
			12804	
			12803	
			12809	
			12811	
12789				
Neighborhood Legal Services Michigan	Project Permanency- CoC RRH Families	RRH	10727	RRH
Neighborhood Legal Services Michigan	NLSM Cares	RRH	10983	RRH
Neighborhood Legal Services Michigan	Project Hope	PSH	10984	PSH Scattered Site
Neighborhood Legal Services Michigan	Project Hope II	PSH	11411	PSH Scattered Site
Neighborhood Legal Services Michigan	Project First Step	TH-RRH	Data for this project will be submitted via APR exported from project's comparable database or another means to be specified by HAND	N/A
Neighborhood Service Organization	Bell Housing	PSH	9147	PSH Project Based (non-SRO)
Neighborhood Service Organization	HUD SHP Program	PSH	8584	PSH Scattered Site
Neighborhood Service Organization	Detroit FUSE	PSH	11559	PSH Scattered Site
Neighborhood Service Organization	NSO/COTS - S+C	PSH	11560	PSH Scattered Site
Neighborhood Service Organization	Clay Apartments	PSH	12309	PSH Project Based (non-SRO)
Neighborhood Service Organization	NSO RRH	RRH	11324	RRH
Ruth Ellis Center	Clairmount PSH	PSH	13369	PSH Project Based (non-SRO)

Recipient	(Subrecipient) Program Name	Project Component	HMIS ID#	Project Type for 2C
Southwest Counseling Solutions	Rental Assistance Consolidation	PSH	11558	PSH Scattered Site
Southwest Counseling Solutions	Leasing Consolidation	PSH	9654	PSH Scattered Site
Southwest Counseling Solutions	Rapid Rehousing	RRH	11040	RRH
Traveler's Aid Society of Metropolitan Detroit	BEIT	PSH	122	PSH Scattered Site
Traveler's Aid Society of Metropolitan Detroit	Project Infinity	PSH	123	PSH Scattered Site
Wayne Metro Community Action Agency	Detroit PSH	PSH	12710	PSH Scattered Site

Appendix C: Projects to be included in HMIS data review

The tables below contain the projects in HMIS that will be included for scored components that rely on data from all projects an agency reports in HMIS. Reports needed to score these components will be generated by the HMIS Lead Agency. This information is provided so that applicant agencies are aware of which projects will be included in these data pulls.

Alternatives For Girls	
Provider Page	Project Type
MDHHS - AFG - Detroit CoC - BCC Shelter (Age 15-17) - DHS & City ESG(6652)	Emergency Shelter (HUD)
1. AFG - Detroit CoC - Shelter (18-21) - City ESG, City ESG-CV(9498)	Emergency Shelter (HUD)
AFG - Detroit CoC - Maternity Group Home -HHS(10510)	Transitional housing (HUD)
AFG - Detroit CoC - TLP (Age 17-20) - DHS, HHS(433)	Transitional housing (HUD)
AFG- Detroit CoC – TLP (16 & 21)- DHS (12038)	Transitional housing (HUD)
AFG - Detroit CoC - Detroit Youth Collaborative RRH Initiative (11613)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022 - AFG - Detroit CoC - Rapid Rehousing - City ESG-CV (12840)	PH - Rapid Re-Housing (HUD)
AFG - Detroit CoC - Rapid Rehousing - State ESG-CV II (12973)	PH - Rapid Re-Housing (HUD)
AFG – Detroit CoC – Rapid Rehousing – City ESG/CDBG (13287)	PH - Rapid Re-Housing (HUD)

Cass Community Social Services	
Provider Page	Project Type
CCSS - Detroit CoC - Antidel Apartments(9866)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
CCSS - Detroit CoC - Brady Permanent Supportive Housing(8579)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
CCSS - Detroit CoC - Cass House (3375)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
CCSS -Detroit CoC - Scott PSH(10996)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
CCSS- Detroit CoC - Webb PSH(10997)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
CCSS- Detroit CoC – Thomasson Apartments (11931)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - 1. CCSS - Detroit CoC - Cass Community Family Shelter (DHS) ESP B(6472)	Emergency Shelter (HUD)
MDHHS - 1. CCSS - Detroit CoC - Interfaith Rotating Shelter (DHS) ESP (B)(304)	Emergency Shelter (HUD)
CCSS - Detroit CoC - Brady PSH Expansion (13087)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
CCSS -Detroit CoC - Travis PSH(11619)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Central City Integrated Health	
Provider Page	Project Type
Central City Integrated Health - Detroit CoC - CoC Bonus(10833)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Central City Integrated Health - Detroit CoC - Permanent Housing(11339)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Central City Integrated Health - Detroit CoC - S+C County(11338)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Central City Integrated Health - Detroit CoC -Supportive Housing Program(224)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
XXXCLOSED2022 - Central City Integrated Health - Detroit CoC - RRH - City ESG-CV (12821)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022 - Central City Integrated Health – Detroit CoC – RRH – City ESG/CDBG (13391)	PH - Rapid Re-Housing (HUD)

Community & Home Supports, Inc.	
Provider Page	Project Type
Community & Home Supports - Detroit CoC - PSH(8755)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Community & Home Supports - Detroit CoC - PSH II Leasing(11722)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Community & Home Supports – Detroit CoC – RRH Sheltered Housing Placement – City CDBG-CV (13470)	PH - Rapid Re-Housing (HUD)
Community & Home Supports – Detroit CoC – RRH – City ESG/CDBG (13387)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022 - Community & Home Supports, Inc. - Detroit CoC - RRH - City ESG-CV (12869)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022 - Community & Home Supports, Inc. - Detroit CoC - EHV/RRH Case Mgt. - City ESG-CV (13123)	PH - Rapid Re-Housing (HUD)

COTS	
Provider Page	Project Type
COTS-Detroit CoC-Pathways PSH(10160)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
COTS-Detroit CoC - PSH-Buersmeyer Manor SHP(2428)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Development Centers - Detroit CoC - Omega Project (with COTS)(1025)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - 1. COTS-Detroit CoC - Emergency Shelter (Peterboro) (DHS) ESP(261)	Emergency Shelter (HUD)
MDHHS - COTS Permanent Supportive Housing - Detroit CoC - Shelter Plus Care (12802)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
COTS - Detroit CoC - S+C (with NSO)(11560)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Detroit Rescue Mission Ministries (DRMM)	
Provider Page	Project Type
DRMM - Detroit CoC - Permanent Housing Dept. - My Own Place(116)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - 1. DRMM - Detroit CoC - Emergency Shelter Dept. - DRM DHS ESP, City ESG-CV(112)	Emergency Shelter (HUD)
MDHHS - 1. DRMM - Detroit CoC -Emergency Shelter Dept. - Genesis House III (DHS) ESP, City ESG-CV(111)	Emergency Shelter (HUD)
1. DRMM - Detroit CoC - Oasis Shelter - Overflow - City ESG-CV(12224)	Emergency Shelter (HUD)
1. DRMM - Detroit CoC - Alternative Shelter - City ESG-CV (13124)	Emergency Shelter (HUD)
DRMM – Detroit CoC – Veteran Case Mgt. (Formerly Homeless) (13455)	Services Only
DRMM – Detroit CoC – Veteran Case Mgt. (Prevention) (13473)	Services Only

Development Centers, Inc.	
Provider Page	Project Type
Development Centers - Detroit CoC - Omega Project (with COTS)(1025)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - Development Centers - Detroit CoC - S+C (12804)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - Development Centers - Detroit CoC - S+C [Formerly at Detroit East] (12803)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - Development Centers - Detroit CoC - S+C II (12805)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Mariners Inn	
Provider Page	Project Type
XXXCLOSED2022 - Mariners Inn-90 Day Residency Program - Detroit CoC(184)	Services Only (HUD)
Mariners Inn-Detroit CoC - Extended Residency Program(185)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Methodist Children's Home Society	
Provider Page	Project Type
Methodist Children's Home - Detroit Wayne/TIPS - City ESG-CV(5823)	Transitional housing (HUD)

Neighborhood Legal Services	
Provider Page	Project Type
Neighborhood Legal Services- Detroit CoC- PSH Project Hope(10984)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Neighborhood Legal Services- Detroit CoC- PSH Project Hope II(11411)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Neighborhood Legal Services Michigan-Detroit CoC- COC RRH - NLSM CARES(10983)	PH - Rapid Re-Housing (HUD)

Neighborhood Legal Services	
Provider Page	Project Type
Neighborhood Legal Services Michigan - Detroit CoC- Project Permanency - COC RRH Families(10727)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022 - Neighborhood Legal Services Michigan - Detroit - RRH - City ESG-CV(12570)	PH - Rapid Re-Housing (HUD)
Neighborhood Legal Services - Detroit - RRH - City ESG/CDBG (12792)	PH - Rapid Re-Housing (HUD)

Neighborhood Service Organization	
Provider Page	Project Type
COTS - Detroit CoC - S+C (with NSO) (11560)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS - NSO - Detroit CoC - PATH Services Only (12808)	Services Only (HUD)
MDHHS - NSO - Detroit CoC – SPC (12809)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
MDHHS-NSO-DHHC (Formerly Tumaini)-(DHS) ESP, City ESG-CV(1182)	Emergency Shelter (HUD)
NSO - Detroit CoC - BELL HUD SHP Program(9147)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
NSO - Detroit CoC - HUD SHP Program(8584)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
NSO-Detroit CoC- RRH(11324)	PH - Rapid Re-Housing (HUD)
NSO - Detroit CoC - Clay Apartments PSH(12309)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
NSO - Detroit CoC - Fuse Project(11559)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Ruth Ellis Center	
Provider Page	Project Type
XXXCLOSED2022-Ruth Ellis Center - Detroit CoC - RRH - City ESG-CV (12782)	PH - Rapid Re-Housing (HUD)
Ruth Ellis Center - Detroit CoC - Clairmount Center PSH (13369)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Ruth Ellis Center – Detroit CoC – Affordable Housing Units (13441)	Other (HUD)
Ruth Ellis Center - Detroit CoC - RRH - City ESG/CDBG (13378)	PH - Rapid Re-Housing (HUD)

Southwest Counseling Solutions	
Provider Page	Project Type
MDHHS - SWCS - Detroit CoC - MDHHS Shelter Plus Care (12811)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
SWCS - Detroit CoC - Housing Recovery Project Leasing Program(9654)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
SWCS - Detroit CoC - Matrix S+C(3629)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
SWCS - Detroit CoC - Piquette Square Program(7963)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Southwest Counseling Solutions	
Provider Page	Project Type
SWCS - Detroit CoC - SWHP S+C(180)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Southwest Counseling Solutions - Detroit CoC - HRC 609 Funds(11553)	Other (HUD)
Southwest Counseling Solutions - Detroit CoC - PREVENTION SSVF Veteran's Program 2011-2019(9867)	Homelessness Prevention (HUD)
Southwest Counseling Solutions - Detroit CoC - Rapid Rehousing Project(11040)	PH - Rapid Re-Housing (HUD)
Southwest Counseling Solutions - Detroit CoC - RAPID RH SSVF Veteran's Program 2011-2019(9868)	PH - Rapid Re-Housing (HUD)
Southwest Counseling Solutions - Detroit CoC - MSHDA ESG HP(10409)	Homelessness Prevention (HUD)
Southwest Counseling Solutions - Detroit CoC - MSHDA ESG RRH(10410)	PH - Rapid Re-Housing (HUD)
SWCS - Detroit CoC - RA Consolidation (formerly S+C II [Chronic])(11558)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Coordinated Assessment Model - Detroit CoC - HARA Screenings(9703)	Coordinated Assessment (HUD)
Southwest Counseling Solutions - Detroit - RRH - ESG/CDBG (12793)	PH - Rapid Re-Housing (HUD)
Southwest Counseling Solutions - Detroit CoC - SSVF Motel (12962)	Emergency Shelter (HUD)

Traveler's Aid Society	
Provider Page	Project Type
MDHHS - Traveler's Aid Society - Detroit CoC - Shelter Plus Care (12789)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
TASMD-Detroit CoC - Beit(122)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
TASMD- Detroit CoC - Project Infinity(123)	PH - Permanent Supportive Housing (disability required for entry) (HUD)

Wayne Metro Community Action Agency	
Provider Page	Project Type
XXXCLOSED2022 – Wayne Metro CAA – Detroit CoC – Prevention – City ESG/CDBG (13283)	Homeless Prevention (HUD)
Wayne Metro CAA - Detroit CoC - PSH(12710)	PH - Permanent Supportive Housing (disability required for entry) (HUD)
Wayne Metro CAA - Detroit CoC - RRH - State ESG-CV(12425)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022- Wayne Metro CAA - Detroit CoC - EHV/RRH Case Mgt. - City ESG-CV (13121)	PH - Rapid Re-Housing (HUD)
Wayne Metro CAA - Detroit CoC - EHV/RRH Case Mgt. - State ESG-CV (13122)	PH - Rapid Re-Housing (HUD)
XXXCLOSED2022 – Wayne Metro CAA – Detroit – RRH – City ESG/CDBG (12812)	PH - Rapid Re-Housing (HUD)
Wayne Metro CAA - Detroit CoC - Hotel – CERA (13277)	Emergency Shelter (HUD)
XXXCLOSED2022 - Wayne Metro CAA - Detroit CoC - RRH - City ESG-CV (12861)	PH - Rapid Re-Housing (HUD)

Appendix D: Substantiated Grievances Scoring

Client Grievance Scale

This scale was developed to be used as a tool to evaluate the severity of **substantiated** consumer grievances received by the Detroit Continuum of Care filed against any CoC Funded Agencies. [Follow this link](#) for more information on how grievances are substantiated in the CoC. This scale will be integrated into the evaluation process for all renewal projects in the annual CoC Funding Competition. A range of 0-5 points will be deducted from the **project's** score based upon the severity of the grievance. An additional 5-10 points may be deducted from all projects within an **agency** if the agency is noncompliant with the grievance process and/or if retaliation occurs against a client for filing a grievance (up to 5 points for each action – noncompliance and retaliation). If an agency has a substantiated grievance for a NON-CoC funded homeless program, the funding entity is given discretion on whether to deduct points from their annual funding assessment of the program. However, if the agency is noncompliant with the grievance process and/or if there is evidence of retaliation against the client, 5 – 10 points may still be deducted from all of that agency's CoC funded projects. Retaliation is defined within the grievance procedure. Noncompliance is defined as refusal of the agency to respond to the request(s) for information related to the grievance and/or refusal to carry out follow-up required by the committee.

Procedure:

Client grievances will be reviewed by the Grievance Review Committee (a committee of CoC Board Members), as described in the policy linked above. If the grievance is substantiated, a rating from 0-5 will be given by the committee following the review of the grievance. Each individual committee member will assign a score based upon the severity of the grievance. The committee may use ½ points when assigning a rating. Those scores will then be averaged to determine the final number of points assigned to that grievance. The assigned points will be deducted from the score of the **project** the grievance was filed against. The scoring examples below are given to guide the committee when assigning a point value to the grievance, and are **not meant to be an exhaustive list** of the types of situations that could result in a specific score given. The CoC Lead Agency will track grievance scores and report them to the full board quarterly.

Mild Severity: 0-1

Examples

- Agency provided the client with Inadequate case management
- Agency did not clearly explain policies/procedures to the client

Medium Severity: 2 to 3

Examples

- Provider's actions violated a programmatic policy or procedure other than a regulatory requirement
- Provider misinterpreted a HUD regulation

Extreme Severity: 4 to 5

Examples

- Situation resulted in client being unlawfully evicted
- Situation resulted in client losing other viable housing opportunities
- Provider's actions violated a HUD regulation
- Agency violated the CoC's Equal Access/Anti-Discrimination Policy

Scenario 1:

A grievance filed against an agency's PSH project is substantiated. The committee gives it a final score of 2. Agency had complied with all requests for information and there was no evidence of retaliation against the client. They also carried out the follow up required by the committee. Two (2) points will be deducted from this **project's** renewal score in the competition. No points will be deducted from any other projects in the agency.

Scenario 2:

A grievance filed against an agency's RRH project is substantiated. The committee gives it a final score of 3. The agency had not complied with requests for information and there evidence of retaliation against the client. Thirteen (13) points will be deducted from the **project's** renewal score in the competition. Ten (10) points will be deducted from the score of all other projects implemented by the **agency**.

Domestic Violence Projects Scoring Tool

Projects that serve people fleeing Domestic Violence and use a Comparable Database report certain data elements for scoring via the following spreadsheet. These agencies complete this spreadsheet with data from their Comparable Database and submit the data to the Collaborative Applicant.

Instructions

- 1) Data should be entered into the yellow boxes
- 2) Data is entered for evaluation components 6C and 6D.
- 3) If there is no data, or the number to be entered is "0", enter "0". Do not leave any yellow boxes blank
- 4) The green boxes will automatically calculate
- 5) Data date range: from January 1, 2022 to December 31, 2022
- 6) Data source: participant files or other organizational or program records

This spreadsheet should be submitted to HAND for scoring in the FY2023 CoC competition

Agency Name
Project Name



Component #6: CAM Participation

C) New Client Entries

Numerator: All client with a project start date in 2022 that were referred from CAM (All clients - both those entered into TH and those entered into RRH)	
Denominator: All clients with a project start date in 2022 (both TH clients and RRH clients)	
Percentage of new client entries in 2022 that came from CAM	#DIV/0!

D) Housing Move-in Date completion (RRH clients only)

Numerator: Total RRH clients served who moved into housing in 2022 and had the Housing Move in Date data element completed in organization's comparable database when they moved into housing	
Denominator: Total RRH clients served in 2022 who moved into housing in 2022	
Percentage of clients with completed housing move-in-date	#DIV/0!

Scoring Tools for New Project Applications

Following are the scoring rubrics used to review and evaluate the new project applications received by the CoC in the FY2023 CoC competition. Rubrics for the following types of applications are as follows (note: these are the only types of new project applications reviewed for submission in this year's competition):

CoC Bonus Funding:

- Expansion PSH (Project-based projects)
- Expansion PSH (Scattered-site projects)
- New PSH (Project-based)
- New RRH

DV Bonus Funding:

- New TH-RRH
- New CE-SSO

Scoring Sheet for Expansion PSH Projects (Project-Based)

Applicant Agency: _____

Reviewer Name: _____

Instructions:

After reviewing the section of the application, give a score. A range of suggested points is given for each component. Reviewers may award points anywhere along the scale. Reviewers may also award half (½) points if they choose.

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY		
Reference Application Question	Scoring Component	Score
1. 2. 3.	<p><u>Applicant Experience & Capacity (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 points should be awarded if applicant meets all the following: <ul style="list-style-type: none"> ○ A clear description is provided of the applicant and any subrecipients' experience providing the services being proposed in the application (question 1) ○ Demonstration of strong organizational and management structure for applicant and subrecipient (question 2) ○ If subrecipients are identified (question 3), role of each entity is clearly described • 2 – 4: Points in this range should be awarded if the above items (that apply) are not fully or clearly met • 0 – 1: Points in this range should be awarded if very few of the above items (that apply) are met <p><u>Comments</u></p>	
4.	<p><u>Leveraging Experience (2 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: Applicant and sub-recipient clearly demonstrate experience leveraging other resources • 1: Some, but not a lot, of experience leveraging other resources • 0: Applicant states no experience leveraging other funds <p><u>Comments</u></p>	
5.	<p><u>Capacity to Receive New CoC Funding (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 – 7: Response given clearly indicates the agency has the administrative and staffing capacity to take on additional CoC funding. The response describes how the agency will either bring on additional staff to manage the additional funding, or how current staff will be able to absorb the additional work. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2 – 4: Response given does not clearly communicate that the agency has the administrative or staffing capacity to take on new funding, and/or the response given does not clearly communicate how agency capacity will be increased to take on additional funding. • 0 – 1: Overall, there are significant concerns about the agency’s capacity to expand its project and take on additional CoC funding. <p><u>Comments</u></p>	
6.	<p><u>Experience Ramping Up New Projects (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response clearly describes the most recent experience the agency has had ramping up new or expanded programming (note: response could have described a non-homeless program, if that was the most recent project the agency had to ramp up). The response articulates what challenges, if any, the agency experienced during that project’s ramp-up and steps the agency will take to prevent similar challenges if it receives the requested expansion funding. • 2 -3: Response does not clearly describe experience ramping up a project or it is not clear how agency would avoid the same challenges in ramping up this project as it has experienced in the past. • 0 – 1: No clear indication agency has any experience ramping up projects or would be able to successfully ramp up if it received the requested expansion funding. <p><u>Comments</u></p>	
7A 7B 7C 7D 8	<p><u>Staff Training & Development (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 -7: Applicant demonstrates a comprehensive and robust training plan for staff upon their initial hire and on an annual basis. <i>The majority of the training topics</i> in questions 7A – 7C selected as being either required or optional, either at initial hire and/or annually. The response to question 8 provides further details on how the agency ensures staff have the tools and skills needed to provide quality care and services. • 2 – 4: The responses given in questions 7A – 7C and 8 are adequate, but somewhat lacking. <i>Only about half of the training topics</i> in questions 7A – 7C are selected as being either required or optional. The response given in question 8 provides some, but not a lot, of additional information on how staff are trained. • 0 – 1: The responses given in questions 7A – 7C and 8 are significantly lacking. There is little evidence that the agency ensures staff receive appropriate training at either initial hire or annually thereafter. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p><u>Comments</u></p>	
<p align="center">9</p>	<p><u>Recruitment and Retention of People of Color (4 maximum)</u> Suggested scoring scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant clearly describes the agency’s strategy to recruit and retain people of color within various levels in the agency. The response indicates the agency has an intentional strategy to ensure agency staff and board are reflective of the demographics of the people the agency serves. • 1 – 2: The response given indicates the agency has some, but not a robust, strategy of recruiting and retaining people of color within various levels in the agency. The applicant references how it intends to ensure staff and board composition are reflective of the people served, but there does not seem to be a clear strategy to ensure this. • 0: Response is significantly lacking; no evidence given that the agency has made any attempts to recruit or retain people of color within the agency or to ensure staff/board demographics reflect the people served. <p><u>Comments</u></p>	
<p align="center">18.</p>	<p><u>HMIS Experience and Plan (4 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4: Response indicates agency has extensive experience with HMIS or other client-level data reporting systems. The response indicates the agency has a clear plan for ensuring timeline data entry and reporting, and a clear plan for monitoring project performance and data quality. • 2 -3: Response indicates agency has some, but not extensive, experience with HMIS or other client-level data reporting systems. The plan for ensuring timely data entry or monitoring project performance and data quality is not very clear and/or detailed. • 0-1: The response does not indicate the agency has much, if any, experience with HMIS or other client-level data reporting. Plan for ensuring timely data entry and monitoring project performance and data quality was lacking. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
22.	<p><u>Project Description (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response addresses each sub-part in question 22 (a-f) in a clear, concise, yet comprehensive manner; entire scope of the project is addressed; response is consistent with other parts of the application. • 2 - 3: Response could have been clearer; some of the sub-parts in question 22 (a-f) not fully addressed; some responses seem contradictory with other parts of the application. • 0 - 1: Response is lacking in clarity and description; some of the sub-parts of question 22 (a-f) not addressed at all; no consistency with the rest of the application. <p><u>Comments</u></p>	
23.	<p><u>Service Model Description (8 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7 - 8: Response addresses each sub-part in question 23 (a-e) in a clear, concise, yet comprehensive manner, and the following are included in the response: <ul style="list-style-type: none"> ○ A clear description of the different positions and roles of the staff team (part a) ○ The frequency and intensity of services, and the extent that those services are provided in-person (part b) ○ Supportive services or on-call crisis staff are available outside of typical business hours (part c) ○ The agency has a clear process for tracking and facilitating referrals and for providing transportation as needed (part d) ○ The agency has a clear plan for providing staff training; the description provide aligns with the information given in the “staff development and training” portion of the PSH budget spreadsheet (part e) • 4 – 6: The response given meets most, but not all, of the points given in parts a - e as described above. • 1 – 3: The response given meets few of the points given in parts a – e as described above. • 0: Response is significantly lacking in describing the service model to be used. <p><u>Comments</u></p>	
29.	<p><u>Peer Supports (2 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 2: Applicant clearly demonstrates that peer support specialists are fully integrated into their service delivery model. Response clearly describes how peer support specialists are part of the service team to enhance supports and services 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>to clients. Applicant clearly demonstrates that peer support specialists are provided adequate, on-going training and receive regular supervision and support on the job.</p> <ul style="list-style-type: none"> • 1: Description of how peer support specialists are incorporated into the service delivery model could have been stronger. Description of peer support specialists training and supervision was lacking. • 0: No evidence that applicant has incorporated the use of peer support specialists in the delivery of services. <p><u>Comments</u></p>	
<p>30. 30A.</p>	<p><u>Project Timeline (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Applicant provides a clear description of how the project will be ramped up, including how costs incurred during the ramp up phase will be covered if they cannot be covered by the CoC grant. The estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 2 -3: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work could have been clearer. It is not entirely clear that the agency will be able to cover costs during the ramp-up phase with non-CoC funds. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 0 -1: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work was significantly lacking in detail and clarity. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is greater than 3 months/90 days after the execution of the grant agreement. <p><u>Comments</u></p>	
<p>32. Attachments #10 - #12 (as applicable)</p>	<p><u>Site Description (15 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 11-15: The responses to parts a – g demonstrate the proposed site seems to be suitable as PSH; a clear plan is given to make provision for any programming/clients at the site currently (if applicable); the description of the units clearly state residents will have private sleeping quarters, private bathing facilities, and a place to prepare and store food. A timeline and funding for rehab work (if needed) is clearly described and funding identified appears to be 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>adequate for work to be done. Attachment #10 demonstrates applicant has site control via a deed or long-term lease agreement. Applicant demonstrates commitments from other funding sources (attachments #11 and #12).</p> <ul style="list-style-type: none"> • 6-10: The responses given parts a – g are answered, but may be a bit lacking in completeness or clarity. If rehab work is needed, the timeline for completing the work and/or funding for competition does not clearly demonstrate work can be completed within a reasonable amount of time. Attachment #10 demonstrates applicant has site control via a deed or long-term lease agreement. Few or no other sources of funding commit to the project are identified (attachments #11 and #12). • 0 - 5: The responses given to parts a – g do not demonstrate the proposed site would be appropriate for PSH; there is little to no description on provision to be made for programming/clients at the site currently (if applicable); the description of the units does not provide the specifics sought in part g. It is not clear if agency has site control (attachment #10). If rehab work is needed, insufficient funds are identified and/or timeline for completion is unclear. No other sources of funding commit to the project are identified (attachments #11 and #12). <p><u>Comments</u></p>	
33.	<p><u>Obtaining and Maintaining Permanent Housing (8 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 6– 8: Applicant provides strong, clear, detailed, and logical descriptions to the specific items asked in the question and addresses how participants will be assisted to obtain and maintain permanent housing. Applicant clearly describes how they will identify and address barriers to housing, how client choice will be incorporated into the housing search process, and how landlords will be engaged. • 3 –5: Applicant provides a response to each question, however, some or all of the responses are lacking in detail, clarity, and/or logic. It is not clear the extent to which the applicant has experience providing services that assist clients with accessing/ maintaining permanent housing. Any description of barriers clients may be facing is lacking. • 0 – 2: Responses to questions are significantly lacking. There is little to no evidence that the applicant has experience providing services that assist clients with accessing or maintaining permanent housing. Little to no description of barriers faced by clients. <p><u>Comments</u></p>	
34.	<p><u>Increasing Employment/Income (4 maximum)</u></p> <p>Suggested Scoring Scale</p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 3 – 4: Applicant provides strong, clear, specific description of how they assist clients to increase their employment and/or other income (including SSI/SSDI). It is clear from the response the applicant has experience providing services assisting clients with increasing income. • 1 –2: Description given of how clients are assisted to increase employment/income could have been stronger. It is not clear the extent to which the applicant has experience providing services assisting clients with increasing income. • 0: No evidence the applicant has experience assisting clients with increasing employment/income. <p><u>Comments</u></p>	
35.	<p><u>Enrolling Clients in Medicaid and Linking to Other Mainstream Resources (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Applicant clearly describes specific activities that are in place to ensure clients are enrolled in Medicaid and accessing mainstream resources. Also provides a strong description of how clients are assisted in navigating the health care system. • 1-2: Description of how clients will be enrolled in Medicaid or access mainstream resources was not clearly described and/or lacked specificity. Description of how clients are assisted in navigating the health care system could have been stronger. • 0: Response provided little information on a plan or process to assist clients with enrolling in Medicaid or accessing mainstream resources, or navigating the health care system. <p><u>Comments</u></p>	
38.	<p><u>Client to Case Manager Ratio (5 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5: Caseloads already do not exceed 1:20. Staff either have no other clients on their caseloads, or if they do, those clients are also in a PSH program (question 38c). • 4: Caseloads currently exceed 1:20, but applicant was able to demonstrate that if this project received expansion funding, the caseloads would not exceed 1:20. If staff from this project have other clients on their caseloads, those clients are also in a PSH program (question 38c). • 3: Caseloads currently exceed 1:20, and applicant was not able to clearly demonstrate that receiving expansion funding would reduce the caseloads to 1:20 or less. If staff from this project have other clients on their caseloads, those clients 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>are also in a PSH program (question 38c).</p> <ul style="list-style-type: none"> • 1-2: Caseloads currently exceed 1:20, and applicant was not able to clearly demonstrate that receiving expansion funding would reduce the caseloads to 1:20 or less. If staff from this project have other clients on their caseloads, those clients are in a program other than PSH (question 38c). • 0: No indication that the project would have caseloads less than 1:20. <p><u>Comments</u></p>	
<p>40. 41.</p>	<p><u>Improvement in Project Quality and Client Outcomes (12 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 9-12: Response to both questions (41 and 42) clearly articulate how additional funding would improve project quality and improve client outcomes. Applicant provides specific expected improvements in overall project quality (question 40). If applicant is requesting funds to expand supportive services to lower the client-to-case manager ratio (question 41), the response clearly articulates how having a lower ratio is anticipated to improve client outcomes. • 5-8: The response given to both questions only partially articulates improvements in overall project quality or client outcomes. If applicant is requesting funds to expand supportive services to lower the client-to-case manager ratio (question 41), response does not clearly articulate how a lower ratio would result in improved client outcomes. • 0-4: Based on the response given to both questions, the reviewer is unable to clearly determine how increased funding would result in improved project quality or client outcomes. <p><u>Comments</u></p>	
<p>45 Attach. #7</p>	<p><u>Leveraging Healthcare Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded healthcare resources being leveraged to this project. This amount is 50% or more of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). 	

Application Section B: Project Description		
Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> 1 – 2: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is less than 25% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). 0: The applicant does not demonstrate it is leveraging any non-CoC funded healthcare resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #7. <p><u>Comments</u></p>	
46. Attach. #8	<p><u>Leveraging Housing Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded housing resources being leveraged to this project. This amount is 50% or more of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). 3 – 4: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding units include in this project application. Applicant provides documentation of this leveraging (attachment #8). 1 – 2: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is less than 25% of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). 0: The applicant does not demonstrate it is leveraging any non-CoC funded housing resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #8. <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
47. Attach. #4	<p><u>Housing First (10 maximum)</u> The responses to the referenced application questions and attachments should be reviewed for the extent to which they address Housing First, including references to the following:</p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> Client agreement to participate in services is not required for housing Agency describes how it engages with clients who are resistant to receiving services. Agency describes how it engages with clients who are non-compliant with medication or treatment and/or have behavioral concerns to assist the client with maintaining their housing. Agency has an eviction prevention policy that clearly demonstrates attempts are made to prevent evictions whenever possible. A distinction should be made between preventing evictions and preventing program terminations. (Attachment #4) <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> 8 -10: Applicant provides a strong description of how Housing First is implemented; all, or almost all, of the points addressed and point to the agency’s experience in providing housing with a Housing First approach. The eviction prevention policy attachment provides additional evidence the agency embraces and practices Housing First and takes all steps possible to keep clients housed. 4 - 7: Description of how agency implements Housing First could have been stronger; not clear applicant has fully incorporated a Housing First model within its service delivery; not all of the points above are referenced. The eviction prevention policy attachment does not clearly support the narrative responses. 0 - 3: No clear evidence applicant understands or has incorporated Housing First within its service delivery model. No eviction prevention policy attachment, or the one that is attached does not support narrative responses. <p><u>Comments</u></p>	
48. Attachment #5	<p><u>Termination Process (5 maximum)</u></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> 4-5: The response to question 48 given makes it clear the agency terminates clients from the program only in the most extreme cases, that all attempts are made to prevent termination, and there are clear steps to prevent termination, including communication to the client. The attached policy (#5) supports the response given. 2-3: From the response given, it is not entirely clear that termination would occur only in the most extreme cases. It seems the agency may make some attempts to prevent termination, but those attempts do not seem to be as comprehensive as they could be. It is not clearly spelled out how the client will be informed of pending termination or given a chance to prevent termination. If a policy is attached (#5), it supports the response given. 0 - 1: Overall, the response to question 48 was lacking. There is no clear evidence that the agency will try to prevent termination. No policy provided (#5). <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
49. Attachment #6	<p><u>Grievance Process (5 maximum)</u> <u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 49 clearly describes how attempts to mediate and the resolve the concerns are handled. It is clearly described how an individual may submit a grievance (or complaint) against the agency. The process is clearly described to the individual, is posted publicly, and grievances may be submitted anonymously. The response also states that the agency has a specific staff role to handle grievances in an unbiased and neutral manner. Response discusses how the agency prevents retaliation against those who submit a grievance. The attached policy (#6) supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 2-3: The response to question 49 could have been clearer. It is not clear how the process for submitting a grievance (or complaint) against the agency is communicated to clients, although it seems the agency does allow for grievances to be submitted anonymously. While there is not specific staff role identified to handle grievances, the response does describe how grievances are reviewed in an unbiased and neutral manner. It is not clear if the agency has a process to prevent retaliation against those who submit a grievance. If a policy is attached (#6), it supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 0 - 1: Overall, the response to question 9 was lacking. There is no description given on how the grievance process is communicated to clients. It does not appear the agency has a way to review grievances in an unbiased and neutral manner that prevents retaliation. No policy provided (#6) OR the policy submitted was only the Detroit CoC’s grievance process, and not specific to the agency. <p><u>Comments</u></p>	
50.	<p><u>Meaningful Participation of Persons with Lived Experience (6 maximum)</u> <u>Suggested scoring scale:</u></p> <ul style="list-style-type: none"> • 5 – 6: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2: Very little evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 0: No clear evidence that agency incorporates PWLE <p><u>Comments</u></p>	

	Application Section D: BUDGET	
Reference Application Question	Scoring Component	Score
Budget Spreadsheet	<p>Budget (20 maximum)</p> <p>Note to reviewers on PSH budget spreadsheet:</p> <p>The budget spreadsheet required applicants to provide an overall project budget for reviewers to better understand how the PSH project is structured and the resources used to support the project. The spreadsheet also asks applicants to provide detailed information on how the requested CoC funding would be used. The budget spreadsheet also requires applicants to provide information on the staffing structure of the project (Tab B) to give reviewers a clearer picture of the personnel committed to the project and understand the staff-to-client ratios.</p> <p>The information given in the budget spreadsheet should complement and align with other parts of the application. For example, the information given on Tab B (Total Personnel & Ratios) should align with the response given in question 36 of the application (Client to Case Manager Ratio). Question 7-8 of the project application asks about staff training and development, while Tab C budget spreadsheet (Total Project Budget) asks for information on costs related to staff training and development. The responses given in these two areas should complement each other.</p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> <p>15 - 20: The tabs in the spreadsheet are filled out in a comprehensive enough manner to give the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) clearly indicate other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides detail sufficient for the reviewer to understand how the requested CoC funding would be used. The budget complements and aligns with other portions of the project application. The information given in the budget spreadsheet demonstrates the PSH project is well developed and adequately staffed and resourced (or would be adequately staffed/resourced if CoC funding was awarded).</p> <p>8 - 14: The information given in the spreadsheet is somewhat lacking in providing the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) do not clearly indicate other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides some, but not sufficient, detail for the reviewer to understand how the requested CoC funding would be used. The budget mostly aligns with other portions of the project application. Based on the information in the budget spreadsheet, it is unclear how well-developed the PSH project is. It is also not fully clear how the requested CoC funding would allow the project to be adequately staffed or resourced.</p> <p>0 - 7: The information given in the spreadsheet is significantly lacking in providing the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) do not indicate any other sources of funding, besides the CoC funding requested, to support the supportive services</u></p> 	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
	<p><i>portion of the project.</i> Tab D (CoC Funding Request) provides very little detail for the reviewer to understand how the requested CoC funding would be used. There is very little alignment with other portions of the project application. Based on the information in the budget spreadsheet, there is a great deal of unclarity and uncertainty in how the project has been developed. Doubts that the CoC funding requested would allow the project to be adequately staffed or resourced.</p> <p><u>Comments</u></p>	
Budget Spreadsheet and Attachments #9	<p>Match (3 maximum) Suggested Scoring Scale: Note: Match documentation was not a required attachment, but additional pts given if included</p> <ul style="list-style-type: none"> • 3: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) clearly state the sources and amounts of match for this project. In tab F, the “Total Match Identified for the CoC Program” is equal to, or greater than, the total match required for the funding request. Written match documentation included with application for all matching sources. • 2: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) clearly state the sources and amounts of match for this project. In tab F, the “Total Match Identified for the CoC Program” is equal to, or greater than, the total match required for the funding request. Written match documentation may or may not be included. • 0-1: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) are not fully completed and/or the amount of match identified is less than the amount required. No match documentation provided. <p><u>Comments</u></p>	

Audit and Monitoring Report Review		
Attachment #1	<p>Review of Agency Financial Audit (up to -2 points) Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year in the agency’s financial audit (not the A-133 audit).</p>	
Attachment #1 (if applicable)	<p>Review of Agency A-133 Audit: Findings Associated with CoC Grant (up to -2 points) Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with CoC grants.</p>	
Attachment #1 (if applicable)	<p>Review of Agency A-133 Audit: Findings Associated with Other Federal Grants (besides CoC grants) (up to -2 points) Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with Federal grants <i>other than</i> CoC grants.</p>	

Attachment #2 (if applicable)	<p><u>Review of HUD CoC Program Monitoring (up to -2 points)</u></p> <p>Up to 2 points may be deducted from the project score for findings in the CoC program monitoring report for which no Corrective Action Plan was submitted by HUD’s deadlines, or Correction Action Plan submitted did not meet HUD’s approval.</p>	
Attachment #3 (if applicable)	<p><u>Review of City of Detroit Homeless Program Monitoring (up to -2 points)</u></p> <p>Up to 2 points may be deducted from the project score for findings in the City of Detroit Homeless program monitoring report for which no Corrective Action Plan was submitted by City of Detroit’s deadlines, or Correction Action Plan submitted did not meet City of Detroit’s approval.</p>	

ADDITIONAL REVIEWER NOTES

Scoring Sheet for Expansion PSH Projects (Scattered Site)

Applicant Agency: _____

Reviewer Name: _____

Instructions:

After reviewing the section of the application, give a score. A range of suggested points is given for each component. Reviewers may award points anywhere along the scale. Reviewers may also award half (½) points if they choose.

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
1. 2. 3.	<p><u>Applicant Experience & Capacity (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 points should be awarded if applicant meets all the following: <ul style="list-style-type: none"> ○ A clear description is provided of the applicant and any subrecipients' experience providing the services being proposed in the application (question 1) ○ Demonstration of strong organizational and management structure for applicant and subrecipient (question 2) ○ If subrecipients are identified (question 3), role of each entity is clearly described • 2 – 4: Points in this range should be awarded if the above items (that apply) are not fully or clearly met • 0 – 1: Points in this range should be awarded if very few of the above items (that apply) are met <p><u>Comments</u></p>	
4.	<p><u>Leveraging Experience (2 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: Applicant and sub-recipient clearly demonstrate experience leveraging other resources • 1: Some, but not a lot, of experience leveraging other resources • 0: Applicant states no experience leveraging other funds <p><u>Comments</u></p>	
5.	<p><u>Capacity to Receive New CoC Funding (7 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 – 7: Response given clearly indicates the agency has the administrative and staffing capacity to take on additional CoC funding. The response describes how the agency will either bring on additional staff to manage the additional funding, or how current staff will be able to absorb the additional work. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2 – 4: Response given does not clearly communicate that the agency has the administrative or staffing capacity to take on new funding, and/or the response given does not clearly communicate how agency capacity will be increased to take on additional funding. • 0 – 1: Overall, there are significant concerns about the agency’s capacity to expand its project and take on additional CoC funding. <p><u>Comments</u></p>	
6.	<p><u>Experience Ramping Up New Projects (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response clearly describes the most recent experience the agency has had ramping up new or expanded programming (note: response could have described a non-homeless program, if that was the most recent project the agency had to ramp up). The response articulates what challenges, if any, the agency experienced during that project’s ramp-up and steps the agency will take to prevent similar challenges if it receives the requested expansion funding. • 2 -3: Response does not clearly describe experience ramping up a project or it is not clear how agency would avoid the same challenges in ramping up this project as it has experienced in the past. • 0 – 1: No clear indication agency has any experience ramping up projects or would be able to successfully ramp up if it received the requested expansion funding. <p><u>Comments</u></p>	
7A 7B 7C 7D 8	<p><u>Staff Training & Development (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 -7: Applicant demonstrates a comprehensive and robust training plan for staff upon their initial hire and on an annual basis. <i>The majority of the training topics</i> in questions 7A – 7C selected as being either required or optional, either at initial hire and/or annually. The response to question 8 provides further details on how the agency ensures staff have the tools and skills needed to provide quality care and services. • 2 – 4: The responses given in questions 7A – 7C and 8 are adequate, but somewhat lacking. <i>Only about half of the training topics</i> in questions 7A – 7C are selected as being either required or optional. The response given in question 8 provides some, but not a lot, of additional information on how staff are trained. • 0 – 1: The responses given in questions 7A – 7C and 8 are significantly lacking. There is little evidence that the agency ensures staff receive appropriate training at either initial hire or annually thereafter. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
9	<p><u>Recruitment and Retention of People of Color (4 maximum)</u> Suggested scoring scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant clearly describes the agency’s strategy to recruit and retain people of color within various levels in the agency. The response indicates the agency has an intentional strategy to ensure agency staff and board are reflective of the demographics of the people the agency serves. • 1 – 2: The response given indicates the agency has some, but not a robust, strategy of recruiting and retaining people of color within various levels in the agency. The applicant references how it intends to ensure staff and board composition are reflective of the people served, but there does not seem to be a clear strategy to ensure this. • 0: Response is significantly lacking; no evidence given that the agency has made any attempts to recruit or retain people of color within the agency or to ensure staff/board demographics reflect the people served. <p><u>Comments</u></p>	
18.	<p><u>HMIS Experience and Plan (4 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4: Response indicates agency has extensive experience with HMIS or other client-level data reporting systems. The response indicates the agency has a clear plan for ensuring timeline data entry and reporting, and a clear plan for monitoring project performance and data quality. • 2 -3: Response indicates agency has some, but not extensive, experience with HMIS or other client-level data reporting systems. The plan for ensuring timely data entry or monitoring project performance and data quality is not very clear and/or detailed. • 0-1: The response does not indicate the agency has much, if any, experience with HMIS or other client-level data reporting. Plan for ensuring timely data entry and monitoring project performance and data quality was lacking. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
22.	<p><u>Project Description (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response addresses each sub-part in question 22 (a-f) in a clear, concise, yet comprehensive manner; entire scope of the project is addressed; response is consistent with other parts of the application. • 2 - 3: Response could have been clearer; some of the sub-parts in question 22 (a-f) not fully addressed; some responses seem contradictory with other parts of the application. • 0 - 1: Response is lacking in clarity and description; some of the sub-parts of question 22 (a-f) not addressed at all; no consistency with the rest of the application. <p><u>Comments</u></p>	
23.	<p><u>Service Model Description (8 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7 - 8: Response addresses each sub-part in question 23 (a-e) in a clear, concise, yet comprehensive manner, and the following are included in the response: <ul style="list-style-type: none"> ○ A clear description of the different positions and roles of the staff team (part a) ○ The frequency and intensity of services, and the extent that those services are provided in-person (part b) ○ Supportive services or on-call crisis staff are available outside of typical business hours (part c) ○ The agency has a clear process for tracking and facilitating referrals and for providing transportation as needed (part d) ○ The agency has a clear plan for providing staff training; the description provide aligns with the information given in the “staff development and training” portion of the PSH budget spreadsheet (part e) • 4 – 6: The response given meets most, but not all, of the points given in parts a - e as described above. • 1 – 3: The response given meets few of the points given in parts a – e as described above. • 0: Response is significantly lacking in describing the service model to be used. <p><u>Comments</u></p>	
29.	<p><u>Peer Supports (2 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 2: Applicant clearly demonstrates that peer support specialists are fully integrated into their service delivery model. Response clearly describes how peer support specialists are part of the service team to enhance supports and services 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>to clients. Applicant clearly demonstrates that peer support specialists are provided adequate, on-going training and receive regular supervision and support on the job.</p> <ul style="list-style-type: none"> • 1: Description of how peer support specialists are incorporated into the service delivery model could have been stronger. Description of peer support specialists training and supervision was lacking. • 0: No evidence that applicant has incorporated the use of peer support specialists in the delivery of services. <p><u>Comments</u></p>	
<p>30. 30A.</p>	<p><u>Project Timeline (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Applicant provides a clear description of how the project will be ramped up, including how costs incurred during the ramp up phase will be covered if they cannot be covered by the CoC grant. The estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 2 -3: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work could have been clearer. It is not entirely clear that the agency will be able to cover costs during the ramp-up phase with non-CoC funds. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 0 -1: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work was significantly lacking in detail and clarity. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is greater than 3 months/90 days after the execution of the grant agreement. <p><u>Comments</u></p>	
<p>31.</p>	<p><u>Relationships with Landlords (15 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 11 – 15: Response clearly demonstrates the applicant has successful experience working with landlords in recruiting their participation to make units available to clients. Response also clearly describes how the applicant successfully ensures on-going, positive relationships and communications with landlords are maintained. Applicant stated they had at least one landlord relationship-building event in 2022. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 6 – 10: Response could have been stronger. It is not entirely clear how landlords are recruited to make their units available to clients. The applicant’s ability to maintain on-going, positive relationships and communications with the landlords is not clearly described and/or does not demonstrate that applicant has successful experience in this area. It was not clear whether the applicant had any landlord relationship-building event in 2022. • 0 – 5: Response was significantly lacking. Little demonstration of past successful experience in working with landlords. <p><u>Comments</u></p>	
33.	<p><u>Obtaining and Maintaining Permanent Housing (8 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 6– 8: Applicant provides strong, clear, detailed, and logical descriptions to the specific items asked in the question and addresses how participants will be assisted to obtain and maintain permanent housing. Applicant clearly describes how they will identify and address barriers to housing, how client choice will be incorporated into the housing search process, and how landlords will be engaged. • 3–5: Applicant provides a response to each question, however, some or all of the responses are lacking in detail, clarity, and/or logic. It is not clear the extent to which the applicant has experience providing services that assist clients with accessing/ maintaining permanent housing. Any description of barriers clients may be facing is lacking. • 0 – 2: Responses to questions are significantly lacking. There is little to no evidence that the applicant has experience providing services that assist clients with accessing or maintaining permanent housing. Little to no description of barriers faced by clients. <p><u>Comments</u></p>	
34.	<p><u>Increasing Employment/Income (4 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant provides strong, clear, specific description of how they assist clients to increase their employment and/or other income (including SSI/SSDI). It is clear from the response the applicant has experience providing services assisting clients with increasing income. • 1 –2: Description given of how clients are assisted to increase employment/income could have been stronger. It is not clear the extent to which the applicant has experience providing services assisting clients with increasing income. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 0: No evidence the applicant has experience assisting clients with increasing employment/income. <p><u>Comments</u></p>	
35.	<p><u>Enrolling Clients in Medicaid and Linking to Other Mainstream Resources (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Applicant clearly describes specific activities that are in place to ensure clients are enrolled in Medicaid and accessing mainstream resources. Also provides a strong description of how clients are assisted in navigating the health care system. • 1-2: Description of how clients will be enrolled in Medicaid or access mainstream resources was not clearly described and/or lacked specificity. Description of how clients are assisted in navigating the health care system could have been stronger. • 0: Response provided little information on a plan or process to assist clients with enrolling in Medicaid or accessing mainstream resources, or navigating the health care system. <p><u>Comments</u></p>	
38.	<p><u>Client to Case Manager Ratio (5 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5: Caseloads already do not exceed 1:20. Staff either have no other clients on their caseloads, or if they do, those clients are also in a PSH program (question 38c). • 4: Caseloads currently exceed 1:20, but applicant was able to demonstrate that if this project received expansion funding, the caseloads would not exceed 1:20. If staff from this project have other clients on their caseloads, those clients are also in a PSH program (question 38c). • 3: Caseloads currently exceed 1:20, and applicant was not able to clearly demonstrate that receiving expansion funding would reduce the caseloads to 1:20 or less. If staff from this project have other clients on their caseloads, those clients are also in a PSH program (question 38c). • 1-2: Caseloads currently exceed 1:20, and applicant was not able to clearly demonstrate that receiving expansion funding would reduce the caseloads to 1:20 or less. If staff from this project have other clients on their caseloads, those clients are in a program other than PSH (question 38c). • 0: No indication that the project would have caseloads less than 1:20. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
<p>40. 41.</p>	<p><u>Improvement in Project Quality and Client Outcomes (12 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 9-12: Response to both questions (41 and 42) clearly articulate how additional funding would improve project quality and improve client outcomes. Applicant provides specific expected improvements in overall project quality (question 40). If applicant is requesting funds to expand supportive services to lower the client-to-case manager ratio (question 41), the response clearly articulates how having a lower ratio is anticipated to improve client outcomes. • 5-8: The response given to both questions only partially articulates improvements in overall project quality or client outcomes. If applicant is requesting funds to expand supportive services to lower the client-to-case manager ratio (question 41), response does not clearly articulate how a lower ratio would result in improved client outcomes. • 0-4: Based on the response given to both questions, the reviewer is unable to clearly determine how increased funding would result in improved project quality or client outcomes. <p><u>Comments</u></p>	
<p>45 Attach. #7</p>	<p><u>Leveraging Healthcare Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded healthcare resources being leveraged to this project. This amount is 50% or more of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 1 – 2: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is less than 25% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 0: The applicant does not demonstrate it is leveraging any non-CoC funded healthcare resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #7. 	

Application Section B: Project Description		
Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
46. Attach. #8	<p><u>Leveraging Housing Resources (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded housing resources being leveraged to this project. This amount is 50% or more of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding units include in this project application. Applicant provides documentation of this leveraging (attachment #8). • 1 – 2: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is less than 25% of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). • 0: The applicant does not demonstrate it is leveraging any non-CoC funded housing resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #8. <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
47. Attach. #4	<p><u>Housing First (10 maximum)</u></p> <p>The responses to the referenced application questions and attachments should be reviewed for the extent to which they address Housing First, including references to the following:</p> <ul style="list-style-type: none"> • Client agreement to participate in services is not required for housing • Agency describes how it engages with clients who are resistant to receiving services. • Agency describes how it engages with clients who are non-compliant with medication or treatment and/or have behavioral concerns to assist the client with maintaining their housing. • Agency has an eviction prevention policy that clearly demonstrates attempts are made to prevent evictions whenever possible. A distinction should be made between preventing evictions and preventing program terminations. (Attachment 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>#4)</p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 8 -10: Applicant provides a strong description of how Housing First is implemented; all, or almost all, of the points addressed and point to the agency’s experience in providing housing with a Housing First approach. The eviction prevention policy attachment provides additional evidence the agency embraces and practices Housing First and takes all steps possible to keep clients housed. • 4 - 7: Description of how agency implements Housing First could have been stronger; not clear applicant has fully incorporated a Housing First model within its service delivery; not all of the points above are referenced. The eviction prevention policy attachment does not clearly support the narrative responses. • 0 - 3: No clear evidence applicant understands or has incorporated Housing First within its service delivery model. No eviction prevention policy attachment, or the one that is attached does not support narrative responses. <p><u>Comments</u></p>	
48. Attachment #5	<p><u>Termination Process (5 maximum)</u></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 48 given makes it clear the agency terminates clients from the program only in the most extreme cases, that all attempts are made to prevent termination, and there are clear steps to prevent termination, including communication to the client. The attached policy (#5) supports the response given. • 2-3: From the response given, it is not entirely clear that termination would occur only in the most extreme cases. It seems the agency may make some attempts to prevent termination, but those attempts do not seem to be as comprehensive as they could be. It is not clearly spelled out how the client will be informed of pending termination or given a chance to prevent termination. If a policy is attached (#5), it supports the response given. • 0 - 1: Overall, the response to question 48 was lacking. There is no clear evidence that the agency will try to prevent termination. No policy provided (#5). <p><u>Comments</u></p>	
49. Attachment #6	<p><u>Grievance Process (5 maximum)</u></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 49 clearly describes how attempts to mediate and the resolve the concerns are handled. It is clearly described how an individual may submit a grievance (or compliant) against the agency. The process is clearly described to the individual, is posted publicly, and grievances may be submitted anonymously. The response also states that the agency has a specific staff role to 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>handle grievances in an unbiased and neutral manner. Response discusses how the agency prevents retaliation against those who submit a grievance. The attached policy (#6) supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process.</p> <ul style="list-style-type: none"> • 2-3: The response to question 49 could have been clearer. It is not clear how the process for submitting a grievance (or complaint) against the agency is communicated to clients, although it seems the agency does allow for grievances to be submitted anonymously. While there is not specific staff role identified to handle grievances, the response does describe how grievances are reviewed in an unbiased and neutral manner. It is not clear if the agency has a process to prevent retaliation against those who submit a grievance. If a policy is attached (#6), it supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 0 - 1: Overall, the response to question 9 was lacking. There is no description given on how the grievance process is communicated to clients. It does not appear the agency has a way to review grievances in an unbiased and neutral manner that prevents retaliation. No policy provided (#6) OR the policy submitted was only the Detroit CoC’s grievance process, and not specific to the agency. <p><u>Comments</u></p>	
50.	<p><u>Meaningful Participation of Persons with Lived Experience (6 maximum)</u></p> <p>Suggested scoring scale:</p> <ul style="list-style-type: none"> • 5 – 6: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2: Very little evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 0: No clear evidence that agency incorporates PWLE <p><u>Comments</u></p>	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
Budget Spreadsheet	<p><u>Budget (20 maximum)</u></p> <p><i>Note to reviewers on PSH budget spreadsheet:</i></p> <p>The budget spreadsheet required applicants to provide an overall project budget for reviewers to better understand how the PSH project is structured and the resources used to support the project. The spreadsheet also asks applicants to provide detailed information on how the requested CoC funding would be used. The budget spreadsheet</p>	

	Application Section D: BUDGET	
Reference Application Question	Scoring Component	Score
	<p>also requires applicants to provide information on the staffing structure of the project (Tab B) to give reviewers a clearer picture of the personnel committed to the project and understand the staff-to-client ratios.</p> <p>The information given in the budget spreadsheet should complement and align with other parts of the application. For example, the information given on Tab B (Total Personnel & Ratios) should align with the response given in question 36 of the application (Client to Case Manager Ratio). Question 7-8 of the project application asks about staff training and development, while Tab C budget spreadsheet (Total Project Budget) asks for information on costs related to staff training and development. The responses given in these two areas should complement each other.</p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> <p>15 - 20: The tabs in the spreadsheet are filled out in a comprehensive enough manner to give the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) clearly indicate other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides detail sufficient for the reviewer to understand how the requested CoC funding would be used. The budget complements and aligns with other portions of the project application. The information given in the budget spreadsheet demonstrates the PSH project is well developed and adequately staffed and resourced (or would be adequately staffed/resourced if CoC funding was awarded).</p> <p>8 - 14: The information given in the spreadsheet is somewhat lacking in providing the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) do not clearly indicate other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides some, but not sufficient, detail for the reviewer to understand how the requested CoC funding would be used. The budget mostly aligns with other portions of the project application. Based on the information in the budget spreadsheet, it is unclear how well-developed the PSH project is. It is also not fully clear how the requested CoC funding would allow the project to be adequately staffed or resourced.</p> <p>0 - 7: The information given in the spreadsheet is significantly lacking in providing the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) do not indicate any other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides very little detail for the reviewer to understand how the requested CoC funding would be used. There is very little alignment with other portions of the project application. Based on the information in the budget spreadsheet, there is a great deal of unclarity and uncertainty in how the project has been developed. Doubts that the CoC funding requested would allow the project to be adequately staffed or resourced.</p> 	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
Budget Spreadsheet and Attachments #9	<p><u>Match (3 maximum)</u> Suggested Scoring Scale: Note: Match documentation was not a required attachment, but additional pts given if included</p> <ul style="list-style-type: none"> • 3: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) clearly state the sources and amounts of match for this project. In tab F, the “Total Match Identified for the CoC Program” is equal to, or greater than, the total match required for the funding request. Written match documentation included with application for all matching sources. • 2: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) clearly state the sources and amounts of match for this project. In tab F, the “Total Match Identified for the CoC Program” is equal to, or greater than, the total match required for the funding request. Written match documentation may or may not be included. • 0-1: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) are not fully completed and/or the amount of match identified is less than the amount required. No match documentation provided. <p><u>Comments</u></p>	

Audit and Monitoring Report Review		
Attachment #1	<p><u>Review of Agency Financial Audit (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year in the agency’s financial audit (not the A-133 audit).</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with CoC Grant (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with CoC grants.</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with Other Federal Grants (besides CoC grants) (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with Federal grants <i>other than</i> CoC grants.</p>	
Attachment #2 (if applicable)	<p><u>Review of HUD CoC Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the CoC program monitoring report for which no Corrective Action Plan was submitted by HUD’s deadlines, or Correction Action Plan submitted did not meet HUD’s approval.</p>	

Attachment #3 (if applicable)	Review of City of Detroit Homeless Program Monitoring (up to -2 points) Up to 2 points may be deducted from the project score for findings in the City of Detroit Homeless program monitoring report for which no Corrective Action Plan was submitted by City of Detroit's deadlines, or Correction Action Plan submitted did not meet City of Detroit's approval.	
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ADDITIONAL REVIEWER NOTES

Scoring Sheet for New PSH Projects (Project-Based)

Applicant Agency: _____

Reviewer Name: _____

Instructions:

After reviewing the section of the application, give a score. A range of suggested points is given for each component. Reviewers may award points anywhere along the scale. Reviewers may also award half (½) points if they choose.

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY		
Reference Application Question	Scoring Component	Score
1. 2. 3.	<p><u>Applicant Experience & Capacity (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 points should be awarded if applicant meets all the following: <ul style="list-style-type: none"> ○ A clear description is provided of the applicant and any subrecipients' experience providing the services being proposed in the application (question 1) ○ Demonstration of strong organizational and management structure for applicant and subrecipient (question 2) ○ If subrecipients are identified (question 3), role of each entity is clearly described • 2 – 4: Points in this range should be awarded if the above items (that apply) are not fully or clearly met • 0 – 1: Points in this range should be awarded if very few of the above items (that apply) are met <p><u>Comments</u></p>	
4.	<p><u>Leveraging Experience (2 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: Applicant and sub-recipient clearly demonstrate experience leveraging other resources • 1: Some, but not a lot, of experience leveraging other resources • 0: Applicant states no experience leveraging other funds <p><u>Comments</u></p>	
5.	<p><u>Capacity to Receive New CoC Funding (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 – 7: Response given clearly indicates the agency has the administrative and staffing capacity to take on additional CoC funding. The response describes how the agency will either bring on additional staff to manage the additional funding, or how current staff will be able to absorb the additional work. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2 – 4: Response given does not clearly communicate that the agency has the administrative or staffing capacity to take on new funding, and/or the response given does not clearly communicate how agency capacity will be increased to take on additional funding. • 0 – 1: Overall, there are significant concerns about the agency’s capacity to expand its project and take on additional CoC funding. <p><u>Comments</u></p>	
6.	<p><u>Experience Ramping Up New Projects (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response clearly describes the most recent experience the agency has had ramping up new or expanded programming (note: response could have described a non-homeless program, if that was the most recent project the agency had to ramp up). The response articulates what challenges, if any, the agency experienced during that project’s ramp-up and steps the agency will take to prevent similar challenges if it receives the requested expansion funding. • 2 -3: Response does not clearly describe experience ramping up a project or it is not clear how agency would avoid the same challenges in ramping up this project as it has experienced in the past. • 0 – 1: No clear indication agency has any experience ramping up projects or would be able to successfully ramp up if it received the requested expansion funding. <p><u>Comments</u></p>	
7A 7B 7C 7D 8	<p><u>Staff Training & Development (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 -7: Applicant demonstrates a comprehensive and robust training plan for staff upon their initial hire and on an annual basis. <i>The majority of the training topics</i> in questions 7A – 7C selected as being either required or optional, either at initial hire and/or annually. The response to question 8 provides further details on how the agency ensures staff have the tools and skills needed to provide quality care and services. • 2 – 4: The responses given in questions 7A – 7C and 8 are adequate, but somewhat lacking. <i>Only about half of the training topics</i> in questions 7A – 7C are selected as being either required or optional. The response given in question 8 provides some, but not a lot, of additional information on how staff are trained. • 0 – 1: The responses given in questions 7A – 7C and 8 are significantly lacking. There is little evidence that the agency ensures staff receive appropriate training at either initial hire or annually thereafter. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
9	<p><u>Recruitment and Retention of People of Color (4 maximum)</u> Suggested scoring scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant clearly describes the agency’s strategy to recruit and retain people of color within various levels in the agency. The response indicates the agency has an intentional strategy to ensure agency staff and board are reflective of the demographics of the people the agency serves. • 1 – 2: The response given indicates the agency has some, but not a robust, strategy of recruiting and retaining people of color within various levels in the agency. The applicant references how it intends to ensure staff and board composition are reflective of the people served, but there does not seem to be a clear strategy to ensure this. • 0: Response is significantly lacking; no evidence given that the agency has made any attempts to recruit or retain people of color within the agency or to ensure staff/board demographics reflect the people served. <p><u>Comments</u></p>	
18.	<p><u>HMIS Experience and Plan (4 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4: Response indicates agency has extensive experience with HMIS or other client-level data reporting systems. The response indicates the agency has a clear plan for ensuring timeline data entry and reporting, and a clear plan for monitoring project performance and data quality. • 2 -3: Response indicates agency has some, but not extensive, experience with HMIS or other client-level data reporting systems. The plan for ensuring timely data entry or monitoring project performance and data quality is not very clear and/or detailed. • 0-1: The response does not indicate the agency has much, if any, experience with HMIS or other client-level data reporting. Plan for ensuring timely data entry and monitoring project performance and data quality was lacking. <p><u>Comments</u></p>	
19.	<p><u>Past Housing Outcomes (8 maximum)</u> <i>Outcome: Assisting tenants to remain stably housed or move to other permanent housing</i> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7- 8: Provides clear description of past successes in keeping people stably housed; data provided is that at least 90% of persons met this outcome. OR If the agency is 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p>newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides a clear and detailed description that demonstrates the agency has been successful in the past with helping people obtain/retain permanent housing.</p> <ul style="list-style-type: none"> • 5- 6: Provides some description of past successes; data provided is that between 85% – 89% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides some description of how the agency has been successful in the past with helping people obtain/retain permanent housing, but this description could have been stronger. • 3-4: Description of past successes could have been stronger; data provided is that between 80%– 84% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides very little description of how the agency has been successful in the past with helping people obtain/retain permanent housing. • 1 - 2: Very little description given of past successes; data provided is that between 75 – 79% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response does not give any indication that the agency has had past success with helping people obtain/retain permanent housing. • 0: Regardless of description given, 0 points should be given if data provided is that fewer than 75% of persons met this outcome. No narrative description given for how the agency has had past success in this area. <p><u>Comments</u></p>	
20.	<p><u>Past Income/Employment Outcomes (6 maximum)</u> <i>Outcome: Assisting tenants with increasing income and employment</i> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5- 6: Provides clear description of past successes in helping people increase their income (any cash income - either employment or benefits); data provided is that at least 20% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides a clear and detailed description that demonstrates the agency has been successful in the past with helping people obtain employment or income. • 3- 4: Provides some description of past successes in helping people increase their income (any cash income - either employment or benefits); data provided is that between 15 - 19% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides some description of how the agency has been 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p>successful in the past with helping people obtain employment or income, but this description could have been stronger.</p> <ul style="list-style-type: none"> 1-2: Description of past successes could have been stronger; data provided is that between 10 - 14% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response does not give any indication that the agency has had past success with helping people obtain employment or income. 0: Regardless of description given, 0 points should be given if data provided is that fewer than 9% of persons met this outcome. No narrative description given for how the agency has had past success in this area. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
22.	<p><u>Project Description (10 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> 8 -10: Response addresses each sub-part in question 22 (a-f) in a clear, concise, yet comprehensive manner; entire scope of the project is addressed; response is consistent with other parts of the application. 4 - 7: Response could have been clearer; some of the sub-parts in question 22 (a-f) not fully addressed; some responses seem contradictory with other parts of the application. 0 - 3: Response is lacking in clarity and description; some of the sub-parts of question 22 (a-f) not addressed at all; no consistency with the rest of the application. <p><u>Comments</u></p>	
23.	<p><u>Service Model Description (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> 7 - 8: Response addresses each sub-part in question 23 (a-e) in a clear, concise, yet comprehensive manner, and the following are included in the response: <ul style="list-style-type: none"> A clear description of the different positions and roles of the staff team (part a) The frequency and intensity of services, and the extent that those services are provided in-person (part b) Supportive services or on-call crisis staff are available outside of typical business hours (part c) The agency has a clear process for tracking and facilitating referrals and for 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>providing transportation as needed (part d)</p> <ul style="list-style-type: none"> ○ The agency has a clear plan for providing staff training; the description provide aligns with the information given in the “staff development and training” portion of the PSH budget spreadsheet (part e) <ul style="list-style-type: none"> ● 4 – 6: The response given meets most, but not all, of the points given in parts a - e as described above. ● 1 – 3: The response given meets few of the points given in parts a – e as described above. ● 0: Response is significantly lacking in describing the service model to be used. <p><u>Comments</u></p>	
29.	<p><u>Peer Supports (2 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> ● 2: Applicant clearly demonstrates that peer support specialists are fully integrated into their service delivery model. Response clearly describes how peer support specialists are part of the service team to enhance supports and services to clients. Applicant clearly demonstrates that peer support specialists are provided adequate, on-going training and receive regular supervision and support on the job. ● 1: Description of how peer support specialists are incorporated into the service delivery model could have been stronger. Description of peer support specialists training and supervision was lacking. ● 0: No evidence that applicant has incorporated the use of peer support specialists in the delivery of services. <p><u>Comments</u></p>	
30. 30A.	<p><u>Project Timeline (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> ● 4 -5: Applicant provides a clear description of how the project will be ramped up, including how costs incurred during the ramp up phase will be covered if they cannot be covered by the CoC grant. The estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. ● 2 -3: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work could have been clearer. It is not entirely clear that the agency will be able to cover costs during the ramp-up phase 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>with non-CoC funds. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement.</p> <ul style="list-style-type: none"> • 0 -1: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work was significantly lacking in detail and clarity. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is greater than 3 months/90 days after the execution of the grant agreement. <p><u>Comments</u></p>	
<p>32. Attachments #10 - #12 (as applicable)</p>	<p><u>Site Description (15 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 11-15: The responses to parts a – g demonstrate the proposed site seems to be suitable as PSH; a clear plan is given to make provision for any programming/clients at the site currently (if applicable); the description of the units clearly state residents will have private sleeping quarters, private bathing facilities, and a place to prepare and store food. A timeline and funding for rehab work (if needed) is clearly described and funding identified appears to be adequate for work to be done. Attachment #10 demonstrates applicant has site control via a deed or long-term lease agreement. Applicant demonstrates commitments from other funding sources (attachments #11 and #12). • 6-10: The responses given parts a – g are answered, but may be a bit lacking in completeness or clarity. If rehab work is needed, the timeline for completing the work and/or funding for competition does not clearly demonstrate work can be completed within a reasonable amount of time. Attachment #10 demonstrates applicant has site control via a deed or long-term lease agreement. Few or no other sources of funding commit to the project are identified (attachments #11 and #12). • 0 - 5: The responses given to parts a – g do not demonstrate the proposed site would be appropriate for PSH; there is little to no description on provision to be made for programming/clients at the site currently (if applicable); the description of the units does not provide the specifics sought in part g. It is not clear if agency has site control (attachment #10). If rehab work is needed, insufficient funds are identified and/or timeline for completion is unclear. No other sources of funding commit to the project are identified (attachments #11 and #12). <p><u>Comments</u></p>	
<p>33.</p>	<p><u>Obtaining and Maintaining Permanent Housing (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 6– 8: Applicant provides strong, clear, detailed, and logical descriptions to the specific items asked in the question and addresses how participants will be 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>assisted to obtain and maintain permanent housing. Applicant clearly describes how they will identify and address barriers to housing, how client choice will be incorporated into the housing search process, and how landlords will be engaged.</p> <ul style="list-style-type: none"> • 3 – 5: Applicant provides a response to each question, however, some or all of the responses are lacking in detail, clarity, and/or logic. It is not clear the extent to which the applicant has experience providing services that assist clients with accessing/ maintaining permanent housing. Any description of barriers clients may be facing is lacking. • 0 – 2: Responses to questions are significantly lacking. There is little to no evidence that the applicant has experience providing services that assist clients with accessing or maintaining permanent housing. Little to no description of barriers faced by clients. <p><u>Comments</u></p>	
34.	<p><u>Increasing Employment/Income (4 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant provides strong, clear, specific description of how they assist clients to increase their employment and/or other income (including SSI/SSDI). It is clear from the response the applicant has experience providing services assisting clients with increasing income. • 1 – 2: Description given of how clients are assisted to increase employment/income could have been stronger. It is not clear the extent to which the applicant has experience providing services assisting clients with increasing income. • 0: No evidence the applicant has experience assisting clients with increasing employment/income. <p><u>Comments</u></p>	
35.	<p><u>Enrolling Clients in Medicaid and Linking to Other Mainstream Resources (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Applicant clearly describes specific activities that are in place to ensure clients are enrolled in Medicaid and accessing mainstream resources. Also provides a strong description of how clients are assisted in navigating the health care system. • 1-2: Description of how clients will be enrolled in Medicaid or access mainstream resources was not clearly described and/or lacked specificity. Description of how clients are assisted in navigating the health care system could have been stronger. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 0: Response provided little information on a plan or process to assist clients with enrolling in Medicaid or accessing mainstream resources, or navigating the health care system. <p><u>Comments</u></p>	
36.	<p><u>Client to Case Manager Ratio (5 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5: Caseloads do not exceed 1:20. Staff either have no other clients on their caseloads, or if they do, those clients are also in a PSH program (question 36b). • 3: Caseloads do not exceed 1:20. If staff from this project have other clients on their caseloads, those clients are in a program other than PSH (question 36b). • 0: Caseloads are greater than 1:20, regardless of the response given in question 36b. <p><u>Comments</u></p>	
45 Attach. #7	<p><u>Leveraging Healthcare Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded healthcare resources being leveraged to this project. This amount is 50% or more of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 1 – 2: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is less than 25% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 0: The applicant does not demonstrate it is leveraging any non-CoC funded healthcare resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #7. <p><u>Comments</u></p>	

Application Section B: Project Description		
Reference Application Question	Scoring Component	Score
46. Attach. #8	<p><u>Leveraging Housing Resources (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded housing resources being leveraged to this project. This amount is 50% or more of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding units include in this project application. Applicant provides documentation of this leveraging (attachment #8). • 1 – 2: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is less than 25% of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). • 0: The applicant does not demonstrate it is leveraging any non-CoC funded housing resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #8. <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
47. Attach. #4	<p><u>Housing First (10 maximum)</u></p> <p>The responses to the referenced application questions and attachments should be reviewed for the extent to which they address Housing First, including references to the following:</p> <ul style="list-style-type: none"> • Client agreement to participate in services is not required for housing • Agency describes how it engages with clients who are resistant to receiving services. • Agency describes how it engages with clients who are non-compliant with medication or treatment and/or have behavioral concerns to assist the client with maintaining their housing. • Agency has an eviction prevention policy that clearly demonstrates attempts are made to prevent evictions whenever possible. A distinction should be made between preventing evictions and preventing program terminations. (Attachment #4) <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 8 -10: Applicant provides a strong description of how Housing First is implemented; all, or almost all, of the points addressed and point to the agency’s experience in 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>providing housing with a Housing First approach. The eviction prevention policy attachment provides additional evidence the agency embraces and practices Housing First and takes all steps possible to keep clients housed.</p> <ul style="list-style-type: none"> • 4 - 7: Description of how agency implements Housing First could have been stronger; not clear applicant has fully incorporated a Housing First model within its service delivery; not all of the points above are referenced. The eviction prevention policy attachment does not clearly support the narrative responses. • 0 - 3: No clear evidence applicant understands or has incorporated Housing First within its service delivery model. No eviction prevention policy attachment, or the one that is attached does not support narrative responses. <p><u>Comments</u></p>	
48. Attachment #5	<p><u>Termination Process (5 maximum)</u> <u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 48 given makes it clear the agency terminates clients from the program only in the most extreme cases, that all attempts are made to prevent termination, and there are clear steps to prevent termination, including communication to the client. The attached policy (#5) supports the response given. • 2-3: From the response given, it is not entirely clear that termination would occur only in the most extreme cases. It seems the agency may make some attempts to prevent termination, but those attempts do not seem to be as comprehensive as they could be. It is not clearly spelled out how the client will be informed of pending termination or given a chance to prevent termination. If a policy is attached (#5), it supports the response given. • 0 - 1: Overall, the response to question 48 was lacking. There is no clear evidence that the agency will try to prevent termination. No policy provided (#5). <p><u>Comments</u></p>	
49. Attachment #6	<p><u>Grievance Process (5 maximum)</u> <u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 49 clearly describes how attempts to mediate and the resolve the concerns are handled. It is clearly described how an individual may submit a grievance (or compliant) against the agency. The process is clearly described to the individual, is posted publicly, and grievances may be submitted anonymously. The response also states that the agency has a specific staff role to handle grievances in an unbiased and neutral manner. Response discusses how the agency prevents retaliation against those who submit a grievance. The attached policy (#6) supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC's grievance process. 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2-3: The response to question 49 could have been clearer. It is not clear how the process for submitting a grievance (or complaint) against the agency is communicated to clients, although it seems the agency does allow for grievances to be submitted anonymously. While there is not specific staff role identified to handle grievances, the response does describe how grievances are reviewed in an unbiased and neutral manner. It is not clear if the agency has a process to prevent retaliation against those who submit a grievance. If a policy is attached (#6), it supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 0 - 1: Overall, the response to question 9 was lacking. There is no description given on how the grievance process is communicated to clients. It does not appear the agency has a way to review grievances in an unbiased and neutral manner that prevents retaliation. No policy provided (#6) OR the policy submitted was only the Detroit CoC’s grievance process, and not specific to the agency. <p><u>Comments</u></p>	
50.	<p><u>Meaningful Participation of Persons with Lived Experience (6 maximum)</u></p> <p>Suggested scoring scale:</p> <ul style="list-style-type: none"> • 5 – 6: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2: Very little evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 0: No clear evidence that agency incorporates PWLE <p><u>Comments</u></p>	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
Budget Spreadsheet	<p>Budget (20 maximum)</p> <p>Note to reviewers on PSH budget spreadsheet:</p> <p>The budget spreadsheet required applicants to provide an overall project budget for reviewers to better understand how the PSH project is structured and the resources used to support the project. The spreadsheet also asks applicants to provide detailed information on how the requested CoC funding would be used. The budget spreadsheet also requires applicants to provide information on the staffing structure of the project (Tab B) to give reviewers a clearer picture of the personnel committed to the project and understand the staff-to-client ratios.</p> <p>The information given in the budget spreadsheet should complement and align with other parts of the application. For example, the information given on Tab B (Total Personnel & Ratios) should align with the response given in question 36 of the application (Client to Case Manager Ratio). Question 7-8 of the project application asks about staff training and development, while Tab C budget spreadsheet (Total Project Budget) asks for information on costs related to staff training and development. The responses given in these two areas should complement each other.</p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> <p>15 - 20: The tabs in the spreadsheet are filled out in a comprehensive enough manner to give the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) clearly indicate other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides detail sufficient for the reviewer to understand how the requested CoC funding would be used. The budget complements and aligns with other portions of the project application. The information given in the budget spreadsheet demonstrates the PSH project is well developed and adequately staffed and resourced (or would be adequately staffed/resourced if CoC funding was awarded).</p> <p>8 - 14: The information given in the spreadsheet is somewhat lacking in providing the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) do not clearly indicate other sources of funding, besides the CoC funding requested, to support the supportive services portion of the project.</u> Tab D (CoC Funding Request) provides some, but not sufficient, detail for the reviewer to understand how the requested CoC funding would be used. The budget mostly aligns with other portions of the project application. Based on the information in the budget spreadsheet, it is unclear how well-developed the PSH project is. It is also not fully clear how the requested CoC funding would allow the project to be adequately staffed or resourced.</p> <p>0 - 7: The information given in the spreadsheet is significantly lacking in providing the reviewer a full understanding of the project’s staffing structure, and sources and use of funds committed to the project. <u>Tab C (Total Project Budget) and Tab E (Other Sources of Revenue & Cash Match) do not indicate any other sources of</u></p> 	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
	<p><i>funding, besides the CoC funding requested, to support the supportive services portion of the project.</i> Tab D (CoC Funding Request) provides very little detail for the reviewer to understand how the requested CoC funding would be used. There is very little alignment with other portions of the project application. Based on the information in the budget spreadsheet, there is a great deal of unclarity and uncertainty in how the project has been developed. Doubts that the CoC funding requested would allow the project to be adequately staffed or resourced.</p> <p><u>Comments</u></p>	
Budget Spreadsheet and Attachments #9	<p><u>Match (3 maximum)</u> Suggested Scoring Scale: <i>Note: Match documentation was not a required attachment, but additional pts given if included</i></p> <ul style="list-style-type: none"> • 3: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) clearly state the sources and amounts of match for this project. In tab F, the “Total Match Identified for the CoC Program” is equal to, or greater than, the total match required for the funding request. Written match documentation <i>included</i> with application for <i>all</i> matching sources. • 2: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) clearly state the sources and amounts of match for this project. In tab F, the “Total Match Identified for the CoC Program” is equal to, or greater than, the total match required for the funding request. Written match documentation may or may not be included. • 0-1: In the PSH Budget spreadsheet in tabs E (Other Revenue and Cash Match) and F (In-Kind and Match Summary) are not fully completed and/or the amount of match identified is less than the amount required. No match documentation provided. <p><u>Comments</u></p>	

Audit and Monitoring Report Review		
Attachment #1	<p><u>Review of Agency Financial Audit (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year in the agency’s financial audit (not the A-133 audit).</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with CoC Grant (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with CoC grants.</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with Other Federal Grants (besides CoC grants) (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit</p>	

	findings from prior audit year associated with Federal grants <i>other than</i> CoC grants.	
Attachment #2 (if applicable)	<u>Review of HUD CoC Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the CoC program monitoring report for which no Corrective Action Plan was submitted by HUD’s deadlines, or Correction Action Plan submitted did not meet HUD’s approval.	
Attachment #3 (if applicable)	<u>Review of City of Detroit Homeless Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the City of Detroit Homeless program monitoring report for which no Corrective Action Plan was submitted by City of Detroit’s deadlines, or Correction Action Plan submitted did not meet City of Detroit’s approval.	

ADDITIONAL REVIEWER NOTES

Scoring Sheet for New RRH Projects

Applicant Agency: _____

Reviewer Name: _____

Instructions:

After reviewing the section of the application, give a score. A range of suggested points is given for each component. Reviewers may award points anywhere along the scale. Reviewers may also award half (½) points if they choose.

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY		
Reference Application Question	Scoring Component	Score
1. 2. 3.	<p><u>Applicant Experience & Capacity (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 points should be awarded if applicant meets all the following: <ul style="list-style-type: none"> ○ A clear description is provided of the applicant and any subrecipients' experience providing the services being proposed in the application (question 1) ○ Demonstration of strong organizational and management structure for applicant and subrecipient (question 2) ○ If subrecipients are identified (question 3), role of each entity is clearly described • 2 – 4: Points in this range should be awarded if the above items (that apply) are not fully or clearly met • 0 – 1: Points in this range should be awarded if very few of the above items (that apply) are met <p><u>Comments</u></p>	
4.	<p><u>Leveraging Experience (2 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: Applicant and sub-recipient clearly demonstrate experience leveraging other resources • 1: Some, but not a lot, of experience leveraging other resources • 0: Applicant states no experience leveraging other funds <p><u>Comments</u></p>	
5.	<p><u>Capacity to Receive New CoC Funding (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 – 7: Response given clearly indicates the agency has the administrative and staffing capacity to take on additional CoC funding. The response describes how the agency will either bring on additional staff to manage the additional funding, or how current staff will be able to absorb the additional work. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2 – 4: Response given does not clearly communicate that the agency has the administrative or staffing capacity to take on new funding, and/or the response given does not clearly communicate how agency capacity will be increased to take on additional funding. • 0 – 1: Overall, there are significant concerns about the agency’s capacity to expand its project and take on additional CoC funding. <p><u>Comments</u></p>	
6.	<p><u>Experience Ramping Up New Projects (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response clearly describes the most recent experience the agency has had ramping up new or expanded programming (note: response could have described a non-homeless program, if that was the most recent project the agency had to ramp up). The response articulates what challenges, if any, the agency experienced during that project’s ramp-up and steps the agency will take to prevent similar challenges if it receives the requested expansion funding. • 2 -3: Response does not clearly describe experience ramping up a project or it is not clear how agency would avoid the same challenges in ramping up this project as it has experienced in the past. • 0 – 1: No clear indication agency has any experience ramping up projects or would be able to successfully ramp up if it received the requested expansion funding. <p><u>Comments</u></p>	
7A 7B 7C 7D 8	<p><u>Staff Training & Development (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 -7: Applicant demonstrates a comprehensive and robust training plan for staff upon their initial hire and on an annual basis. <i>The majority of the training topics</i> in questions 7A – 7C selected as being either required or optional, either at initial hire and/or annually. The response to question 8 provides further details on how the agency ensures staff have the tools and skills needed to provide quality care and services. • 2 – 4: The responses given in questions 7A – 7C and 8 are adequate, but somewhat lacking. <i>Only about half of the training topics</i> in questions 7A – 7C are selected as being either required or optional. The response given in question 8 provides some, but not a lot, of additional information on how staff are trained. • 0 – 1: The responses given in questions 7A – 7C and 8 are significantly lacking. There is little evidence that the agency ensures staff receive appropriate training at either initial hire or annually thereafter. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
9	<p><u>Recruitment and Retention of People of Color (4 maximum)</u> Suggested scoring scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant clearly describes the agency’s strategy to recruit and retain people of color within various levels in the agency. The response indicates the agency has an intentional strategy to ensure agency staff and board are reflective of the demographics of the people the agency serves. • 1 – 2: The response given indicates the agency has some, but not a robust, strategy of recruiting and retaining people of color within various levels in the agency. The applicant references how it intends to ensure staff and board composition are reflective of the people served, but there does not seem to be a clear strategy to ensure this. • 0: Response is significantly lacking; no evidence given that the agency has made any attempts to recruit or retain people of color within the agency or to ensure staff/board demographics reflect the people served. <p><u>Comments</u></p>	
18.	<p><u>HMIS Experience and Plan (4 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4: Response indicates agency has extensive experience with HMIS or other client-level data reporting systems. The response indicates the agency has a clear plan for ensuring timeline data entry and reporting, and a clear plan for monitoring project performance and data quality. • 2 -3: Response indicates agency has some, but not extensive, experience with HMIS or other client-level data reporting systems. The plan for ensuring timely data entry or monitoring project performance and data quality is not very clear and/or detailed. • 0-1: The response does not indicate the agency has much, if any, experience with HMIS or other client-level data reporting. Plan for ensuring timely data entry and monitoring project performance and data quality was lacking. <p><u>Comments</u></p>	
19.	<p><u>Past Housing Outcomes (8 maximum)</u> <i>Outcome: Assisting tenants to remain stably housed or move to other permanent housing</i> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7- 8: Provides clear description of past successes in keeping people stably housed; data provided is that at least 90% of persons met this outcome. OR If the agency is 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p>newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides a clear and detailed description that demonstrates the agency has been successful in the past with helping people obtain/retain permanent housing.</p> <ul style="list-style-type: none"> • 5- 6: Provides some description of past successes; data provided is that between 85% – 89% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides some description of how the agency has been successful in the past with helping people obtain/retain permanent housing, but this description could have been stronger. • 3-4: Description of past successes could have been stronger; data provided is that between 80%– 84% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides very little description of how the agency has been successful in the past with helping people obtain/retain permanent housing. • 1 - 2: Very little description given of past successes; data provided is that between 75 – 79% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response does not give any indication that the agency has had past success with helping people obtain/retain permanent housing. • 0: Regardless of description given, 0 points should be given if data provided is that fewer than 75% of persons met this outcome. No narrative description given for how the agency has had past success in this area. <p><u>Comments</u></p>	
20.	<p><u>Past Income/Employment Outcomes (9 maximum)</u> <i>Outcome: Assisting tenants with increasing income and employment</i> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 7- 9: Provides clear description of past successes in helping people increase their income (any cash income - either employment or benefits); data provided is that at least 20% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides a clear and detailed description that demonstrates the agency has been successful in the past with helping people obtain employment or income. • 4- 6: Provides some description of past successes in helping people increase their income (any cash income - either employment or benefits); data provided is that between 15 - 19% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides some description of how the agency has been 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p>successful in the past with helping people obtain employment or income, but this description could have been stronger.</p> <ul style="list-style-type: none"> 1-3: Description of past successes could have been stronger; data provided is that between 10 - 14% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response does not give any indication that the agency has had past success with helping people obtain employment or income. 0: Regardless of description given, 0 points should be given if data provided is that fewer than 9% of persons met this outcome. No narrative description given for how the agency has had past success in this area. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
22.	<p><u>Project Description (10 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> 8 -10: Response addresses each sub-part in question 22 (a-f) in a clear, concise, yet comprehensive manner; entire scope of the project is addressed; response is consistent with other parts of the application. 4 - 7: Response could have been clearer; some of the sub-parts in question 22 (a-f) not fully addressed; some responses seem contradictory with other parts of the application. 0 - 3: Response is lacking in clarity and description; some of the sub-parts of question 22 (a-f) not addressed at all; no consistency with the rest of the application. <p><u>Comments</u></p>	
23.	<p><u>Service Model Description (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> 7 - 8: Response addresses each sub-part in question 23 (a-e) in a clear, concise, yet comprehensive manner, and the following are included in the response: <ul style="list-style-type: none"> A clear description of the different positions and roles of the staff team (part a) The frequency and intensity of services, and the extent that those services are provided in-person (part b) Supportive services or on-call crisis staff are available outside of typical business hours (part c) The agency has a clear process for tracking and facilitating referrals and for 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>providing transportation as needed (part d)</p> <ul style="list-style-type: none"> ○ The agency has a clear plan for providing staff training (part e). <ul style="list-style-type: none"> ● 4 – 6: The response given meets most, but not all, of the points given in parts a - e as described above. ● 1 – 3: The response given meets few of the points given in parts a – e as described above. ● 0: Response is significantly lacking in describing the service model to be used. <p><u>Comments</u></p>	
29.	<p><u>Peer Supports (2 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> ● 2: Applicant clearly demonstrates that peer support specialists are fully integrated into their service delivery model. Response clearly describes how peer support specialists are part of the service team to enhance supports and services to clients. Applicant clearly demonstrates that peer support specialists are provided adequate, on-going training and receive regular supervision and support on the job. ● 1: Description of how peer support specialists are incorporated into the service delivery model could have been stronger. Description of peer support specialists training and supervision was lacking. ● 0: No evidence that applicant has incorporated the use of peer support specialists in the delivery of services. <p><u>Comments</u></p>	
30. 30A.	<p><u>Project Timeline (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> ● 4 -5: Applicant provides a clear description of how the project will be ramped up, including how costs incurred during the ramp up phase will be covered if they cannot be covered by the CoC grant. The estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. ● 2 -3: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work could have been clearer. It is not entirely clear that the agency will be able to cover costs during the ramp-up phase with non-CoC funds. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>than 3 months/90 days after the execution of the grant agreement.</p> <ul style="list-style-type: none"> • 0 -1: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work was significantly lacking in detail and clarity. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is greater than 3 months/90 days after the execution of the grant agreement. <p><u>Comments</u></p>	
31.	<p><u>Relationships with Landlords (15 maximum)</u></p> <p>Suggested scoring scale:</p> <ul style="list-style-type: none"> • 11 – 15: Response clearly demonstrates the applicant has successful experience working with landlords in recruiting their participation to make units available to clients. Response also clearly describes how the applicant successfully ensures on-going, positive relationships and communications with landlords are maintained. Applicant stated they had at least one landlord relationship-building event in 2022. • 6 – 10: Response could have been stronger. It is not entirely clear how landlords are recruited to make their units available to clients. The applicant’s ability to maintain on-going, positive relationships and communications with the landlords is not clearly described and/or does not demonstrate that applicant has successful experience in this area. It was not clear whether the applicant had any landlord relationship-building event in 2022. • 0 – 5: Response was significantly lacking. Little demonstration of past successful experience in working with landlords. <p><u>Comments</u></p>	
33.	<p><u>Obtaining and Maintaining Permanent Housing (8 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 6– 8: Applicant provides strong, clear, detailed, and logical descriptions to the specific items asked in the question and addresses how participants will be assisted to obtain and maintain permanent housing. Applicant clearly describes how they will identify and address barriers to housing, how client choice will be incorporated into the housing search process, and how landlords will be engaged. • 3 –5: Applicant provides a response to each question, however, some or all of the responses are lacking in detail, clarity, and/or logic. It is not clear the extent to which the applicant has experience providing services that assist clients with accessing/ maintaining permanent housing. Any description of barriers clients may be facing is lacking. • 0 – 2: Responses to questions are significantly lacking. There is little to no 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>evidence that the applicant has experience providing services that assist clients with accessing or maintaining permanent housing. Little to no description of barriers faced by clients.</p> <p><u>Comments</u></p>	
34.	<p><u>Increasing Employment/Income (7 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5 – 7: Applicant provides strong, clear, specific description of how they assist clients to increase their employment and/or other income (including SSI/SSDI). It is clear from the response the applicant has experience providing services assisting clients with increasing income. • 2 –4: Description given of how clients are assisted to increase employment/income could have been stronger. It is not clear the extent to which the applicant has experience providing services assisting clients with increasing income. • 0 - 1: No evidence the applicant has experience assisting clients with increasing employment/income. <p><u>Comments</u></p>	
35.	<p><u>Enrolling Clients in Medicaid and Linking to Other Mainstream Resources (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Applicant clearly describes specific activities that are in place to ensure clients are enrolled in Medicaid and accessing mainstream resources. Also provides a strong description of how clients are assisted in navigating the health care system. • 1-2: Description of how clients will be enrolled in Medicaid or access mainstream resources was not clearly described and/or lacked specificity. Description of how clients are assisted in navigating the health care system could have been stronger. • 0: Response provided little information on a plan or process to assist clients with enrolling in Medicaid or accessing mainstream resources, or navigating the health care system. <p><u>Comments</u></p>	
37.	<p><u>Client to Case Manager Ratio (5 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5: Caseloads do not exceed 1:25. Staff either have no other clients on their caseloads, or if they do, those clients are also in a RRH program (question 37b). 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 3: Caseloads do not exceed 1:25. If staff from this project have other clients on their caseloads, those clients are in a program other than RRH (question 37b). • 0: Caseloads are greater than 1:25, regardless of the response given in question 37b. <p><u>Comments</u></p>	
<p>45 Attach. #7</p>	<p><u>Leveraging Healthcare Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded healthcare resources being leveraged to this project. This amount is 50% or more of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 1 – 2: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is less than 25% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). • 0: The applicant does not demonstrate it is leveraging any non-CoC funded healthcare resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #7. <p><u>Comments</u></p>	
<p>46. Attach. #8</p>	<p><u>Leveraging Housing Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded housing resources being leveraged to this project. This amount is 50% or more of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). • 3 – 4: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding units include in this project application. Applicant provides documentation of this leveraging (attachment #8). 	

Application Section B: Project Description		
Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> 1 – 2: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is less than 25% of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). 0: The applicant does not demonstrate it is leveraging any non-CoC funded housing resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #8. <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
47. Attach. #4	<p><u>Housing First (10 maximum)</u></p> <p>The responses to the referenced application questions and attachments should be reviewed for the extent to which they address Housing First, including references to the following:</p> <ul style="list-style-type: none"> Client agreement to participate in services is not required for housing Agency describes how it engages with clients who are resistant to receiving services. Agency describes how it engages with clients who are non-compliant with medication or treatment and/or have behavioral concerns to assist the client with maintaining their housing. Agency has an eviction prevention policy that clearly demonstrates attempts are made to prevent evictions whenever possible. A distinction should be made between preventing evictions and preventing program terminations. (Attachment #4) <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> 8 -10: Applicant provides a strong description of how Housing First is implemented; all, or almost all, of the points addressed and point to the agency’s experience in providing housing with a Housing First approach. The eviction prevention policy attachment provides additional evidence the agency embraces and practices Housing First and takes all steps possible to keep clients housed. 4 - 7: Description of how agency implements Housing First could have been stronger; not clear applicant has fully incorporated a Housing First model within its service delivery; not all of the points above are referenced. The eviction prevention policy attachment does not clearly support the narrative responses. 0 - 3: No clear evidence applicant understands or has incorporated Housing First within its service delivery model. No eviction prevention policy attachment, or the one that is attached does not support narrative responses. 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
48. Attachment #5	<p><u>Termination Process (5 maximum)</u></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 48 given makes it clear the agency terminates clients from the program only in the most extreme cases, that all attempts are made to prevent termination, and there are clear steps to prevent termination, including communication to the client. The attached policy (#5) supports the response given. • 2-3: From the response given, it is not entirely clear that termination would occur only in the most extreme cases. It seems the agency may make some attempts to prevent termination, but those attempts do not seem to be as comprehensive as they could be. It is not clearly spelled out how the client will be informed of pending termination or given a chance to prevent termination. If a policy is attached (#5), it supports the response given. • 0 - 1: Overall, the response to question 48 was lacking. There is no clear evidence that the agency will try to prevent termination. No policy provided (#5). <p><u>Comments</u></p>	
49. Attachment #6	<p><u>Grievance Process (5 maximum)</u></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 49 clearly describes how attempts to mediate and the resolve the concerns are handled. It is clearly described how an individual may submit a grievance (or complaint) against the agency. The process is clearly described to the individual, is posted publicly, and grievances may be submitted anonymously. The response also states that the agency has a specific staff role to handle grievances in an unbiased and neutral manner. Response discusses how the agency prevents retaliation against those who submit a grievance. The attached policy (#6) supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 2-3: The response to question 49 could have been clearer. It is not clear how the process for submitting a grievance (or complaint) against the agency is communicated to clients, although it seems the agency does allow for grievances to be submitted anonymously. While there is not specific staff role identified to handle grievances, the response does describe how grievances are reviewed in an unbiased and neutral manner. It is not clear if the agency has a process to prevent retaliation against those who submit a grievance. If a policy is attached (#6), it supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 0 - 1: Overall, the response to question 9 was lacking. There is no description given on how the grievance process is communicated to clients. It does not appear the agency has a way to review grievances in an unbiased and neutral manner that 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	prevents retaliation. No policy provided (#6) OR the policy submitted was only the Detroit CoC's grievance process, and not specific to the agency. <u>Comments</u>	
50.	<p><u>Meaningful Participation of Persons with Lived Experience (6 maximum)</u></p> <p>Suggested scoring scale:</p> <ul style="list-style-type: none"> • 5 – 6: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2: Very little evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 0: No clear evidence that agency incorporates PWLE <p><u>Comments</u></p>	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
Budget Spreadsheet	<p><u>Budget (17 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 14 -17: All tabs in the budget spreadsheet are completed correctly. Budget request is clear and logical given the overall application; quantity descriptions given clearly identify what is included in the request, including any FTE requests. The applicant demonstrates that there are other sources of funding committed to the project (as indicated in the budget charts or elsewhere in the application). The budget clearly demonstrates how the project will be able to achieve a 1:25 case manager to client ratio. • 10-13: All tabs in the budget spreadsheet are completed correctly. Budget request is clear and logical given the overall application; quantity descriptions given clearly identify what is included in the request, including any FTE requests. Other sources of funding are only expected, not yet committed to the project (as indicated in the budget charts or elsewhere in the application). There are some questions how the budget will allow the project to achieve a 1:25 case manager to client ratio. • 6-9: Budget spreadsheet may be completed correctly, but the budget is lacking in logic and connection to the overall application. Details in the “cost description” in the budget charts is lacking. Other funding sources may or may not be committed to the project. Little clarity on how the budget will allow the project to achieve a 1:25 case manager to client ratio. 	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 0-5: Significant deficiencies or unclarity questions about the requested budget. <p><u>Comments</u></p>	
Budget Spreadsheet and Attachments #9	<p><u>Match (3 maximum)</u> Suggested Scoring Scale: Note: Match documentation was not a required attachment, but additional pts given if included</p> <ul style="list-style-type: none"> • 3: In the Budget spreadsheet, tab C (Match) clearly states the sources and amounts of match for this project. The total amount of match in Tab C is equal to, or greater than, the total match required for the funding request. Written match documentation included with application for <u>all</u> matching sources. • 2: In the Budget spreadsheet, tab C (Match) clearly states the sources and amounts of match for this project. The total amount of match in Tab C is equal to, or greater than, the total match required for the funding request. Written match documentation may or may not be included. • 0-1: In the Budget spreadsheet, tab C (Match) is either fully completed and/or the amount of match identified is less than the amount required. No match documentation provided. <p><u>Comments</u></p>	

Audit and Monitoring Report Review		
Attachment #1	<p><u>Review of Agency Financial Audit (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year in the agency’s financial audit (not the A-133 audit).</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with CoC Grant (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with CoC grants.</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with Other Federal Grants (besides CoC grants) (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with Federal grants <i>other than</i> CoC grants.</p>	
Attachment #2 (if applicable)	<p><u>Review of HUD CoC Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the CoC program monitoring report for which no Corrective Action Plan was submitted by HUD’s deadlines, or Correction Action Plan submitted did not meet HUD’s approval.</p>	
Attachment #3 (if applicable)	<p><u>Review of City of Detroit Homeless Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the City of Detroit</p>	

	Homeless program monitoring report for which no Corrective Action Plan was submitted by City of Detroit's deadlines, or Correction Action Plan submitted did not meet City of Detroit's approval.	
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ADDITIONAL REVIEWER NOTES

Domestic Violence Scoring Sheet for New Project-Based TH-RRH Projects

Applicant Agency: _____

Reviewer Name: _____

Instructions:

After reviewing the section of the application, give a score. A range of suggested points is given for each component. Reviewers may award points anywhere along the scale. Reviewers may also award half (½) points if they choose.

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY		
Reference Application Question	Scoring Component	Score
1. 2. 3.	<p><u>Applicant Experience & Capacity (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 points should be awarded if applicant meets all the following: <ul style="list-style-type: none"> ○ A clear description is provided of the applicant and any subrecipients' experience providing the services being proposed in the application (question 1) ○ Demonstration of strong organizational and management structure for applicant and subrecipient (question 2) ○ If subrecipients are identified (question 3), role of each entity is clearly described • 2 – 4: Points in this range should be awarded if the above items (that apply) are not fully or clearly met • 0 – 1: Points in this range should be awarded if very few of the above items (that apply) are met <p><u>Comments</u></p>	
4.	<p><u>Leveraging Experience (2 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: Applicant and sub-recipient clearly demonstrate experience leveraging other resources • 1: Some, but not a lot, of experience leveraging other resources • 0: Applicant states no experience leveraging other funds <p><u>Comments</u></p>	
5.	<p><u>Capacity to Receive New CoC Funding (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 – 7: Response given clearly indicates the agency has the administrative and staffing capacity to take on additional CoC funding. The response describes how the agency will either bring on additional staff to manage the additional funding, or how current staff will be able to absorb the additional work. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2 – 4: Response given does not clearly communicate that the agency has the administrative or staffing capacity to take on new funding, and/or the response given does not clearly communicate how agency capacity will be increased to take on additional funding. • 0 – 1: Overall, there are significant concerns about the agency’s capacity to expand its project and take on additional CoC funding. <p><u>Comments</u></p>	
6.	<p><u>Experience Ramping Up New Projects (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response clearly describes the most recent experience the agency has had ramping up new or expanded programming (note: response could have described a non-homeless program, if that was the most recent project the agency had to ramp up). The response articulates what challenges, if any, the agency experienced during that project’s ramp-up and steps the agency will take to prevent similar challenges if it receives the requested expansion funding. • 2 -3: Response does not clearly describe experience ramping up a project or it is not clear how agency would avoid the same challenges in ramping up this project as it has experienced in the past. • 0 – 1: No clear indication agency has any experience ramping up projects or would be able to successfully ramp up if it received the requested expansion funding. <p><u>Comments</u></p>	
7A 7B 7C 7D 8	<p><u>Staff Training & Development (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 -7: Applicant demonstrates a comprehensive and robust training plan for staff upon their initial hire and on an annual basis. <i>The majority of the training topics</i> in questions 7A – 7C selected as being either required or optional, either at initial hire and/or annually. The response to question 8 provides further details on how the agency ensures staff have the tools and skills needed to provide quality care and services. • 2 – 4: The responses given in questions 7A – 7C and 8 are adequate, but somewhat lacking. <i>Only about half of the training topics</i> in questions 7A – 7C are selected as being either required or optional. The response given in question 8 provides some, but not a lot, of additional information on how staff are trained. • 0 – 1: The responses given in questions 7A – 7C and 8 are significantly lacking. There is little evidence that the agency ensures staff receive appropriate training 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p align="center">at either initial hire or annually thereafter.</p> <p><u>Comments</u></p>	
9	<p><u>Recruitment and Retention of People of Color (4 maximum)</u></p> <p>Suggested scoring scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant clearly describes the agency’s strategy to recruit and retain people of color within various levels in the agency. The response indicates the agency has an intentional strategy to ensure agency staff and board are reflective of the demographics of the people the agency serves. • 1 – 2: The response given indicates the agency has some, but not a robust, strategy of recruiting and retaining people of color within various levels in the agency. The applicant references how it intends to ensure staff and board composition are reflective of the people served, but there does not seem to be a clear strategy to ensure this. • 0: Response is significantly lacking; no evidence given that the agency has made any attempts to recruit or retain people of color within the agency or to ensure staff/board demographics reflect the people served. <p><u>Comments</u></p>	
<p align="center"><i>COMPARABLE DATABASE EXPERIENCE: Applicants should have responded to either question 16 or question 17 depending on their experience with a comparable database.</i></p>		
16.	<p><u>Experience with a Comparable Database (3 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: The responses given to all the subparts of this question clearly demonstrate that the agency has at least 2 years’ experience with a Comparable Database. The response clearly gives which software is used, the funding used to support the database, and how the agency will incorporate this new programming into that database. From the response given, it is clear the agency has the experience and capacity to use a Comparable Database and will be able to integrate this new program into their existing database with little delay. • 2: From the responses given to all the subparts of this question, it does seem the agency has experience using a comparable Database, but that experience is less than 2 years. Additionally, the responses given to this question do not clearly or thoroughly answer the question given. It is not clear that the agency has the experience or capacity to integrate this new programming into their existing Comparable Database. • 0 – 1: Although the agency may indicate it has a Comparable Database, there is little evidence from the response given that they have the experience or capacity to integrate new programming into that database. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
17.	<p><u>No Experience with Comparable Database (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: The responses given to all the subparts of this question demonstrate that the applicant agency has a clear plan for how it will become compliant with establishing a Comparable Database. The response clearly describes how the agency will ensure the Comparable Database is compliant with HUD’s standards, how it will be supported financially, and the timeline for its implementation and staff training. • 2: The responses given to the subparts of this question could have been more detailed. From the responses given, it seems the agency does have some plan on how it will become compliant with Comparable Database requirements, but that plan could have been more detailed. • 0 – 1: Overall, the responses given provide little information or detail on how the agency will become compliant with Comparable Database requirements. <p><u>Comments</u></p>	
18.	<p><u>HMIS Experience and Plan (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Response indicates agency has extensive experience with HMIS or other client-level data reporting systems. The response indicates the agency has a clear plan for ensuring timeline data entry and reporting, and a clear plan for monitoring project performance and data quality. • 2 Response indicates agency has some, but not extensive, experience with HMIS or other client-level data reporting systems. The plan for ensuring timely data entry or monitoring project performance and data quality is not very clear and/or detailed. • 0-1: The response does not indicate the agency has much, if any, experience with HMIS or other client-level data reporting. Plan for ensuring timely data entry and monitoring project performance and data quality was lacking. <p><u>Comments</u></p>	
19.	<p><u>Past Housing Outcomes (8 maximum)</u> <i>Outcome: Assisting tenants to remain stably housed or move to other permanent housing</i> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7- 8: Provides clear description of past successes in keeping people stably housed; data provided is that at least 90% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p>successes, the narrative response provides a clear and detailed description that demonstrates the agency has been successful in the past with helping people obtain/retain permanent housing.</p> <ul style="list-style-type: none"> • 5- 6: Provides some description of past successes; data provided is that between 85% – 89% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides some description of how the agency has been successful in the past with helping people obtain/retain permanent housing, but this description could have been stronger. • 3-4: Description of past successes could have been stronger; data provided is that between 80%– 84% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides very little description of how the agency has been successful in the past with helping people obtain/retain permanent housing. • 1 - 2: Very little description given of past successes; data provided is that between 75 – 79% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response does not give any indication that the agency has had past success with helping people obtain/retain permanent housing. • 0: Regardless of description given, 0 points should be given if data provided is that fewer than 75% of persons met this outcome. No narrative description given for how the agency has had past success in this area. <p><u>Comments</u></p>	
20.	<p><u>Past Income/Employment Outcomes (9 maximum)</u> <i>Outcome: Assisting tenants with increasing income and employment</i> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 7- 9: Provides clear description of past successes in helping people increase their income (any cash income - either employment or benefits); data provided is that at least 20% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides a clear and detailed description that demonstrates the agency has been successful in the past with helping people obtain employment or income. • 4- 6: Provides some description of past successes in helping people increase their income (any cash income - either employment or benefits); data provided is that between 15 - 19% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response provides some description of how the agency has been successful in the past with helping people obtain employment or income, but this 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p>description could have been stronger.</p> <ul style="list-style-type: none"> • 1-3: Description of past successes could have been stronger; data provided is that between 10 - 14% of persons met this outcome. OR If the agency is newer to this work, and/or does not have outcome data to demonstrate past successes, the narrative response does not give any indication that the agency has had past success with helping people obtain employment or income. • 0: Regardless of description given, 0 points should be given if data provided is that fewer than 9% of persons met this outcome. No narrative description given for how the agency has had past success in this area. <p><u>Comments</u></p>	
21.	<p><u>Experience Service People Fleeing Domestic Violence (5 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 4-5: Applicant provides a strong and clear description of the agency’s experience serving people fleeing Domestic Violence. The response clearly articulates the agency’s experience providing the types of housing and/or services proposed in this application. • 2-3: Applicant’s response on experience providing services to people fleeing Domestic Violence is not a clear as it could have been. Some questions remain about their experience. It is not clear if the agency’s experience is related to the type of housing and/or services being proposed in this application. • 0-1: Very little, if any, clear experience providing housing and/or services to people fleeing Domestic Violence. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
22.	<p><u>Project Description (10 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 8 -10: Response addresses each sub-part in question 22 (a-f) in a clear, concise, yet comprehensive manner; entire scope of the project is addressed; response is consistent with other parts of the application. • 4 - 7: Response could have been clearer; some of the sub-parts in question 22 (a-f) not fully addressed; some responses seem contradictory with other parts of the application. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 0 - 3: Response is lacking in clarity and description; some of the sub-parts of question 22 (a-f) not addressed at all; no consistency with the rest of the application. <p><u>Comments</u></p>	
23.	<p><u>Service Model Description (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7 - 8: Response addresses each sub-part in question 23 (a-e) in a clear, concise, yet comprehensive manner, and the following are included in the response: <ul style="list-style-type: none"> ○ A clear description of the different positions and roles of the staff team (part a) ○ The frequency and intensity of services, and the extent that those services are provided in-person (part b) ○ Supportive services or on-call crisis staff are available outside of typical business hours (part c) ○ The agency has a clear process for tracking and facilitating referrals and for providing transportation as needed (part d) ○ The agency has a clear plan for providing staff training (part e). • 4 – 6: The response given meets most, but not all, of the points given in parts a - e as described above. • 1 – 3: The response given meets few of the points given in parts a – e as described above. • 0: Response is significantly lacking in describing the service model to be used. <p><u>Comments</u></p>	
29.	<p><u>Peer Supports (2 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 2: Applicant clearly demonstrates that peer support specialists are fully integrated into their service delivery model. Response clearly describes how peer support specialists are part of the service team to enhance supports and services to clients. Applicant clearly demonstrates that peer support specialists are provided adequate, on-going training and receive regular supervision and support on the job. • 1: Description of how peer support specialists are incorporated into the service delivery model could have been stronger. Description of peer support specialists training and supervision was lacking. • 0: No evidence that applicant has incorporated the use of peer support specialists in the delivery of services. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
30. 30A.	<p><u>Project Timeline (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Applicant provides a clear description of how the project will be ramped up, including how costs incurred during the ramp up phase will be covered if they cannot be covered by the CoC grant. The estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 2 -3: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work could have been clearer. It is not entirely clear that the agency will be able to cover costs during the ramp-up phase with non-CoC funds. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 0 -1: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work was significantly lacking in detail and clarity. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is greater than 3 months/90 days after the execution of the grant agreement. <p><u>Comments</u></p>	
31.	<p><u>Relationships with Landlords (8 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 6 – 8: Response clearly demonstrates the applicant has successful experience working with landlords in recruiting their participation to make units available to clients. Response also clearly describes how the applicant successfully ensures on-going, positive relationships and communications with landlords are maintained. Applicant stated they had at least one landlord relationship-building event in 2022. • 3 – 5: Response could have been stronger. It is not entirely clear how landlords are recruited to make their units available to clients. The applicant’s ability to maintain on-going, positive relationships and communications with the landlords is not clearly described and/or does not demonstrate that applicant has successful experience in this area. It was not clear whether the applicant had any landlord relationship-building event in 2022. • 0 – 2: Response was significantly lacking. Little demonstration of past successful experience in working with landlords. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
<p>32. Attachments #10 - #12 (as applicable)</p>	<p><u>Site Description (7 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 5-7: The responses to parts a – g demonstrate the proposed site seems to be suitable as PSH; a clear plan is given to make provision for any programming/clients at the site currently (if applicable); the description of the units clearly state residents will have private sleeping quarters, private bathing facilities, and a place to prepare and store food. A timeline and funding for rehab work (if needed) is clearly described and funding identified appears to be adequate for work to be done. Attachment #10 demonstrates applicant has site control via a deed or long-term lease agreement. Applicant demonstrates commitments from other funding sources (attachments #11 and #12). • 2-4: The responses given parts a – g are answered, but may be a bit lacking in completeness or clarity. If rehab work is needed, the timeline for completing the work and/or funding for completion does not clearly demonstrate work can be completed within a reasonable amount of time. Attachment #10 demonstrates applicant has site control via a deed or long-term lease agreement. Few or no other sources of funding commit to the project are identified (attachments #11 and #12). • 0 - 1: The responses given to parts a – g do not demonstrate the proposed site would be appropriate for PSH; there is little to no description on provision to be made for programming/clients at the site currently (if applicable); the description of the units does not provide the specifics sought in part g. It is not clear if agency has site control (attachment #10). If rehab work is needed, insufficient funds are identified and/or timeline for completion is unclear. No other sources of funding commit to the project are identified (attachments #11 and #12). <p><u>Comments</u></p>	
<p>33.</p>	<p><u>Obtaining and Maintaining Permanent Housing (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 6– 8: Applicant provides strong, clear, detailed, and logical descriptions to the specific items asked in the question and addresses how participants will be assisted to obtain and maintain permanent housing. Applicant clearly describes how they will identify and address barriers to housing, how client choice will be incorporated into the housing search process, and how landlords will be engaged. • 3–5: Applicant provides a response to each question, however, some or all of the responses are lacking in detail, clarity, and/or logic. It is not clear the extent to which the applicant has experience providing services that assist clients with accessing/ maintaining permanent housing. Any description of barriers clients may be facing is lacking. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 0 – 2: Responses to questions are significantly lacking. There is little to no evidence that the applicant has experience providing services that assist clients with accessing or maintaining permanent housing. Little to no description of barriers faced by clients. <p><u>Comments</u></p>	
34.	<p><u>Increasing Employment/Income (6 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5 – 6: Applicant provides strong, clear, specific description of how they assist clients to increase their employment and/or other income (including SSI/SSDI). It is clear from the response the applicant has experience providing services assisting clients with increasing income. • 2 –4: Description given of how clients are assisted to increase employment/income could have been stronger. It is not clear the extent to which the applicant has experience providing services assisting clients with increasing income. • 0 - 1: No evidence the applicant has experience assisting clients with increasing employment/income. <p><u>Comments</u></p>	
35.	<p><u>Enrolling Clients in Medicaid and Linking to Other Mainstream Resources (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Applicant clearly describes specific activities that are in place to ensure clients are enrolled in Medicaid and accessing mainstream resources. Also provides a strong description of how clients are assisted in navigating the health care system. • 1-2: Description of how clients will be enrolled in Medicaid or access mainstream resources was not clearly described and/or lacked specificity. Description of how clients are assisted in navigating the health care system could have been stronger. • 0: Response provided little information on a plan or process to assist clients with enrolling in Medicaid or accessing mainstream resources, or navigating the health care system. <p><u>Comments</u></p>	
37.	<p><u>Client to Case Manager Ratio (5 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 5: Caseloads do not exceed 1:25. Staff either have no other clients on their 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>caseloads, or if they do, those clients are also in a RRH program (question 37b).</p> <ul style="list-style-type: none"> • 3: Caseloads do not exceed 1:25. If staff from this project have other clients on their caseloads, those clients are in a program other than RRH (question 37b). • 0: Caseloads are greater than 1:25, regardless of the response given in question 37b. <p><u>Comments</u></p>	
42.	<p><u>Increasing Participant Safety (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7 - 8: Response clearly describes multiple strategies for improving safety for Domestic Violence survivors; clearly describes how the project assesses improvements to participant safety; provides at least one concrete, substantive, and current example of what this work looks like that are relevant to the project; demonstrates that working to improve safety for survivors is a key part of the project. • 4-6: Response describes at least one strategy for improving safety for survivors and at least one way that the project assesses improvements to participant safety; provides an example of what this work looks like that may not be concrete, substantive, current or clearly relevant to the project. • 2-3: Response describes at least one strategy for improving safety for survivors, but does not provide concrete or substantive examples of what this work looks like or how the project assesses improvements to participant safety. • 0-1: Response given provides only vague reference to strategies that may or may not be implemented to improve participant safety. From response given, it is not clear applicant has experience in this area. <p><u>Comments</u></p>	
43.	<p><u>Inclusion of Trauma-Informed and Victim Centered Services in Project (8 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> • 6-8: The response clearly describes how the project will incorporate trauma informed and victim-centered care approaches to meet the needs of persons served. They demonstrate an understanding of the impacts of trauma and the principles of trauma informed care. The response is thoughtful and thorough. • 3-5: The response given was not as detailed or clear as it could have been. It seems the agency does have some implementation or plan for implementation of trauma 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>informed and victim-centered care, but it is not clear or descriptive. Their understanding of the impacts of trauma and the principles of trauma informed care seems limited.</p> <ul style="list-style-type: none"> ● 0-2: Little evidence that the agency implements or understands trauma informed or victim-centered care. Or the response has red flags that raise concern about the agency’s model or method of service delivery. <p><u>Comments</u></p>	
<p>45 Attach. #7</p>	<p><u>Leveraging Healthcare Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> ● 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded healthcare resources being leveraged to this project. This amount is 50% or more of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). ● 3 – 4: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). ● 1 – 2: The applicant demonstrates it is leveraging non-CoC funded healthcare resources to this project; the amount leveraged is less than 25% of the amount of CoC funding requested. Applicant provides documentation of this leveraging (attachment #7). ● 0: The applicant does not demonstrate it is leveraging any non-CoC funded healthcare resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #7. <p><u>Comments</u></p>	
<p>46. Attach. #8</p>	<p><u>Leveraging Housing Resources (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> ● 5: Applicant provides a clear response to each part of this question. The response clearly indicates the amount and source of non-CoC funded housing resources being leveraged to this project. This amount is 50% or more of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). ● 3 – 4: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is 25% – 49% of the amount of CoC funding units include in this project application. Applicant provides 	

Application Section B: Project Description		
Reference Application Question	Scoring Component	Score
	<p>documentation of this leveraging (attachment #8).</p> <ul style="list-style-type: none"> • 1 – 2: The applicant demonstrates it is leveraging non-CoC funded housing resources to this project; the amount leveraged is less than 25% of the amount of CoC funded units included in this project application. Applicant provides documentation of this leveraging (attachment #8). • 0: The applicant does not demonstrate it is leveraging any non-CoC funded housing resources to the project; or, regardless of the percentage of resources claimed to be leveraged, 0 points should be given if that leveraging is not documented via attachment #8. <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
47. Attach. #4	<p><u>Housing First (10 maximum)</u></p> <p>The responses to the referenced application questions and attachments should be reviewed for the extent to which they address Housing First, including references to the following:</p> <ul style="list-style-type: none"> • Client agreement to participate in services is not required for housing • Agency describes how it engages with clients who are resistant to receiving services. • Agency describes how it engages with clients who are non-compliant with medication or treatment and/or have behavioral concerns to assist the client with maintaining their housing. • Agency has an eviction prevention policy that clearly demonstrates attempts are made to prevent evictions whenever possible. A distinction should be made between preventing evictions and preventing program terminations. (Attachment #4) <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 8 -10: Applicant provides a strong description of how Housing First is implemented; all, or almost all, of the points addressed and point to the agency’s experience in providing housing with a Housing First approach. The eviction prevention policy attachment provides additional evidence the agency embraces and practices Housing First and takes all steps possible to keep clients housed. • 4 - 7: Description of how agency implements Housing First could have been stronger; not clear applicant has fully incorporated a Housing First model within its service delivery; not all of the points above are referenced. The eviction prevention policy attachment does not clearly support the narrative responses. • 0 - 3: No clear evidence applicant understands or has incorporated Housing First within its service delivery model. No eviction prevention policy attachment, or the 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>one that is attached does not support narrative responses.</p> <p><u>Comments</u></p>	
48. Attachment #5	<p><u>Termination Process (5 maximum)</u> <u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 48 given makes it clear the agency terminates clients from the program only in the most extreme cases, that all attempts are made to prevent termination, and there are clear steps to prevent termination, including communication to the client. The attached policy (#5) supports the response given. • 2-3: From the response given, it is not entirely clear that termination would occur only in the most extreme cases. It seems the agency may make some attempts to prevent termination, but those attempts do not seem to be as comprehensive as they could be. It is not clearly spelled out how the client will be informed of pending termination or given a chance to prevent termination. If a policy is attached (#5), it supports the response given. • 0 - 1: Overall, the response to question 48 was lacking. There is no clear evidence that the agency will try to prevent termination. No policy provided (#5). <p><u>Comments</u></p>	
49. Attachment #6	<p><u>Grievance Process (5 maximum)</u> <u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 49 clearly describes how attempts to mediate and the resolve the concerns are handled. It is clearly described how an individual may submit a grievance (or complaint) against the agency. The process is clearly described to the individual, is posted publicly, and grievances may be submitted anonymously. The response also states that the agency has a specific staff role to handle grievances in an unbiased and neutral manner. Response discusses how the agency prevents retaliation against those who submit a grievance. The attached policy (#6) supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC's grievance process. • 2-3: The response to question 49 could have been clearer. It is not clear how the process for submitting a grievance (or complaint) against the agency is communicated to clients, although it seems the agency does allow for grievances to be submitted anonymously. While there is not specific staff role identified to handle grievances, the response does describe how grievances are reviewed in an unbiased and neutral manner. It is not clear if the agency has a process to prevent retaliation against those who submit a grievance. If a policy is attached (#6), it supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC's grievance process. • 0 - 1: Overall, the response to question 9 was lacking. There is no description given 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>on how the grievance process is communicated to clients. It does not appear the agency has a way to review grievances in an unbiased and neutral manner that prevents retaliation. No policy provided (#6) OR the policy submitted was only the Detroit CoC's grievance process, and not specific to the agency.</p> <p><u>Comments</u></p>	
50.	<p><u>Meaningful Participation of Persons with Lived Experience (6 maximum)</u></p> <p>Suggested scoring scale:</p> <ul style="list-style-type: none"> • 5 – 6: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2: Very little evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 0: No clear evidence that agency incorporates PWLE <p><u>Comments</u></p>	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
Budget Spreadsheet	<p><u>Budget (10 maximum)</u></p> <p>Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 8 -10: All tabs in the budget spreadsheet are completed correctly. Budget request is clear and logical given the overall application; quantity descriptions given clearly identify what is included in the request, including any FTE requests. The applicant demonstrates that there are other sources of funding committed to the project (as indicated in the budget charts or elsewhere in the application). The budget clearly demonstrates how the project will be able to achieve a 1:25 case manager to client ratio. • 5-7: All tabs in the budget spreadsheet are completed correctly. Budget request is clear and logical given the overall application; quantity descriptions given clearly identify what is included in the request, including any FTE requests. Other sources of funding are only expected, not yet committed to the project (as indicated in the budget charts or elsewhere in the application). There are some questions how the budget will allow the project to achieve a 1:25 case manager to client ratio. • 2-4: Budget spreadsheet may be completed correctly, but the budget is lacking in logic and connection to the overall application. Details in the “cost description” in the budget charts is lacking. Other funding sources may or may not be committed to the project. Little clarity on how the budget will allow the project to achieve a 	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
	<p>1:25 case manager to client ratio.</p> <ul style="list-style-type: none"> • 0-1: Significant deficiencies or unclarity questions about the requested budget. <p><u>Comments</u></p>	
Budget Spreadsheet and Attachments #9	<p>Match (3 maximum) Suggested Scoring Scale: Note: Match documentation was not a required attachment, but additional pts given if included</p> <ul style="list-style-type: none"> • 3: In the Budget spreadsheet, tab C (Match) clearly states the sources and amounts of match for this project. The total amount of match in Tab C is equal to, or greater than, the total match required for the funding request. Written match documentation included with application for all matching sources. • 2: In the Budget spreadsheet, tab C (Match) clearly states the sources and amounts of match for this project. The total amount of match in Tab C is equal to, or greater than, the total match required for the funding request. Written match documentation may or may not be included. • 0-1: In the Budget spreadsheet, tab C (Match) is either fully completed and/or the amount of match identified is less than the amount required. No match documentation provided. <p><u>Comments</u></p>	

Audit and Monitoring Report Review		
Attachment #1	<p>Review of Agency Financial Audit (up to -2 points) Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year in the agency's financial audit (not the A-133 audit).</p>	
Attachment #1 (if applicable)	<p>Review of Agency A-133 Audit: Findings Associated with CoC Grant (up to -2 points) Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with CoC grants.</p>	
Attachment #1 (if applicable)	<p>Review of Agency A-133 Audit: Findings Associated with Other Federal Grants (besides CoC grants) (up to -2 points) Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with Federal grants <i>other than</i> CoC grants.</p>	
Attachment #2 (if applicable)	<p>Review of HUD CoC Program Monitoring (up to -2 points) Up to 2 points may be deducted from the project score for findings in the CoC program monitoring report for which no Corrective Action Plan was submitted by HUD's deadlines, or</p>	

	Correction Action Plan submitted did not meet HUD's approval.	
Attachment #3 (if applicable)	Review of City of Detroit Homeless Program Monitoring (up to -2 points) Up to 2 points may be deducted from the project score for findings in the City of Detroit Homeless program monitoring report for which no Corrective Action Plan was submitted by City of Detroit's deadlines, or Correction Action Plan submitted did not meet City of Detroit's approval.	

ADDITIONAL REVIEWER NOTES

Domestic Violence Scoring Sheet for New CE-SSO Projects

Applicant Agency: _____

Reviewer Name: _____

Instructions:

After reviewing the section of the application, give a score. A range of suggested points is given for each component. Reviewers may award points anywhere along the scale. Reviewers may also award half (½) points if they choose.

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
1. 2. 3.	<p><u>Applicant Experience & Capacity (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 points should be awarded if applicant meets all the following: <ul style="list-style-type: none"> ○ A clear description is provided of the applicant and any subrecipients' experience providing the services being proposed in the application (question 1) ○ Demonstration of strong organizational and management structure for applicant and subrecipient (question 2) ○ If subrecipients are identified (question 3), role of each entity is clearly described • 2 – 4: Points in this range should be awarded if the above items (that apply) are not fully or clearly met • 0 – 1: Points in this range should be awarded if very few of the above items (that apply) are met <p><u>Comments</u></p>	
4.	<p><u>Leveraging Experience (2 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: Applicant and sub-recipient clearly demonstrate experience leveraging other resources • 1: Some, but not a lot, of experience leveraging other resources • 0: Applicant states no experience leveraging other funds <p><u>Comments</u></p>	
5.	<p><u>Capacity to Receive New CoC Funding (5 maximum)</u></p> <p>Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 – 5: Response given clearly indicates the agency has the administrative and staffing capacity to take on additional CoC funding. The response describes how the agency will either bring on additional staff to manage the additional funding, or how current staff will be able to absorb the additional work. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 2 – 3: Response given does not clearly communicate that the agency has the administrative or staffing capacity to take on new funding, and/or the response given does not clearly communicate how agency capacity will be increased to take on additional funding. • 0 – 1: Overall, there are significant concerns about the agency’s capacity to expand its project and take on additional CoC funding. <p><u>Comments</u></p>	
6.	<p><u>Experience Ramping Up New Projects (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Response clearly describes the most recent experience the agency has had ramping up new or expanded programming (note: response could have described a non-homeless program, if that was the most recent project the agency had to ramp up). The response articulates what challenges, if any, the agency experienced during that project’s ramp-up and steps the agency will take to prevent similar challenges if it receives the requested expansion funding. • 2 -3: Response does not clearly describe experience ramping up a project or it is not clear how agency would avoid the same challenges in ramping up this project as it has experienced in the past. • 0 – 1: No clear indication agency has any experience ramping up projects or would be able to successfully ramp up if it received the requested expansion funding. <p><u>Comments</u></p>	
7A 7B 7C 7D 8	<p><u>Staff Training & Development (7 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 5 -7: Applicant demonstrates a comprehensive and robust training plan for staff upon their initial hire and on an annual basis. <i>The majority of the training topics</i> in questions 7A – 7C selected as being either required or optional, either at initial hire and/or annually. The response to question 8 provides further details on how the agency ensures staff have the tools and skills needed to provide quality care and services. • 2 – 4: The responses given in questions 7A – 7C and 8 are adequate, but somewhat lacking. <i>Only about half of the training topics</i> in questions 7A – 7C are selected as being either required or optional. The response given in question 8 provides some, but not a lot, of additional information on how staff are trained. • 0 – 1: The responses given in questions 7A – 7C and 8 are significantly lacking. There is little evidence that the agency ensures staff receive appropriate training 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<p align="center">at either initial hire or annually thereafter.</p> <p><u>Comments</u></p>	
<p>9.</p>	<p><u>Recruitment and Retention of People of Color (4 maximum)</u></p> <p>Suggested scoring scale</p> <ul style="list-style-type: none"> • 3 – 4: Applicant clearly describes the agency’s strategy to recruit and retain people of color within various levels in the agency. The response indicates the agency has an intentional strategy to ensure agency staff and board are reflective of the demographics of the people the agency serves. • 1 – 2: The response given indicates the agency has some, but not a robust, strategy of recruiting and retaining people of color within various levels in the agency. The applicant references how it intends to ensure staff and board composition are reflective of the people served, but there does not seem to be a clear strategy to ensure this. • 0: Response is significantly lacking; no evidence given that the agency has made any attempts to recruit or retain people of color within the agency or to ensure staff/board demographics reflect the people served. <p><u>Comments</u></p>	
<p>10.</p>	<p><u>Experience Coordinating with past/current CAM Implementing Agencies (10 maximum)</u></p> <p><u>Suggested Scoring Scale:</u></p> <ul style="list-style-type: none"> • 8 – 10: Applicant provides a strong and thorough description of how the agency has worked with Southwest Counseling Solutions (SWCS) and/or Community and Home Supports (CHS) in the past, or currently works with them presently, to assist people in accessing permanent housing. From the response given, it is clear the applicant has significant experience working with these two agencies in the Coordinated Entry process. • 4 -7: Applicant provides some evidence in working with Southwest Counseling Solutions (SWCS) and/or Community and Home Supports (CHS) either presently or in the past to assist people in accessing permanent housing. However, from the response given, it does not seem the applicant has a significant level of experience working with these agencies in the Coordinated Entry process. • 0 – 3: The response given provides little evidence that the applicant agency has experience working with Southwest Counseling Solutions (SWCS) and/or Community and Home Supports (CHS) in the Coordinated Entry process. <p><u>Comments</u></p>	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
<p>11. 12. 13.</p>	<p><u>Experience in Area of Request (13 maximum)</u> <i>Note to reviewers: Applicants are to answer questions 11 and/or, 12 and/or, 13 depending on the type of Coordinated Entry activities they are applying to provide. An applicant may have responded “N/A” to any of these questions. The score given should be based on the applicant’s response to all three of the questions.</i></p> <p><u>Suggested Scoring Scale:</u></p> <ul style="list-style-type: none"> • 10 – 13: The applicant provides a clear and strong description of its experience providing the services they are applying for. From the response given, it is clear the applicant has experience providing Access Point and/or Navigation and/or other Coordinated Entry services. • 5 – 9: The description the applicant gives of its experience providing the services proposed was adequate but could have been stronger or more detailed. From the response given, there is evidence the applicant has some, but not extensive, experience providing Access Point and/or Navigation and/or other Coordinated Entry services. • 0 – 4: Applicant provides some evidence of providing the services proposed, but overall the responses given are weak or lack clarity. From the responses given, it is not clear the applicant’s experience providing Access Point and/or Navigation and/or other Coordinated Entry services. <p><u>Comments</u></p>	
<p align="center"><i>COMPARABLE DATABASE EXPERIENCE: Applicants should have responded to either question 16 or question 17 depending on their experience with a comparable database.</i></p>		
<p>16.</p>	<p><u>Experience with a Comparable Database (2 maximum)</u> <u>Suggested Scoring Scale:</u></p> <ul style="list-style-type: none"> • 2: The responses given to all the subparts of this question clearly demonstrate that the agency has at least 2 years’ experience with a Comparable Database. The response clearly gives which software is used, the funding used to support the database, and how the agency will incorporate this new programming into that database. From the response given, it is clear the agency has the experience and capacity to use a Comparable Database and will be able to integrate this new program into their existing database with little delay. • 1: From the responses given to all the subparts of this question, it does seem the agency has experience using a comparable Database, but that experience is less than 2 years. Additionally, the responses given to this question do not clearly or thoroughly answer the question given. It is not clear that the agency has the experience or capacity to integrate this new programming into their existing Comparable Database. 	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 0: Although the agency may indicate it has a Comparable Database, there is little evidence from the response given that they have the experience or capacity to integrate new programming into that database. <p><u>Comments</u></p>	
17.	<p><u>No Experience with Comparable Database (2 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 2: The responses given to all the subparts of this question demonstrate that the applicant agency has a clear plan for how it will become compliant with establishing a Comparable Database. The response clearly describes how the agency will ensure the Comparable Database is compliant with HUD’s standards, how it will be supported financially, and the timeline for its implementation and staff training. • 1: The responses given to the subparts of this question could have been more detailed. From the responses given, it seems the agency does have some plan on how it will become compliant with Comparable Database requirements, but that plan could have been more detailed. • 0: Overall, the responses given provide little information or detail on how the agency will become compliant with Comparable Database requirements. <p><u>Comments</u></p>	
18.	<p><u>HMIS Experience and Plan (3 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 3: Response indicates agency has extensive experience with HMIS or other client-level data reporting systems. The response indicates the agency has a clear plan for ensuring timeline data entry and reporting, and a clear plan for monitoring project performance and data quality. • 2: Response indicates agency has some, but not extensive, experience with HMIS or other client-level data reporting systems. The plan for ensuring timely data entry or monitoring project performance and data quality is not very clear and/or detailed. • 0-1: The response does not indicate the agency has much, if any, experience with HMIS or other client-level data reporting. Plan for ensuring timely data entry and monitoring project performance and data quality was lacking. <p><u>Comments</u></p>	
21.	<p><u>Experience Service People Fleeing Domestic Violence (5 maximum)</u> Suggested Scoring Scale</p>	

Application Section A: OVERALL AGENCY EXPERIENCE AND CAPACITY

Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> • 4-5: Applicant provides a strong and clear description of the agency’s experience serving people fleeing Domestic Violence. The response clearly articulates the agency’s experience providing the types of housing and/or services proposed in this application. • 2-3: Applicant’s response on experience providing services to people fleeing Domestic Violence is not as clear as it could have been. Some questions remain about their experience. It is not clear if the agency’s experience is related to the type of housing and/or services being proposed in this application. • 0-1: Very little, if any, clear experience providing housing and/or services to people fleeing Domestic Violence. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
<p>24. 25. 26.</p>	<p><u>Description of Proposed Activities and Rationale for New Funding Request (10 maximum)</u></p> <p><i>Note to reviewers: Applicants are to answer questions 24 and/or, 25 and/or, 26 depending on the type of Coordinated Entry activities they are applying to provide. An applicant may have responded “N/A” to any of these questions. The score given should be based on the applicant’s response to all three of the questions.</i></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 8 – 10: Applicant provides a clear and detailed response to each of the parts of the questions they responded to (24, 25, and/or 26). The responses given clearly describe the need for the Coordinated Entry activities selected, how the applicant agency will carry out those activities, and why these activities are needed. Additionally, the applicant clearly describes how the proposed activities will be specifically tailored to meet the needs of people fleeing domestic violence. • 4 – 7: Response the applicant gives to questions 24, 25, and/or 26 was adequate, but could have been more detailed or thorough. Some, but not a lot, of description is given on how proposed activities will fill a gap in the Coordinated Entry system. The applicant does describe how the proposed activities will be specifically tailored to meet the needs of people fleeing domestic violence. • 0 – 3: Overall, the responses given to questions 24, 25, and/or 26 were lacking in detail. Little evidence that the proposed activities would fill a gap in the Coordinated Entry system. Little evidence that the proposed activities would be 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<p>specifically tailored to people fleeing domestic violence.</p> <p><u>Comments</u></p>	
27.	<p><u>Increased Marketing and Outreach (15 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 11 – 15: Applicant agency provides a thorough and detailed description of how the proposed activities will increase Coordinated Entry (CAM’s) ability to market and outreach to people who are homeless or at-risk of homelessness. Based on the response given, it is clear the applicant has a well thought out plan for how the activities proposed will reach people who would otherwise be unlikely to seek homeless assistance. • 6 – 10: The response given is adequate, but not as thorough as it could have been. The plan for how the proposed activities would increase outreach and marketing of the Coordinated Entry System (CAM) provides some, but not strong, evidence that the plan will reach people who would otherwise be unlikely to seek homeless assistance. • 0 – 5: From the response given, it is not entirely clear how the proposed activities will increase the marking and outreach of Coordinated Entry (CAM). The applicant does not make a strong case for how the proposed activities will reach people who would otherwise be unlikely to seek homeless assistance. <p><u>Comments</u></p>	
29.	<p><u>Peer Supports (2 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 2: Applicant clearly demonstrates that peer support specialists are fully integrated into their service delivery model. Response clearly describes how peer support specialists are part of the service team to enhance supports and services to clients. Applicant clearly demonstrates that peer support specialists are provided adequate, on-going training and receive regular supervision and support on the job. • 1: Description of how peer support specialists are incorporated into the service delivery model could have been stronger. Description of peer support specialists training and supervision was lacking. • 0: No evidence that applicant has incorporated the use of peer support specialists in the delivery of services. <p><u>Comments</u></p>	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
<p>30. 30A.</p>	<p><u>Project Timeline (5 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> • 4 -5: Applicant provides a clear description of how the project will be ramped up, including how costs incurred during the ramp up phase will be covered if they cannot be covered by the CoC grant. The estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 2 -3: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work could have been clearer. It is not entirely clear that the agency will be able to cover costs during the ramp-up phase with non-CoC funds. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is no more than 3 months/90 days after the execution of the grant agreement. • 0 -1: The description of the estimated schedule of proposed activities and a clear plan for ensuring timely completion of the work was significantly lacking in detail and clarity. In the “Project Milestone” fields (question 30A), the number of days given in the line “Client Enrollment and Supportive Services Begin” is greater than 3 months/90 days after the execution of the grant agreement. <p><u>Comments</u></p>	
<p>42.</p>	<p><u>Increasing Participant Safety (8 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 7 - 8: Response clearly describes multiple strategies for improving safety for Domestic Violence survivors; clearly describes how the project assesses improvements to participant safety; provides at least one concrete, substantive, and current example of what this work looks like that are relevant to the project; demonstrates that working to improve safety for survivors is a key part of the project. • 4-6: Response describes at least one strategy for improving safety for survivors and at least one way that the project assesses improvements to participant safety; provides an example of what this work looks like that may not be concrete, substantive, current or clearly relevant to the project. • 2-3: Response describes at least one strategy for improving safety for survivors, but does not provide concrete or substantive examples of what this work looks like or how the project assesses improvements to participant safety. • 0-1: Response given provides only vague reference to strategies that may or may not be implemented to improve participant safety. From response given, it is not clear applicant has experience in this area. 	

Application Section B: Project Description

Reference Application Question	Scoring Component	Score
	<u>Comments</u>	
43.	<p><u>Inclusion of Trauma-Informed and Victim Centered Services in Project (8 maximum)</u> Suggested scoring scale:</p> <ul style="list-style-type: none"> ● 6-8: The response clearly describes how the project will incorporate trauma informed and victim-centered care approaches to meet the needs of persons served. They demonstrate an understanding of the impacts of trauma and the principles of trauma informed care. The response is thoughtful and thorough. ● 3-5: The response given was not as detailed or clear as it could have been. It seems the agency does have some implementation or plan for implementation of trauma informed and victim-centered care, but it is not clear or descriptive. Their understanding of the impacts of trauma and the principles of trauma informed care seems limited. ● 0-2: Little evidence that the agency implements or understands trauma informed or victim-centered care. Or the response has red flags that raise concern about the agency’s model or method of service delivery. <p><u>Comments</u></p>	
44.	<p><u>Need for DV-Specific Funding (9 maximum)</u> Suggested Scoring Scale:</p> <ul style="list-style-type: none"> ● 7 – 9: Applicant provides a detailed description of how the current Coordinated Entry system in Detroit does not adequately meet the needs of people fleeing Domestic Violence. The applicant also provides a thorough description of how the proposed activities will help meet those needs. From the response given, it is clear the applicant understands the gaps in Detroit’s Coordinated Entry system has made a clear connection to how their proposed activities will close those gaps. ● 3 – 6: The response given provides some, but not a detailed, description of how the current Coordinated Entry system in Detroit does not adequately meet the needs of people fleeing Domestic Violence. The connection between the described gaps in the Coordinated Entry system and how the proposed activities will fill those gaps is not very strong or clear. ● 0 – 2: There is little evidence the applicant understands the gaps in Detroit’s Coordinated Entry system for people fleeing domestic violence. The description of how the proposed activities would fill the gaps is not clear or logical. <p><u>Comments</u></p>	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
47. Attach. #4	<p><u>Housing First (10 maximum)</u></p> <p>For the purposes of the activities to be funded by the CE-SSO grant, Housing First is defined as:</p> <ul style="list-style-type: none"> • Every attempt is made to place people into permanent housing as quickly as possible and without preconditions or service requirements. • People are not screened out of the coordinated assessment process because of perceived barriers to housing or services, including, but not limited to, lack of employment or income, drug or alcohol use, or having a criminal record • Agency describes how it engages with clients who are resistant to receiving services. • Agency describes how it engages with clients who are non-compliant with medication or treatment and/or have behavioral concerns to assist the client with maintaining their housing. • For CE-SSO applications, the agency may or may not have included an eviction prevention policy (attachment #4). Lack of this attachment should not result in fewer points, as this is not a housing project. <p><u>Suggested Scoring Scale:</u></p> <ul style="list-style-type: none"> • 8 -10: Applicant provides a strong description of how Housing First is implemented; all, or almost all, of the points addressed and point to the agency's experience in providing housing with a Housing First approach. The eviction prevention policy attachment provides additional evidence the agency embraces and practices Housing First and takes all steps possible to keep clients housed. • 4 - 7: Description of how agency implements Housing First could have been stronger; not clear applicant has fully incorporated a Housing First model within its service delivery; not all of the points above are referenced. The eviction prevention policy attachment does not clearly support the narrative responses. • 0 - 3: No clear evidence applicant understands or has incorporated Housing First within its service delivery model. No eviction prevention policy attachment, or the one that is attached does not support narrative responses. <p><u>Comments</u></p>	
48. Attachment #5	<p><u>Termination Process (5 maximum)</u></p> <p><u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 48 given makes it clear the agency terminates clients from the program only in the most extreme cases, that all attempts are made to prevent termination, and there are clear steps to prevent termination, including communication to the client. The attached policy (#5) supports the response given. • 2-3: From the response given, it is not entirely clear that termination would occur only in the most extreme cases. It seems the agency may make some attempts to prevent termination, but those attempts do not seem to be as comprehensive as they could be. It is not clearly spelled out how the client will be informed of 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>pending termination or given a chance to prevent termination. If a policy is attached (#5), it supports the response given.</p> <ul style="list-style-type: none"> • 0 - 1: Overall, the response to question 48 was lacking. There is no clear evidence that the agency will try to prevent termination. No policy provided (#5). <p><u>Comments</u></p>	
49. Attachment #6	<p><u>Grievance Process (5 maximum)</u> <u>Suggested Scoring Scale</u></p> <ul style="list-style-type: none"> • 4-5: The response to question 49 clearly describes how attempts to mediate and the resolve the concerns are handled. It is clearly described how an individual may submit a grievance (or complaint) against the agency. The process is clearly described to the individual, is posted publicly, and grievances may be submitted anonymously. The response also states that the agency has a specific staff role to handle grievances in an unbiased and neutral manner. Response discusses how the agency prevents retaliation against those who submit a grievance. The attached policy (#6) supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 2-3: The response to question 49 could have been clearer. It is not clear how the process for submitting a grievance (or complaint) against the agency is communicated to clients, although it seems the agency does allow for grievances to be submitted anonymously. While there is not specific staff role identified to handle grievances, the response does describe how grievances are reviewed in an unbiased and neutral manner. It is not clear if the agency has a process to prevent retaliation against those who submit a grievance. If a policy is attached (#6), it supports the response given. The policy submitted is specific to the agency, and is not the Detroit CoC’s grievance process. • 0 - 1: Overall, the response to question 9 was lacking. There is no description given on how the grievance process is communicated to clients. It does not appear the agency has a way to review grievances in an unbiased and neutral manner that prevents retaliation. No policy provided (#6) OR the policy submitted was only the Detroit CoC’s grievance process, and not specific to the agency. <p><u>Comments</u></p>	
50.	<p><u>Meaningful Participation of Persons with Lived Experience (6 maximum)</u> <u>Suggested scoring scale:</u></p> <ul style="list-style-type: none"> • 5 – 6: Responses clearly demonstrate the agency purposefully and intentionally incorporates PWLE throughout the agency, including within decision-making structures. • 3 – 4: Some, but not strong, evidence that agency incorporates PWLE throughout the agency and decision-making structures. • 1 – 2: Very little evidence that agency incorporates PWLE throughout the agency 	

Application Section C: Housing First and Person-Centered Services		
Reference Application Question	Scoring Component	Score
	<p>and decision-making structures.</p> <ul style="list-style-type: none"> • 0: No clear evidence that agency incorporates PWLE <p><u>Comments</u></p>	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
Budget Spreadsheet	<p><u>Budget (10 maximum)</u> Suggested Scoring Scale</p> <ul style="list-style-type: none"> • 8 -10: All tabs in the budget spreadsheet are completed correctly. Budget request is clear and logical given the overall application; quantity descriptions given clearly identify what is included in the request, including any FTE requests. The applicant demonstrates that there are other sources of funding committed to the project (as indicated in the budget charts or elsewhere in the application). • 5-7: All tabs in the budget spreadsheet are completed correctly. Budget request is clear and logical given the overall application; quantity descriptions given clearly identify what is included in the request, including any FTE requests. Other sources of funding are only expected, not yet committed to the project (as indicated in the budget charts or elsewhere in the application). • 2-4: Budget spreadsheet may be completed correctly, but the budget is lacking in logic and connection to the overall application. Details in the “cost description” in the budget charts is lacking. Other funding sources may or may not be committed to the project. • 0-1: Significant deficiencies or unclarity questions about the requested budget. <p><u>Comments</u></p>	
Budget Spreadsheet and Attachments #9	<p><u>Match (3 maximum)</u> Suggested Scoring Scale: Note: Match documentation was not a required attachment, but additional pts given if included</p> <ul style="list-style-type: none"> • 3: In the Budget spreadsheet, tab C (Match) clearly states the sources and amounts of match for this project. The total amount of match in Tab C is equal to, or greater than, the total match required for the funding request. Written match documentation included with application for all matching sources. • 2: In the Budget spreadsheet, tab C (Match) clearly states the sources and amounts of match for this project. The total amount of match in Tab C is equal to, or greater than, the total match required for the funding request. Written match documentation may or may not be included. 	

Application Section D: BUDGET		
Reference Application Question	Scoring Component	Score
	<ul style="list-style-type: none"> 0-1: In the Budget spreadsheet, tab C (Match) is either fully completed and/or the amount of match identified is less than the amount required. No match documentation provided. <p><u>Comments</u></p>	

Audit and Monitoring Report Review		
Attachment #1	<p><u>Review of Agency Financial Audit (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year in the agency’s financial audit (not the A-133 audit).</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with CoC Grant (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with CoC grants.</p>	
Attachment #1 (if applicable)	<p><u>Review of Agency A-133 Audit: Findings Associated with Other Federal Grants (besides CoC grants) (up to -2 points)</u> Up to 2 points may be deducted from the project score for repeat and/or unresolved audit findings from prior audit year associated with Federal grants <i>other than</i> CoC grants.</p>	
Attachment #2 (if applicable)	<p><u>Review of HUD CoC Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the CoC program monitoring report for which no Corrective Action Plan was submitted by HUD’s deadlines, or Correction Action Plan submitted did not meet HUD’s approval.</p>	
Attachment #3 (if applicable)	<p><u>Review of City of Detroit Homeless Program Monitoring (up to -2 points)</u> Up to 2 points may be deducted from the project score for findings in the City of Detroit Homeless program monitoring report for which no Corrective Action Plan was submitted by City of Detroit’s deadlines, or Correction Action Plan submitted did not meet City of Detroit’s approval.</p>	

ADDITIONAL REVIEWER NOTES

Attachment 1E-2a: Scored Forms for One Project

CoC: MI-501

The most commonly used score form in the Detroit CoC is the scoring form for renewal PSH projects.

Attached is a completed score form for one renewal PSH project in the Detroit CoC. This score form was used in the FY2023 CoC Competition.



Detroit Continuum of Care
FY2023 HUD CoC Renewal Project Scoring Sheet

July 21, 2023

Applicant Organization Name:	Community & Home Supports
Project Name:	Permanent Community Supports
HUD Project Component Type:	PSH
Initial Score:	106
Points Deducted for Substantiated Grievances:	0
Points Deducted for Unresolved/Repeat Audit/Monitoring Findings	0
Points Deducted for Late or Incorrect Submission	3
FINAL POINTS:	103
Points Possible for Project	125
Percentage Earned	82%
Passed Threshold? (70% needed to pass threshold)	YES

Scoring Summary Chart		
	Max Points Possible	Points Scored
Component #1: Mainstream Resources & Employment		
A) Leavers w/cash income	5	5
B) Leavers w/non-cash benefits	5	5
C) Leavers w/earned income	3	3
D) Leavers w/increase in total income	2	2
E) Stayers with health insurance	2	2
Component #2: Housing Performance		
A) Housing retention or exit to PH	25	25
B) Utilization rates	10	10
C) Length of Time from Referral to Housing Move-In	10	0
D) Returns to Homelessness	5	0
E) Service staff and Program Availability	3	3
F) Facilitation & Tracking Referrals	2	2
Component #3: Financial Performance	8	8
Component #4: HMIS Participation		
A) Agency Admin Mtg Attend	3	3
B) Data Quality and Completeness	10	9
C) Accurate Reporting of Annual Assessment	1	1
D) Known Exit Destination	3	3
E) 2023 HIC Submission	5	5
F) Accurate Quarterly PIT/HMID Audit for CoC funded project	3	0
G) Accurate Quarterly PIT/HMID Audit for non-CoC funded project	2	2
Component #5: Inclusion of Persons w/Lived Exp.		
A) Consumer Participation	2	2
B) Narrative response: meaningful participation of PWLE	6	6
Component #6: CAM Participation		
A) Referral Outcome Reporting (CoC project)	2	2
B) Referral Outcome Reporting (other projects)	2	2
C) New Client Entries	2	2
D) Housing Move-in Date Completion	4	4
TOTAL	125	106

Component #1: Mainstream Resources & Employment

Metric	Points Possible	Project's Performance	Points Earned
A) Percentage of Leavers with Any Cash Income	65% - 100%: 5 points 40% - 64%: 3 points Below 40%: 0 points	91%	5
B) Percentage of Leavers with Any Non-Cash Benefits	85% - 100%: 5 points 60% - 84%: 3 points Below 60%: 0 points	95%	5
C) Percentage of Leavers with Earned Income (Employment)	10% - 100%: 3 points 5% - 9%: 1 points Below 5%: 0 points	36%	3
D) Percentage with Increase in Total Cash Income for Leavers & Stayers:	40% - 100%: 2 points 10% - 39%: 1 points Below 10%: 0 points	55%	2
E) Percentage of stayers with health insurance	80% - 100%: 2 points 50% - 79%: 1 points Below 50%: 0 points	97%	2
Total Project Score for Component #1:			17

Component #2: Housing Performance

Metric	Points Possible	Project's Performance	Points Earned
A) Percentage of participants who remain in PH or exit to other PH:	95% - 100%: 25 points 90% - 94%: 20 points 80% - 89%: 10 points Below 80%: 0 points	100%	25
B) Overall average utilization rates as on 1/26/22, 4/27/22, 7/27/22, 10/26/22, 12/28/22	90% - 100%: 10 points 75% - 89%: 5 points Below 75%: 0 points	98%	10
C) Length of Time from Referral to Housing Move-In	<ul style="list-style-type: none"> • 80 days or less: 10 • 81 to 84 days: 5 • 85 to 96 days: 3 • >96 days: 0 	116 Days (overall average)	0
D) Returns to Homelessness	3% or fewer: 5 points 4% - 5%: 3 points 6% - 15%: 1 point >15%: 0 points	22%	0
E) Service Staff and Program Availability	24/7: 3 points 8AM - 5PM, M-F with some weekend hours: 2 points 9AM - 5PM, M - F: 1 point	24/7	3
F) Facilitation and Tracking of Referrals	Yes: 2 points No/unknown: 0 points	yes	2
Total Score for Component #2:			40

Component #3: Financial Performance

Metric	Points Possible	Project's Performance	Points Earned
Percentage of project's annual budgeted HUD grant expended during the most recently completed project year:	Projects without a rental assistance budget line that expended: 90% - 100%: 8 points 85% - 89%: 4 points Less than 85%: 0 points		
	Projects with a rental assistance budget line that expended: 85% - 100%: 8 points 75% - 84%: 4 points Less than 75%: 0 points	100%	8
Total Project Score for Component #3:			8

Component #4: HMIS Participation

Metric	Points Possible	Project's Performance	Points Earned
A) Attendance at majority of Agency Administrator meetings during Jan - Dec 2022 (including 2 e-blasts)	6 or more mtgs (including e-blasts): 3 points 5 or fewer mtgs (including e-blasts): 0 points	8	3
B) Data Quality and Completeness, based on % error rate for name, date of birth, relationship to head of household, income source at entry, income source at exit, race, ethnicity, gender, client location, and disabling condition	1 point for each element with error rate of 5% or less	9 <i>(number of elements for which 1 point is earned)</i>	9
C) Accurate recording of annual assessment	5% or less: 1 point 6% or more: 0 points	0%	1
D) Known Destination	75% - 100%: 3 points <75%: 0 points	100%	3
E) 2023 HICs submitted by deadline	Yes: 5 points No: 0 points	yes	5
F) Accurate Quarterly PIT/HMID Audit for CoC funded project	No changes made to PIT count audit data after submission: 3 points Evidence changes made to data after submission: 0 points	changes made	0
G) Accurate Quarterly PIT/HMID Audit for non-CoC funded project	No changes made to PIT count audit data after submission: 2 points Evidence changes made to data after submission: 0 points	No changes made	2
Total Project Score for Component #4:			23

Component #5: Inclusion of Persons with Lived Experience

Metric	Points Possible	Project's Performance	Points Earned
A) Is recipient (and sub-recipients(s) if applicable) compliant with HEARTH regulation 578.75(g)	Currently consumer participation and documentation provided: 2 No current consumer participation, no plan in place: 0 points	documentation of current consumer participation provided	2
B) Narrative response of PWLE	Up to 6 points possible	score is average of narrative review scores	6
Total Project Score for Component #5:			8

Component #6: CAM Participation

Metric	Points Possible	Project's Performance	Points Earned
A) Referral Outcome Reporting (CoC funded Project)	85% - 100% of referrals with outcome reported in HMIS: 2 points <85% of referrals with outcome reported in HMIS: 0 points	92%	2
B) Referral Outcome Reporting (Non-CoC funded Projects)	75% - 100% of referrals with outcome reported in HMIS: 2 points <75% of referrals with outcome reported in HMIS: 0 points	100%	2
C) New Client Entries (Jan - Dec 2022)	100% new client entries referred via CAM: 2 points <100% new client entries referred via CAM: 0 points	100%	2
D) Housing Move-in Date (HMID) Completion	90% - 100% clients with a HMID completed: 4 points 80% - 89% clients with a HMID completed: 2 points 70% - 79% clients with a HMID completed: 1 points <70% clients with a HMID completed: 0 points	98%	4
Total Project Score for Component #6:			10

NOTES

See document accompanying review sheet for comments from the review of the agency's narrative response to the incorporation of PWLE. The score given above for this element is the average of the score given by each person who reviewed the response.

POINTS DEDUCTED

Points were deducted from this project due to:

Three (3) points were deducted due to the late submission of the correct signature page for this project.

Attachment 1E-5: Notification of Projects Rejected-Reduced

CoC: MI-501

From: [Amanda Sternberg](#)
To: [Kimberly Farrow \(kfarrow@centralcityhealth.com\)](mailto:kfarrow@centralcityhealth.com)
Cc: [David Wash](#); [Natasha Al-Rafie \(Nalrafie@CentralCityHealth.com\)](mailto:Nalrafie@CentralCityHealth.com); [Michele Monette](#)
Subject: CoC Board Decision on CCIH Threshold Waiver Appeal and Additional Appeal Opportunity
Date: Tuesday, August 8, 2023 10:03:00 AM
Attachments: [FY2023 Reallocation Appeals.pdf](#)
[Appeal Decision_CCIH.pdf](#)

Hello,

Please see the attached letter regarding the Detroit CoC Board's decision on CCIH's threshold waiver appeal.

The CoC Board decided to reallocate part of your project's budget. This decision may be appealed. The attached document describes how to submit a reallocation appeal. Note, reallocation appeals must be submitted via email to me (amanda@handetroit.org) by 12:00 pm (noon) on August 15, 2023.

Please let me know if you have any questions. Thank you.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Detroit Continuum of Care

Working to Equitably End Homelessness in Detroit, Highland Park, & Hamtramck

August 8, 2023

Kimberly Farrow
Central City Integrated Health
10 Peterboro
Detroit, MI 48201

Re: Detroit CoC Board decision on threshold waiver appeal for CCIH's CoC Leasing Bonus and Supportive Housing PSH projects

Dear Ms. Farrow,

On behalf of the Detroit Continuum of Care (CoC) Board, this letter is to inform you that at the August 7, 2023 Detroit CoC Board meeting, the CoC Board approved the following recommendation of the Appeals Committee in response to your threshold waiver appeal:

Grant appeal for threshold waiver and submit both PSH projects for partial funding.

1. Each renewing PSH project will be submitted to HUD for funding with a 10% reduction in their budget. This means each project would be submitted with the following budget:
 - Leasing Bonus: \$635,804
 - Supportive Housing: \$1,108,292
2. Each project will be placed on a Corrective Action Plan (CAP) to address deficiencies in performance. The details of the CAP will be forthcoming in the coming months.

Reason for Reduction

This project's budget is being reduced due to under-performance that caused it to fall below the CoC's scoring threshold. Specific underperformance factors noted were underspending and low utilization.

Project Ranking

The project priority ranking list will not be completed until mid-September, at which time you will be notified of where your project will be ranked.

Reallocation Appeal Opportunity

Per the Detroit CoC Appeals Policy, decisions to reallocate a renewal project, either in part or in whole, may be appealed. As the CoC Board has decided on a partial reallocation of your PSH projects, you may appeal this decision. The accompanying document provides details on the reallocation appeal process. Reallocation appeals are due to **HAND by 12:00 pm (noon) on August 15, 2023**. If a reallocation appeal is not submitted by this time, your project will be submitted at the reduced budget amount.

If you have any questions on any of the above, you may contact Amanda Sternberg at (313) 380-1714 or Amanda@handetroit.org or myself at (313) 576-0237 or cnmorgan@cotsdetroit.org.

Thank you,



Candace Morgan
Detroit Continuum of Care Board Vice-Chair

Cc:
David Wash (Central City Integrated Health)
Michele Monette (Central City Integrated Health)
Natasha Al-Rafie (Central City Integrated Health)
Amanda Sternberg (Homeless Action Network of Detroit)

Attach: Reallocation Appeals Process

From: [Amanda Sternberg](#)
To: draudi@drmm.org
Cc: [Barbara Willis \(bwillis@drmm.org\)](mailto:Barbara.Willis@drmm.org); [Japheth Agboka \(jagboka@drmm.org\)](mailto:Japheth.Agboka@drmm.org); [Linda Stingl](#)
Subject: CoC Board Decision on DRMM Threshold Waiver Appeal and Additional Appeal Opportunity
Date: Tuesday, August 8, 2023 10:05:00 AM
Attachments: [FY2023 Reallocation Appeals.pdf](#)
[Appeal Decison DRMM.pdf](#)

Hello,

Please see the attached letter regarding the Detroit CoC Board's decision on DRMM's threshold waiver appeal.

The CoC Board decided to reallocate part of your project's budget. This decision may be appealed. The attached document describes how to submit a reallocation appeal. Note, reallocation appeals must be submitted via email to me (amanda@handetroit.org) by 12:00 pm (noon) on August 15, 2023.

Please let me know if you have any questions. Thank you.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Detroit Continuum of Care

Working to Equitably End Homelessness in Detroit, Highland Park, & Hamtramck

August 8, 2023

Dr. Chad Audi
Detroit Rescue Mission Ministries
150 Stimson
Detroit, MI 48201

Re: Detroit CoC Board decision on threshold waiver appeal for DRMM's CoC Cornerstone PSH project

Dear Dr. Audi,

On behalf of the Detroit Continuum of Care (CoC) Board, this letter is to inform you that at the August 7, 2023 Detroit CoC Board meeting, the CoC Board approved the following recommendation of the Appeals Committee in response to your threshold waiver appeal:

Grant appeal for threshold waiver and submit the PSH project for partial funding.

1. The renewing PSH project will be submitted to HUD for funding with a 25% reduction in their budget. This means the project would be submitted with the following budget: \$1,104,943.
2. This project will be placed on a Corrective Action Plan (CAP) to address deficiencies in performance. The details of the CAP will be forthcoming in the coming months.

Reason for Reduction

This project's budget is being reduced due to under-performance that caused it to fall below the CoC's scoring threshold. Specific underperformance factors noted were low unit utilization, substantiated grievances with client retaliation in non-CoC funded projects, and failure to submit the correct materials on time.

Project Ranking

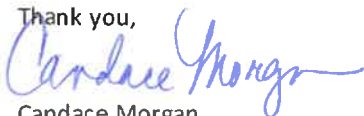
The project priority ranking list will not be completed until mid-September, at which time you will be notified of where your project will be ranked.

Reallocation Appeal Opportunity

Per the Detroit CoC Appeals Policy, decisions to reallocate a renewal project, either in part or in whole, may be appealed. As the CoC Board has decided on a partial reallocation of your PSH project, you may appeal this decision. The accompanying document provides details on the reallocation appeal process. Reallocation appeals are due to HAND by **12:00 pm (noon) on August 15, 2023**. If a reallocation appeal is not submitted by this time, your project will be submitted at the reduced budget amount.

If you have any questions on any of the above, you may contact Amanda Sternberg at (313) 380-1714 or Amanda@handetroit.org or myself at (313) 576-0237 or cnmorgan@cotsdetroit.org.

Thank you,



Candace Morgan
Detroit Continuum of Care Board Vice-Chair

Cc:

Barbara Willis (Detroit Rescue Mission Ministries)
Linda Stingl (Detroit Rescue Mission Ministries)
Japheth Agboka (Detroit Rescue Mission Ministries)
Amanda Sternberg (Homeless Action Network of Detroit)

Attach: Reallocation Appeals Process

From: [Amanda Sternberg](mailto:Amanda.Sternberg@handetroit.org)
To: [Celia S. Thomas \(cthomas@alternativesforgirls.org\)](mailto:Celia.S.Thomas@alternativesforgirls.org); agood@alternativesforgirls.org; kkibbey@alternativesforgirls.org
Cc: cnmorgan@cotsdetroit.org
Subject: CoC Board Decision on AFG Reallocation Appeal
Date: Thursday, August 31, 2023 1:49:00 PM
Attachments: [Reallocation Appeal Decision AFG.pdf](#)

Hello,

Please see the attached letter regarding the Detroit CoC Board's decision on AFG's reallocation appeal.

The CoC Board voted to uphold their previous decision to reallocate a portion of your renewal project's budget. I will follow up with you by September 1 regarding the next steps you will need to take for this project in eSNAPS.

Thank you.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Detroit Continuum of Care
Working to Equitably End Homelessness in Detroit, Highland Park, & Hamtramck

August 31, 2023

Celia Thomas
Alternatives for Girls
903 W. Grand Blvd.
Detroit, MI 48208

Re: Detroit CoC Board decision on reallocation appeal for AFG's CoC Youth RRH project

Dear Ms. Thomas,

On behalf of the Detroit Continuum of Care (CoC) Board, this letter is to inform you that at the August 30, 2023 Detroit CoC Board meeting, the CoC Board approved the following recommendation of the Appeals Committee in response to your project reallocation appeal:

Deny the reallocation appeal and uphold the CoC Board's original partial reallocation decision.

This decision means that the renewing RRH project will be submitted to HUD for funding with a 10% reduction in its budget and will be submitted with the following budget: \$278,079. This decision of the board is final.

Reason for Reduction

This project's budget is being reduced due to under-performance that caused it to fall below the CoC's scoring threshold. Specific underperformance factors noted were underspending and repeat audit findings.

Project Ranking

The project priority ranking list will not be completed until mid-September, at which time you will be notified of where your project will be ranked.

Next Steps

The next steps are for AFG to submit this project, with the reduced budget, in eSNAPS, according to the deadlines set by HAND. AFG may also choose to scale back the project (number of units to be provided/number of persons to be served) in the same proportion that the budget is being reduced. If needed, HAND staff can assist with determining the best way to scale back the project.

In the coming weeks HANAD staff will follow up with AFG to determine the next steps for the Corrective Action Plan (CAP) the agency will be placed under as a result of this project falling under threshold.

If you have any questions on any of the above, you may contact Amanda Sternberg at (313) 380-1714 or Amanda@handetroit.org or myself at (313) 576-0237 or cnmorgan@cotsdetroit.org.

Thank you,



Candace Morgan
Detroit Continuum of Care Board Vice-Chair

Cc:
Amy Good (Alternatives for Girls)
Katy Kibbey (Alternatives for Girls)
Amanda Sternberg (Homeless Action Network of Detroit)

From: [Amanda Sternberg](#)
To: [Jane Scarlett \(jscarlett@swsol.org\)](mailto:jscarlett@swsol.org); jebaugh@swsol.org
Cc: [Celia S. Thomas \(cthomas@alternativesforgirls.org\)](mailto:cthomas@alternativesforgirls.org)
Subject: CoC Board Decision on SWCS Reallocation Appeal
Date: Thursday, August 31, 2023 1:51:00 PM
Attachments: [Reallocation Appeal Decision SWCS.pdf](#)

Hello,

Please see the attached letter regarding the Detroit CoC Board's decision on Southwest Counseling Solution's reallocation appeal.

The CoC Board voted to uphold their previous decision to reallocate a portion of your renewal project's budget. I will follow up with you by September 1 regarding the next steps you will need to take for this project in eSNAPS.

Thank you.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Detroit Continuum of Care

Working to Equitably End Homelessness in Detroit, Highland Park, & Hamtramck

August 31, 2023

Jamie Ebaugh
Southwest Counseling Solutions
1600 Porter
Detroit, MI 48216

Re: Detroit CoC Board decision on reallocation appeal for SWCS's CoC RRH project

Dear Mr. Ebaugh,

On behalf of the Detroit Continuum of Care (CoC) Board, this letter is to inform you that at the August 30, 2023, Detroit CoC Board meeting, the CoC Board approved the following recommendation of the Appeals Committee in response to your project reallocation appeal:

Deny the reallocation appeal and uphold the CoC Board's original partial reallocation decision.

This decision means that the renewing RRH project will be submitted to HUD for funding with a 10% reduction in its budget and will be submitted with the following budget: \$382,982. This decision of the board is final.

Reason for Reduction

This project's budget is being reduced due to underperformance, which caused it to fall below the CoC's scoring threshold. Specific underperformance factors noted were income and employment outcomes and repeat audit findings.

Project Ranking

The project priority ranking list will not be completed until mid-September when you will be notified of where your project will be ranked.

Next Steps

The next steps are for Southwest Counseling Solutions to submit this project, with the reduced budget, in eSNAPS, according to the deadlines set by HAND. Southwest Counseling may also choose to scale back the project (number of units to be provided/number of persons to be served) in the same proportion that the budget is being reduced. If needed, HAND staff can assist with determining the best way to scale back the project.

In the coming weeks, HAND staff will follow up with Southwest Counseling to determine the next steps for the Corrective Action Plan (CAP) the agency will be placed under due to this project falling under the threshold.

If you have any questions on the above, please contact Amanda Sternberg at (313) 380-1714 or Amanda@handetroit.org or me at (313) 775-2575 or cthomas@alternativesforgirls.org.

Thank you,



Celia Thomas
Detroit Continuum of Care Board Chair

Cc:

Jane Scarlett (Southwest Counseling Solutions)
Amanda Sternberg (Homeless Action Network of Detroit)

From: [Amanda Sternberg](#)
To: [Roslyn Baughman \(roslyn.baughman@tasmd.org\)](mailto:roslyn.baughman@tasmd.org); [Helzerman, Darlene](#)
Cc: [Celia S. Thomas \(cthomas@alternativesforgirls.org\)](mailto:cthomas@alternativesforgirls.org)
Subject: CoC Board Decision on TASMD Reallocation Appeal
Date: Thursday, August 31, 2023 1:53:00 PM
Attachments: [Reallocation Appeal Decision TASMD.pdf](#)

Hello,

Please see the attached letter regarding the Detroit CoC Board's decision on Traveler's Aid Society of Metro Detroit's reallocation appeal.

The CoC Board voted to uphold their previous decision to reallocate a portion of your renewal project's budget. I will follow up with you by September 1 regarding the next steps you will need to take for this project in eSNAPS.

Thank you.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Detroit Continuum of Care

Working to Equitably End Homelessness in Detroit, Highland Park, & Hamtramck

August 31, 2023

Roslyn Baughman
Travelers Aid Society of Metropolitan Detroit
3031 W. Grand Blvd, Suite 690
Detroit, MI 48202

Re: Detroit CoC Board decision on reallocation appeal for TASMD's CoC BEIT PSH project

Dear Ms. Baughman,

On behalf of the Detroit Continuum of Care (CoC) Board, this letter is to inform you that at the August 30, 2023, Detroit CoC Board meeting, the CoC Board approved the following recommendation of the Appeals Committee in response to your project reallocation appeal:

Deny the reallocation appeal and uphold the CoC Board's original partial reallocation decision.

This decision means that the renewing PSH project will be submitted to HUD for funding with a 10% reduction in its budget and will be submitted with the following budget: \$954,473. This decision of the board is final.

Reason for Reduction

The project budget is being reduced for the following reasons:

- Overall project score fell beneath the CoC's scoring threshold. The low score was due to the points deducted from submitting application materials late.

Project Ranking

The project priority ranking list will not be completed until mid-September when you will be notified of where your project will be ranked.

Next Steps

The next steps are for Travelers Aid Society to submit this project, with the reduced budget, in eSNAPS, according to the deadlines set by HAND. Travelers Aid may also choose to scale back the project (number of units to be provided/number of persons to be served) in the same proportion that the budget is being reduced. If needed, HAND staff can assist with determining the best way to scale back the project.

If you have any questions, please contact Amanda Sternberg at (313) 380-1714 or Amanda@handetroit.org or me at (313) 775-2575 or cthomas@alternativesforgirls.org.

Thank you,



Celia Thomas
Detroit Continuum of Care Board Chair

Cc:

Darlene Helzerman (Travelers Aid Society of Metropolitan Detroit)
Amanda Sternberg (Homeless Action Network of Detroit)

From: [Amanda Sternberg](#)
To: [Ilene Hogan](#); [Lori Kitchen-Buschel](#)
Subject: Notice of CoC Board Decision on First Step New Project Application
Date: Tuesday, September 12, 2023 11:50:00 AM
Attachments: [CoC Board Decision First Step DV Bonus TH-RRH.pdf](#)

Hello,

Please see the attached letter reflecting the decision made by the CoC Board to not submit the First Step DV TH-RRH project to in this year's competition.

Following the close of the competition later this month, I'd be happy to provide detailed feedback to First Step on how your application scored and areas of improvement for future competitions. I'm happy to dive into this with you more once the pressing timeline of the competition has passed.

I know you have also been working on developing responses to another series of questions per my request. As we will not be moving forward with your project application, I will no longer need a response to those questions.

Please let me know if you have any immediate questions that I can help answer.

Amanda Sternberg

From: Amanda Sternberg
Sent: Friday, September 8, 2023 2:17 PM
To: ihogan@firststep-mi.org; lkitchenbuschel@firststep-mi.org
Subject: Sept 11 Detroit CoC Board Meeting and New Project Recommendations

Hello,

Thank you for submitting a new DV Bonus project application this past August. On Monday, September 11, the Detroit CoC Board will be voting on the new project review committee recommendations on which new projects to submit to HUD. To promote transparency in the decision-making process, the CoC Board will allow the public to be present for this discussion. Following the discussion, only non-CoC funded board members will vote on the new project recommendations.

You are receiving this message to inform you that unfortunately the application submitted by First Step is not being recommended to be submitted to HUD as the application did not pass our scoring threshold.

The attached document provides details on this recommendation for your project, including how your project scored. The redacted information in the attached document is funding recommendations being made for other projects. All recommendations will be made public at the board meeting on Monday. For now, I just wanted to give you the information for your agency.

Note: this is a recommendation only; the CoC board still must approve this recommendation in order for it to be final.

The meeting on Monday, the 11th, starts at 2:00 PM, and you are welcome to attend; the zoom link for the meeting is [here](#).

I will follow up with additional information following Monday's board meeting. Please reach out if you have any questions.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org

Detroit Continuum of Care

Working to Equitably End Homelessness in Detroit, Highland Park, & Hamtramck

September 12, 2023

Lori Kitchen-Buschel
First Step
44567 Pinetree Dr.
Plymouth, MI 48170

Re: Application for Domestic Violence Bonus Funding for Transitional Housing- Rapid Rehousing

Dear Ms. Kitchen-Buschel;

Thank you for applying to the Detroit Continuum of Care (CoC) for a new Transitional Housing-Rapid Rehousing Domestic Violence project. On behalf of the Detroit CoC Board of Directors, I regret to inform you that this project has not been selected for funding this year.

This project scored 119.4 out of a potential 185 points, for a score of 64.5%. The CoC's Request for Proposals for new project funding stated that projects needed to score at least 70% to be considered for funding.

If requested, HAND staff can provide more detailed feedback on your new project application following the close of the CoC competition in September. If you want this feedback level, please contact Amanda Sternberg at amanda@handetroit.org.

If you have any questions, please contact Amanda Sternberg at (313) 380-1714 or Amanda@handetroit.org or myself at (313) 775-2575 or cthomas@alternativesforgirls.org.

Thank you,



Dr. Celia Thomas
Detroit Continuum of Care Board Chair

Cc: Ilene Hogan, First Step
Amanda Sternberg, HAND

Attachment 1E-5a: Notification of Projects Accepted

CoC: MI-501

From: [Amanda Sternberg](mailto:Amanda.Sternberg@handetroit.org)
To: [Amanda Sternberg](mailto:Amanda.Sternberg@handetroit.org)
Bcc: jbertschi@alternativesforgirls.org; agood@alternativesforgirls.org; cthomas@alternativesforgirls.org; kkibbey@alternativesforgirls.org; kstephens@blackfamilydevelopment.org; angelahmontgomery@gmail.com; ccumcac@aol.com; kconwell@casscommunity.org; egeorge@casscommunity.org; zbetthausser@casscommunity.org; kfarrow@centralcityhealth.com; dwash@centralcityhealth.com; Nalrafie@CentralCityHealth.com; js1@chsinc.org; MN1@chsinc.org; mt1@chsinc.org; cjohnson@cotsdetroit.org; cnmorgan@cotsdetroit.org; amorrell@cotsdetroit.org; CGRIFFIN@cotsdetroit.org; draudi@drmm.org; jagboka@drmm.org; bwillis@drmm.org; linda@drmm.org; dowens@drmm.org; tward@drmm.org; btaylor@dwhn.org; tjones@dwmha.com; edoeh1@dwmha.com; tjames@dwmha.com; lmccain@develctrs.org; nwade@develctrs.org; tbosley@develctrs.org; JMcCormack@develctrs.org; evasquez@freedomhousedetroit.org; development@freedomhousedetroit.org; Tasha Gray; Kiana Harrison; Meredith Baughman; dave.sampson@marinersinn.org; svanevery@marinersinn.org; cjackson@marinersinn.org; sspencer@marinersinn.org; sarah.proutrennie@mcedsv.org; kroach@mchsmi.org; kedmon@mchsmi.org; KaiserP@michigan.gov; HendgesL2@michigan.gov; jriggs@wcns.org; gwhite@wcns.org; pwilson@wcns.org; Tdean@wcns.org; llittle@nso-mi.org; twhite@nso-mi.org; pwhite@nso-mi.org; luke.hassevoort@ruthelliscenter.org; mark.erwin@ruthelliscenter.org; jebaugh@swsol.org; jscarlett@swsol.org; jwojahn@swsol.org; roslyn.baughman@tasmd.org; mdarlene266@gmail.com; lpiszker@waynemetrometro.org; rjones@waynemetrometro.org; chierlihy@waynemetrometro.org; wmdevelopment@waynemetrometro.org; mcenti@waynemetrometro.org
Subject: Final FY2023 CoC Project Priority Ranking List
Date: Wednesday, September 13, 2023 4:58:00 PM
Attachments: [Final Project Priority Ranking List with Policies.pdf](#)

Hello,

This email, and the attachment, serves as notice that all renewal and new projects listed on the accompanying project priority listing have been accepted by the Detroit CoC for submission to HUD as a part of the FY2023 Continuum of Care application. These projects will be submitted to HUD by September 28, 2023 in rank order as given in the accompanying list. This list has also been posted on HAND's [website](#).

This information is provided to meet HUD's requirement that projects be informed at least 15 days prior to the close of the CoC competition if projects will be accepted or rejected by the CoC. Projects submitted to the CoC that were not accepted have been informed individually that their projects would not be submitted to HUD.

As you will note in the list, the overall score received on the project application, as well as the score received on specific components as needed for tie-breakers, is given. If you have questions about the project ranking list, feel free to reach out to me for further details.

Thank you.

Amanda Sternberg

Performance Management Analyst
Homeless Action Network of Detroit
3701 Miracles Blvd, Suite 101
Detroit, MI 48201
Office: 313-964-3666 x104
Direct: 313-380-1714
amanda@handetroit.org



FY2023 Detroit Continuum of Care Project Priority Ranking List September 13, 2023

Notification of Acceptance of Project for Submission to HUD

This document serves as notice that all renewal and new projects listed on the accompanying project priority listing have been accepted by the CoC for submission to HUD as a part of the FY2023 Continuum of Care application. This project priority ranking was approved by the Detroit CoC Board of Directors on September 13, 2023. These projects will be submitted to HUD by September 26, 2023 in rank order as given in the accompanying list. This document was made available on the website of the Collaborative Applicant, the Homeless Action Network of Detroit (HAND) on September 13, 2023, and may be accessed [here](#). This list has been distributed via email to all project applicants.

FY2023 Project Priority Ranking Policies

The Detroit CoC Board approved the FY2023 Project Priority Ranking policies on August 7, 2023. These policies may be accessed from HAND's website [here](#). The policies are also provided at the end of this document, following the list of projects. Also given here are the recommendations made, and action taken, in response to this policy language:

Final Ranking List Review and Recommendation

Following the submission, review, and scoring of all renewal and new project applications.... The Values & Funding Priority Committee may recommend to the CoC board that a project(s) that would have been in Tier 2 because of the ranking policies instead be placed into Tier 1. If the Committee chooses to move a Tier 2 project up to Tier 1, it will need to provide rationale for the recommendation. The Committee will present its final recommended project ranking list to the CoC board in accordance with the timeframe required by HUD. The CoC board will make the final decision on the project ranking list.

Values & Funding Priorities Committee Recommendation

Following a review of the ranked projects, the Values & Funding Priorities Committee did not recommend that any project placed into Tier 2 instead be placed into Tier 1. HUD will fund Tier 2 projects according to both the CoC application score and the project score, as described in the FY2023 CoC Notice of Funding Opportunity (NOFO).

Acceptance of Projects for Ranking and Submission to HUD

Renewal Projects

All renewal projects were accepted for submission to HUD. As an outcome of the CoC's project scoring and appeals process, several projects underwent a partial reallocation of their budgets, as reflected in the accompanying project listing.

New Projects: CoC Bonus

The Detroit CoC Board made decisions on September 11, 2023 on new projects to be submitted with CoC Bonus and reallocated funding, as summarized in the table below. All applications submitted for CoC Bonus funding were accepted to be submitted to HUD.

Number of Applications Submitted	Number of Applications Approved for Submission to HUD with CoC Bonus + Reallocated Funding	Number of Applications Rejected
8	8	0

New Projects: Domestic Violence Bonus Funding

The Detroit CoC Board made decisions on September 11, 2023 on new projects to be submitted with CoC Bonus and reallocated funding, as summarized in the table below.

Number of Applications Submitted	Number of Applications Approved for Submission to HUD with DV Bonus funding	Number of Applications Rejected
3	2	1

The applicant for the project that was rejected has been informed individually of this decision.

HUD may choose to fund the Domestic Violence Bonus projects using either Domestic Violence Bonus funding or CoC Bonus funding. If the project is funded with Domestic Violence Bonus funding, all other projects ranked below this project will move up on the ranking list.

New Project Funding Available and Requested

The table below demonstrates the total amount of new funding available to the CoC and the total amounts requested.

	Total Amount Available	Total Amount to be Submitted to HUD	Balance Not Being Requested
CoC Bonus	\$2,419,580	\$2,419,580	\$0
Reallocated Funding	\$741,606	\$741,606	\$0
Domestic Violence Bonus	\$3,456,543	\$1,263,371	\$2,193,172

CoC Planning Funding Requested

CoC Planning funding is available to the Homeless Action Network of Detroit to allow it to fulfill its role as the Collaborative Applicant. These funds are separate from funds used to fund other CoC programs and may only be granted to the CoC's Collaborative Applicant. The final amount of CoC Planning that will be applied for in FY2023 will not exceed \$1,500,000, the total amount of CoC Planning funding available.

FY2023 Detroit CoC Project Priority Ranking List

September 13, 2023

Project Rank	Applicant Name	Project Name	Project Type	Requested Funding Amount	Reallocated Funds*	Project Score			Accepted or Rejected**
						Total % Earned on Component 2	Overall % earned on application (1st Tie breaker)	% earned on 1A (2nd tie-breaker)	
TIER 1 PROJECTS									
RANKING POLICY #1: Renewal CoC Infrastructure									
1	CHS	Coordinated Assessment & Navigation Project	CE-SSO	847,538			99%		Accepted
2	HAND	HMIS	HMIS	390,233			71%		Accepted
RANKING POLICY #2: Renewal Projects with Less Than 12 Months Operation by									
3	Ruth Ellis Center	Clairmount Center	PSH	221,848			100%		Accepted
4	NSO	Clay Apartments PSH	PSH	530,359			88%		Accepted
5	NLSM	Project Upward Bound	RRH	327,227			n/a		Accepted
6	AFG	DV TH-RRH	TH-RRH	565,704			93%		Accepted
7	HAND	Detroit CE-SSO	CE-SSO	959,341			N/A		Accepted
RANKING POLICY #3: New CE-SSO Expansion Project									
8	HAND	Detroit CE-SSO Expansion	CE-SSO	350,000	350,000		N/A		Accepted
RANKING POLICY #4: Renewal PSH									
9	CHS	Permanent Community Home Support II	PSH	1,438,911		100%	97%		Accepted
10	Cass	Thomasson Apartments	PSH	177,318		100%	88%		Accepted
11	DWIHN	Southwest Solutions Matrix Rental Assistance Program	PSH	348,201		100%	87%		Accepted
12	Cass	Webb Street Permanent Supportive Housing	PSH	241,586		100%	85%		Accepted
13	Cass	Travis Permanent Supportive Housing	PSH	429,971		100%	83%		Accepted
14	DWIHN	DCI/COTS Omega	PSH	546,536		100%	80%		Accepted
15	TASMD	Infinity PSH	PSH	1,147,342		100%	70%		Accepted
16	MDHHS	Detroit PSH	PSH	2,968,572		99%			Accepted
17	NSO	Supportive Housing	PSH	403,493		98%	97%		Accepted
18	NLSM	Project Hope	PSH	627,003		98%	89%		Accepted
19	NLSM	Project Hope II	PSH	852,447		98%	85%		Accepted
20	DWIHN	Detroit Central City Rental Assistance Program	PSH	397,015		96%			Accepted
21	NSO	Bell Supportive Housing Project	PSH	607,790		91%	90%		Accepted
22	SWCS	LA CONSOLIDATION	PSH	1,019,874		91%	83%		Accepted
23	Cass	Scott Permanent Supportive Housing	PSH	230,843		91%	82%		Accepted

FY2023 Detroit CoC Project Priority Ranking List

September 13, 2023

Project Rank	Applicant Name	Project Name	Project Type	Requested Funding Amount	Reallocated Funds*	Project Score			Accepted or Rejected**
						Total % Earned on Component 2	Overall % earned on application (1st Tie breaker)	% earned on 1A (2nd tie-breaker)	
24	Cass	Brady Apartments PSH	PSH	543,596		91%	77%		Accepted
25	TASMD	BEIT PSH	PSH	954,473	(106,053)	91%	66%		Accepted
26	NSO	FUSE	PSH	266,418		89%			Accepted
27	COTS	Buersmeyer Manor	PSH	154,194		87%	82%		Accepted
28	COTS	Pathways	PSH	853,814		87%	76%		Accepted
29	WMCAA	RENEWAL OF Detroit PSH	PSH	1,889,627		80%	83%		Accepted
30	CCIH	PSH Renewal FY2023	PSH	1,108,292	(123,143)	80%	68%	71%	Accepted
31	CCIH	Leasing Renewal FY2023	PSH	635,804	(70,645)	80%	68%	60%	Accepted
32	NSO	NSO/COTS	PSH	125,832		78%	78%		Accepted
33	SWCS	RA CONSOLIDATION	PSH	1,373,530		78%	74%		Accepted
34	DRMM	Cornerstone PSH	PSH	1,104,943	(368,314)	75%			Accepted
35	CHS	Permanent Community Home Support I	PSH	586,280		73%			Accepted
36	DWIHN	Detroit Central City Permanent Housing	PSH	484,217		69%			Accepted
RANKING POILCY #5: Renewal DV TH-RRH									
37	NLSM	Project First Steps	TH-RRH	794,157		100%			Accepted
RANKING POILCY #6: Renewal RRH									
38	NSO	RRH	RRH	331,234		96%			Accepted
39	NLSM	NLSM Cares	RRH	1,278,504		80%	76%		Accepted
40	SWCS	COC RRH RENEWAL	RRH	382,982	(42,553)	80%	68%		Accepted
41	NLSM	Project Permanency One (Tier 1 portion)	RRH	374,555		76%			Accepted
Tier 1 Limit: \$28,871,604									
TIER 2 PROJECTS									
41	NLSM	Project Permanency One (Tier 2 portion)	RRH	891,127		76%			Accepted
42	AFG	Detroit Youth RRH	RRH	278,079	(30,898)	72%			Accepted
43	Mariners Inn	Mariners Inn Permanent Supportive Housing***	PSH	249,927		36%			Accepted
RANKING POILCY #7: Renewal TH									
44	MCHS	TIPS	TH	362,392		75%			Accepted

FY2023 Detroit CoC Project Priority Ranking List

September 13, 2023

Project Rank	Applicant Name	Project Name	Project Type	Requested Funding Amount	Reallocated Funds*	Project Score			Accepted or Rejected**
						Total % Earned on Component 2	Overall % earned on application (1st Tie breaker)	% earned on 1A (2nd tie-breaker)	
RANKING POILCY #8: New CoC Bonus/Reallocation (ranked according to project type, then score)									
45	Southwest Housing Solutions	Campbell St. PSH	PSH	226,689	226,689		89.6%		Accepted
46	NLSM	Project Hope Expansion	PSH	431,931	164,917		76.6%		Accepted
47	AFG	Dr. Maya Angelou Village	PSH	347,116			83.4%		Accepted
48	NSO	Bell Building Expansion	PSH	744,259			79.9%		Accepted
49	Mariners Inn	The Anchor Expansion	PSH	110,929			77.1%		Accepted
50	WMCAA	Detroit PSH Expansion	PSH	548,601			72.8%		Accepted
51	Black Family Development	RRH	RRH	401,661			73.8%		Accepted
RANKING POILCY #9: New DV Bonus (ranked according to project type, then score)									
52	Freedom House Detroit	DV TH-RRH	TH-RRH	735,371			84.6%		Accepted
53	MCEDSV	DV CE-SSO	CE-SSO	528,000			84.1%		Accepted
TOTAL RENEWAL AND NEW PROJECT FUNDING REQUESTED:				34,727,686					

*This column indicates if a project had funding reduced/reallocated (a negative number) or if a project is being funded with reallocated dollars (positive number)

** This column indicates if a project submitted to the CoC was accepted or rejected for submission to HUD

*** Per CoC ranking policy, renewal PSH projects that score less than 90% on overall score, AND permanent housing placement/rentention, AND utilization will be ranked with renewal RRH according to % earned on Component 2. Mariners Inn's renewal PSH earned less than 90% on all three of those components and therefore is ranked with RRH projects accordingly.



Detroit Continuum of Care
FY2023 Detroit Continuum of Care Competition
Project Priority Ranking Policies
August 2023

This document provides the policies by which projects seeking funding in the FY2023 Continuum of Care competition will be prioritized and ranked.

A. Project Priority Ranking Order

The Detroit Continuum of Care (CoC) is required to prioritize and rank projects applying for Continuum of Care (CoC) funding in the annual CoC competition. Projects seeking renewal or new funding in the FY2023 CoC competition will be prioritized and ranked as follows. Also given is the tier (Tier 1 or Tier 2) it is anticipated the projects will fall into.

	Priority Ranking Order Group
Anticipated Tier 1	<p>1. The <i>CoC's renewal infrastructure projects</i> will be ranked first, by overall percentage scored on the renewal application, from highest to lowest, unless the project scores less than 90% on both of the following: Overall score and CAM Implementing Partner or HMIS Lead Agency Specific component, (Component 7 or Component 9). Projects scoring less than 90% on both components will be ranked with renewal Permanent Supportive Housing projects according to the project's overall score.</p> <p>For the purposes of project prioritization and ranking, "infrastructure projects" are defined as dedicated HMIS grants and Coordinated Entry Supportive Services Only (CE-SSO) grants.</p>
Anticipated Tier 1	<p>2. <i>Renewal projects that have not yet completed one full calendar year of operations as of 12/31/2022</i> will be ranked in the following order by overall percentage scored on the application, from highest to lowest:</p> <ul style="list-style-type: none"> a. PSH projects b. RRH projects c. TH-RRH projects d. CE-SSO projects e. Dedicated HMIS projects <p><i>Note: This ranking order only applies to "stand-alone" renewal projects. Projects that received new expansion funding in FY2021 will be ranked as a renewal project according to project type in ranking order 4, 5, or 6.</i></p>
Anticipated Tier 1	<p>3. <i>New CE-SSO Set-Aside for New CAM Lead Agency (CE-SSO):</i> A new project submitted with CoC Bonus funds, in an amount not to exceed \$350,000 will be submitted by the CAM Lead Agency.</p>
Anticipated Tier 1	<p>4. <i>Renewal Permanent Supportive Housing (PSH)</i> projects ranked by the percentage of points earned on Component 2 (Housing Performance & Quality), from highest to lowest, unless the project scores less than 90% on all three of the following: Overall score, Permanent Housing Placement or Retention (component 2A) and Average Utilization (component 2B). Projects scoring less than 90% on all three of these components will be ranked with renewal Rapid Rehousing projects according to the percentage of points earned on Component 2 (Housing Performance & Quality).</p>

Priority Ranking Order Group	
Anticipated Tier 1	5. Renewal Domestic Violence Joint Component Transitional Housing-Rapid Rehousing (TH-RRH) projects , ranked by the percentage of points earned on Component 2 (Housing Performance & Quality), from highest to lowest, unless project scores less than 90% on all three of the following : Overall score, Permanent Housing Placement (component 2A) and Average Utilization (component 2B). Projects scoring less than 90% on all three of these components will be ranked with renewal Transitional Housing projects according to the percentage of points earned on Component 2 (Housing Performance & Quality).
Anticipated Tier 1/ Tier 2 Straddle	6. Renewal Rapid Rehousing (RRH) projects ranked by the percentage of points earned on Component 2 (Housing Performance & Quality), from highest to lowest, unless project scores less than 90% on all three of the following : Overall score, Permanent Housing Placement (component 2A) and Average Utilization (component 2B). Projects scoring less than 90% on all three of these components will be ranked with renewal Transitional Housing projects according to the percentage of points earned on Component 2 (Housing Performance & Quality).
Anticipated Tier 2	7. Renewal Transitional Housing (TH) projects ranked by the percentage of points earned on Component 2 (Housing Performance & Quality), from highest to lowest, unless project scores less than 90% on all three of the following : Overall score, Permanent Housing Placement (component 2A) and Average Utilization (component 2B). Projects scoring less than 90% on all three of these components will be ranked at the bottom of the project ranking list by the percentage of points earned on Component 2 (Housing Performance & Quality).
Anticipated Tier 2	8. New, including new expansion project(s), created via reallocation and/or CoC Bonus funds in the following order by overall project score: <ol style="list-style-type: none"> a. New or expansion PSH projects that, if funded, would bring additional units of PSH to the CoC, with a baseline goal of at least 40 new units. b. New or expansion PSH projects requesting supportive services funding only. c. Remaining new or expansion PSH projects. d. New or expansion RRH projects. e. Expansion Dedicated HMIS. f. Expansion CE-SSO projects (other than the set-aside listed above).
Anticipated Tier 2	9. New, including new expansion project(s), created via DV Bonus funds in the following order by overall project score: <ol style="list-style-type: none"> a. New or expansion RRH projects. b. New or expansion TH-RRH projects. c. New or expansion CE-SSO projects.

B. Exclusion or Removal from Project Ranking List

The Detroit CoC reserves the right to exclude or remove a renewal project from the project ranking list, and consequently not submit a project for renewal funding, in the event of written notification from the local HUD Field Office that the project has been out of compliance with regulatory or programmatic requirements and has made no progress on any corrective actions as required by HUD. Any renewal projects excluded or removed from the project ranking list will be reallocated to a new project(s).

C. Consolidated Project Ranking

Projects that submit as a consolidated project will be ranked as follows:

- The individual projects will be ranked according to individual project score; and

- The consolidated project will be ranked according to the highest scoring individual project included in the consolidation.

D. Tiebreaking Criteria

Tiebreaking criteria will be applied as follows:

Ranking order #1 (renewal Infrastructure projects):

1. First tiebreaker: the percentage earned on the project-specific scoring component (Component 7 or Component 9)
2. Second tiebreaker: renewal CE-SSO project(s) will be ranked above renewal HMIS projects, as CE-SSO projects provide direct services to people experiencing homelessness.

Ranking order #2 (renewals with less than 12 months operation):

1. First tiebreaker: the time the application was submitted to HAND, from first submitted to last.

Ranking orders #4, #5, #6, and #7 (renewal PSH, RRH, TH-RRH, and TH):

1. First tiebreaker: the overall percentage the project earned on its renewal application.
2. Second tiebreaker: the percentage earned on component 1A of the project performance in the local application (leaving with source of cash income).
3. Third tiebreaker: the percentage earned on component 1B of the project performance in the local application (leaving with source of non-cash income).

Ranking orders #8, #9 (new projects):

1. First tiebreaker for PSH, RRH, TH-RRH project applications: Percentage of points earned on past housing outcomes data. For new, non-expansion, projects this will be based on the narrative response given in the application as scored by the review committee. For expansion projects, this will be based on the score earned on component 2A of the renewal being expanded. Expansion projects still in first year of operation with no data for Component 2A will be ranked last within this tie-breaking group.

First tiebreaker for CE-SSO applications: Percentage of points earned on narrative response in the application on applicant experience in area of request as scored by the review committee.

2. Second tiebreaker for all applications: Percentage of points earned on Housing First response in the project application as scored by the review committee.

E. Projects Straddling Tier 1/Tier 2

If a project, once listed in ranked order, straddles the Tier 1/Tier 2 funding line with a portion of the project budget falling within Tier 1 and the remaining within Tier 2, the feasibility of the project to operate with only the Tier 1 amount will be determined as follows:

1. In the annual renewal application, agencies will indicate the minimum amount of funding needed for the renewal project to still be feasible.
2. The Values & Funding Priorities Committee will review this response for the project straddling the Tier 1/Tier 2 line and decide whether the project would be feasible at the reduced amount. If the Committee decides it will be feasible, the project will be submitted as is, straddling the Tier 1/Tier 2 line. If the Committee determines it would not be feasible, that project will be dropped down so that it is wholly in Tier 2, and the next ranked project will be moved up. The feasibility of this project will then be determined.
3. If an agency indicates a minimum amount needed to still be feasible exceeding the project's Tier 1 amount, that project will be automatically moved down into Tier 2, and the next ranked project will be moved up and the process given in #2 above will then be repeated with the next ranked project.
4. This process will continue until the following are realized:
 - a. All Tier 1 funds are allocated; OR
 - b. The amount of funds remaining in Tier 1 are a negligible amount. If this occurs, the CoC retains the discretion to allocate the remaining funds to another project in Tier 1 that can accept additional

funds. The Collaborative Applicant will make a recommendation on this allocation; this recommendation will be reviewed and approved by the CoC Board before implementing.

5. If the amount remaining in Tier 1 is of such a small amount that no project indicates it would be feasible at that reduced amount, steps 2 through 4 will not apply, but rather the projects will be ranked according to their original ranked order.

F. Renewal Project Threshold Score

All projects applying for renewal funding will be evaluated and scored on a given point scale which will be given in the FY2023 CoC Application Policies. In the FY2023 competition, renewal projects must score at least 70% of the points possible in order to be placed on the project ranking list, unless an appeal is granted. Renewal projects that do not score at least 70% will be able to submit an appeal in accordance with the Appeals Policy. Projects should anticipate the 70% threshold may increase in subsequent competitions.

G. Final Ranking List Review and Recommendation

Following the review, scoring, and appeals of renewal projects and board decisions on new project applications, a preliminary project ranking list will be developed in accordance with the above priority ranking order. This ranking list, with projects identified by name and type, will be reviewed by the Values & Funding Priorities Committee. The Values & Funding Priority Committee may recommend to the CoC board that a project(s) that would have been in Tier 2 because of the ranking policies instead be placed into Tier 1. If the Committee chooses to move a Tier 2 project up to Tier 1, it will need to provide rationale for the recommendation. The Committee will present its final recommended project ranking list to the CoC board in accordance with the timeframe required by HUD. The CoC board will make the final decision on the project ranking list.

H. Renewal Project Appeals

The process by which renewal projects may appeal their project score is given in the CoC's Appeals Policy. A project may not appeal its placement on the project priority ranking list.

I. Project Priority and Ranking Policy Review Post NOFO Release

These policies have been developed prior to the release of the FY2023 CoC Program Notice of Funding Opportunity (NOFO). The preliminary policies were approved noting that adjustments may need to be made following the release of the FY2023 NOFO to ensure the policies aligned with, and did not contradict, the NOFO. Following a review of the FY2023 NOFO, released on 7/5/2023, no changes were needed to this ranking order to prevent contradiction with any language in the NOFO.

Screen Shot of Public Posting of Final Project Ranking List

ClickTime - Day View | Home | Microsoft 365 | Continuum of Care Funding — | +

handetroit.org/continuum-of-care-funding

hand
HOMELESS ACTION NETWORK OF DETROIT

WHO WE ARE | WHAT WE DO | RESOURCES | GET INVOLVED | CONTINUUM OF CARE | **NEED HELP?**

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FY2023 Continuum of Care Competition

FY2023 CoC Competition Public Postings

[Final Project Priority Ranking List](#)

On September 13, 2023, the Detroit CoC board approved the final project priority ranking list. This list includes all of the projects the CoC has accepted for submission to HUD for funding in the FY2023 CoC competition. This ranking list may be accessed here:

[FY2023 Project Priority Ranking List](#)

FY2023 CoC Local Project Application Materials

New Project Applications

Applications for new project funding were due to HAND on August 4, 2023. Full details on this funding opportunity are found in the Request for Proposals, which may be accessed [here](#).

4:46 PM
9/13/2023

Attachment 1E-5b: Final Project Scores for All Projects

CoC: MI-501

Project Rank	Applicant Name	Project Name	Project Type	Requested Funding Amount	Reallocated Funds*	Project Score			Accepted or Rejected**
						Total % Earned on Component 2	Overall % earned on application (1st Tie breaker)	% earned on 1A (2nd tie-breaker)	
TIER 1 PROJECTS									
RANKING POLICY #1: Renewal CoC Infrastructure									
1	CHS	Coordinated Assessment & Navigation Project	CE-SSO	847,538			99%		Accepted
2	HAND	HMIS	HMIS	390,233			71%		Accepted
RANKING POLICY #2: Renewal Projects with Less Than 12 Months Operation by									
3	Ruth Ellis Center	Clairmount Center	PSH	221,848			100%		Accepted
4	NSO	Clay Apartments PSH	PSH	530,359			88%		Accepted
5	NLSM	Project Upward Bound	RRH	327,227			n/a		Accepted
6	AFG	DV TH-RRH	TH-RRH	565,704			93%		Accepted
7	HAND	Detroit CE-SSO	CE-SSO	959,341			N/A		Accepted
RANKING POLICY #3: New CE-SSO Expansion Project									
8	HAND	Detroit CE-SSO Expansion	CE-SSO	350,000	350,000		N/A		Accepted
RANKING POLICY #4: Renewal PSH									
9	CHS	Permanent Community Home Support II	PSH	1,438,911		100%	97%		Accepted
10	Cass	Thomasson Apartments	PSH	177,318		100%	88%		Accepted
11	DWIHN	Southwest Solutions Matrix Rental Assistance Program	PSH	348,201		100%	87%		Accepted
12	Cass	Webb Street Permanent Supportive Housing	PSH	241,586		100%	85%		Accepted
13	Cass	Travis Permanent Supportive Housing	PSH	429,971		100%	83%		Accepted
14	DWIHN	DCI/COTS Omega	PSH	546,536		100%	80%		Accepted
15	TASMD	Infinity PSH	PSH	1,147,342		100%	70%		Accepted
16	MDHHS	Detroit PSH	PSH	2,968,572		99%			Accepted
17	NSO	Supportive Housing	PSH	403,493		98%	97%		Accepted
18	NLSM	Project Hope	PSH	627,003		98%	89%		Accepted
19	NLSM	Project Hope II	PSH	852,447		98%	85%		Accepted
20	DWIHN	Detroit Central City Rental Assistance Program	PSH	397,015		96%			Accepted
21	NSO	Bell Supportive Housing Project	PSH	607,790		91%	90%		Accepted
22	SWCS	LA CONSOLIDATION	PSH	1,019,874		91%	83%		Accepted
23	Cass	Scott Permanent Supportive Housing	PSH	230,843		91%	82%		Accepted
24	Cass	Brady Apartments PSH	PSH	543,596		91%	77%		Accepted

Project Rank	Applicant Name	Project Name	Project Type	Requested Funding Amount	Reallocated Funds*	Project Score			Accepted or Rejected**
						Total % Earned on Component 2	Overall % earned on application (1st Tie breaker)	% earned on 1A (2nd tie-breaker)	
25	TASMD	BEIT PSH	PSH	954,473	(106,053)	91%	66%		Accepted
26	NSO	FUSE	PSH	266,418		89%			Accepted
27	COTS	Buersmeyer Manor	PSH	154,194		87%	82%		Accepted
28	COTS	Pathways	PSH	853,814		87%	76%		Accepted
29	WMCAA	RENEWAL OF Detroit PSH	PSH	1,889,627		80%	83%		Accepted
30	CCIH	PSH Renewal FY2023	PSH	1,108,292	(123,143)	80%	68%	71%	Accepted
31	CCIH	Leasing Renewal FY2023	PSH	635,804	(70,645)	80%	68%	60%	Accepted
32	NSO	NSO/COTS	PSH	125,832		78%	78%		Accepted
33	SWCS	RA CONSOLIDATION	PSH	1,373,530		78%	74%		Accepted
34	DRMM	Cornerstone PSH	PSH	1,104,943	(368,314)	75%			Accepted
35	CHS	Permanent Community Home Support I	PSH	586,280		73%			Accepted
36	DWIHN	Detroit Central City Permanent Housing	PSH	484,217		69%			Accepted
RANKING POILCY #5: Renewal DV TH-RRH									
37	NLSM	Project First Steps	TH-RRH	794,157		100%			Accepted
RANKING POILCY #6: Renewal RRH									
38	NSO	RRH	RRH	331,234		96%			Accepted
39	NLSM	NLSM Cares	RRH	1,278,504		80%	76%		Accepted
40	SWCS	COC RRH RENEWAL	RRH	382,982	(42,553)	80%	68%		Accepted
41	NLSM	Project Permanency One (Tier 1 portion)	RRH	374,555		76%			Accepted
Tier 1 Limit: \$28,871,604									
TIER 2 PROJECTS									
41	NLSM	Project Permanency One (Tier 2 portion)	RRH	891,127		76%			Accepted
42	AFG	Detroit Youth RRH	RRH	278,079	(30,898)	72%			Accepted
43	Mariners Inn	Mariners Inn Permanent Supportive Housing***	PSH	249,927		36%			Accepted
RANKING POILCY #7: Renewal TH									
44	MCHS	TIPS	TH	362,392		75%			Accepted
RANKING POILCY #8: New CoC Bonus/Reallocation (ranked according to project type, then score)									
45	Southwest Housing Solutions	Campbell St. PSH	PSH	226,689	226,689		89.6%		Accepted
46	NLSM	Project Hope Expansion	PSH	431,931	164,917		76.6%		Accepted

Project Rank	Applicant Name	Project Name	Project Type	Requested Funding Amount	Reallocated Funds*	Project Score			Accepted or Rejected**
						Total % Earned on Component 2	Overall % earned on application (1st Tie breaker)	% earned on 1A (2nd tie-breaker)	
47	AFG	Dr. Maya Angelou Village	PSH	347,116			83.4%		Accepted
48	NSO	Bell Building Expansion	PSH	744,259			79.9%		Accepted
49	Mariners Inn	The Anchor Expansion	PSH	110,929			77.1%		Accepted
50	WMCAA	Detroit PSH Expansion	PSH	548,601			72.8%		Accepted
51	Black Family Development	RRH	RRH	401,661			73.8%		Accepted
RANKING POILCY #9: New DV Bonus (ranked according to project type, then score)									
52	Freedom House Detroit	DV TH-RRH	TH-RRH	735,371			84.6%		Accepted
53	MCEDSV	DV CE-SSO	CE-SSO	528,000			84.1%		Accepted
TOTAL RENEWAL AND NEW PROJECT FUNDING ACCEPTED:				34,727,686					
N/A	HAND	CoC Planning	CoC Planning	1,500,000		N/A: Planning grants are not scored			Accepted
GRAND TOTAL OF ALL FUNDING SUBMITTED TO HUD				36,227,686					
	Project Rejected								
N/A	First Step	First Step DV-THRR	TH-RRH	720,050			64.5%		Rejected

*This column indicates if a project had funding reduced/reallocated (a negative number) or if a project is being funded with reallocated dollars (positive number)

** This column indicates if a project submitted to the CoC was accepted or rejected for submission to HUD

*** Per CoC ranking policy, renewal PSH projects that score less than 90% on overall score, AND permanent housing placement/rentention, AND utilization will be ranked with renewal RRH according to % earned on Component 2. Mariners Inn's renewal PSH earned less than 90% on all three of those components and therefore is ranked with RRH projects accordingly.

**Attachment 1E-5c: Web Posting of CoC Approved Consolidated
Application**

CoC: MI-501



CONTINUUM OF CARE

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[Final CoC Approved FY2023 Continuum of Care Application \(posted 9/25/2023\)](#)

The final FY2023 Continuum of Care application may be accessed [here](#). This is the CoC application approved by the CoC membership on 9/19/2023.

[Final FY2023 CoC Project Priority Ranking Listing \(posted 9/25/2023\)](#)

The final FY2023 CoC Project Priority Ranking Listing, as will be submitted to HUD, may be accessed [here](#).

[Final Project Priority Ranking List](#)

On September 13, 2023, the Detroit CoC board approved the final project priority ranking list. This list includes all of the projects the CoC has accepted for submission to HUD for funding in the FY2023 CoC competition. This ranking list may be accessed [here](#).

**Attachment 1E-5d: Notification of CoC Approved Consolidated
Application**

CoC: MI-501

Amanda Sternberg

From: Homeless Action Network of Detroit <kimberly@handetroit.org>
Sent: Monday, September 25, 2023 5:07 PM
To: Amanda Sternberg
Subject: Detroit CoC Newsletter September 25

[View as Webpage](#)

“We cannot seek achievement for ourselves and forget about progress and prosperity for our community...Our ambitions must be broad enough to include the aspirations and needs of others, for their sakes and for our own.”

- [Caesar Chavez](#)



Official Detroit CoC Newsletter

September 25, 2023

If you live in Detroit, Hamtramck, or Highland Park and are experiencing homelessness, please call CAM at (313) 305-0311. *Intake is call-in only.*

NEW CAM Operating hours: Monday through Friday, 8AM - 6PM

Detroit CoC NEWS

**Final FY2023 Continuum of Care Application and
Project Priority Listing Posted**



The final FY2023 Detroit Continuum of Care Application and Project Priority Listing have been publicly posted to HAND's website, and may be accessed [here](#). This is the CoC application the CoC general membership voted to approve on September 19, 2023. This application, and all project applications, will be submitted to HUD by September 28, 2023.

If you have questions about the CoC Application, please contact Amanda Sternberg at amanda@handetroit.org or 313-380-1714.

Check out the new CAM Website!

If you haven't already, make sure to check out the new [CAM website](#). We're continually improving the site and adding more information including service updates and reports.

For regular updates, sign up for the CAM newsletter [here](#).



2024 Detroit CoC Board Election Applications Now Available

If you or someone you know is passionate about making homelessness rare, brief, and non-recurring, please join the board!

Nominations are due October 11th and regular applications are due October 25th. Elections will be held November 21st at our [General membership meeting](#). More information available [here](#).



Follow us on the net!



**Questions? Want to submit an item for our newsletter?
Email Kimberly Benton at kimberly@handetroit.org**

Homeless Action Network of Detroit | 3701 Miracles Blvd, Suite 101, 3701 Miracles Blvd, Suite
101,
Detroit, MI 48201

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Below is a screen shot from Constant Contact, the email listserv tool used by the Detroit CoC. Highlighted is demonstration that the email notifying CoC members of the posting of the CoC application went out on 9/25/2023.


Also highlighted is the list of contacts this notice went to. As is demonstrated, this email listserv was sent to a broad group of stakeholders, including CoC members, homeless service providers, and anyone else in the CoC who has signed up to receive messages from the CoC.

← → ↻ app.constantcontact.com/pages/campaigns/email-details/details/activity/ce259eed-591a-4f8f-af46-04e45aedcdf


Home Marketing campaigns ▾ Contacts ▾ Reporting Tools ▾

Sent Detroit CoC Newsletter September 25

Details Reporting Heat Map



Subject	Detroit CoC Newsletter September 25
Pre header	News, events, and resources for our community.
From name	Homeless Action Network of Detroit
Sent	September 25th 2023 at 5:03 pm EDT
From Address	kimberly@handetroit.org
Reply to address	kimberly@handetroit.org
Lists	2023 Board Members, CoC General Membership, CoC Homeless Service Providers, General Interest, HAND Board, HAND Staff, Media Show less
Email link	https://conta.cc/3rAJAVw

 Preview

Attachment 2A-6: HUD HDX Report

CoC: MI-501

Attached is the HDX report export. Also attached is an email from William Snow from HUD noting that the Detroit CoC's submission of SPMs will be considered to have been submitted on time.

2023 HDX Competition Report
PIT Count Data for MI-501 - Detroit CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	1589	1379	1691	1482
Emergency Shelter Total	990	1,047	1,279	1070
Safe Haven Total	23	23	16	19
Transitional Housing Total	490	223	194	191
Total Sheltered Count	1503	1293	1489	1280
Total Unsheltered Count	86	86	202	202

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	187	193	262	282
Sheltered Count of Chronically Homeless Persons	154	160	205	225
Unsheltered Count of Chronically Homeless Persons	33	33	57	57

2023 HDX Competition Report

PIT Count Data for MI-501 - Detroit CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	171	112	197	144
Sheltered Count of Homeless Households with Children	171	112	197	144
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	385	288	200	151	150
Sheltered Count of Homeless Veterans	352	279	191	142	141
Unsheltered Count of Homeless Veterans	33	9	9	9	9

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

HIC Data for MI-501 - Detroit CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	1,019	952	952	100.00%	67	67	100.00%	1,019	100.00%
SH Beds	35	35	35	100.00%	0	0	NA	35	100.00%
TH Beds	234	233	234	99.57%	0	0	NA	233	99.57%
RRH Beds	726	721	726	99.31%	0	0	NA	721	99.31%
PSH Beds	2,883	2,522	2,883	87.48%	0	0	NA	2,522	87.48%
OPH Beds	257	257	257	100.00%	0	0	NA	257	100.00%
Total Beds	5,154	4,720	5,087	92.79%	67	67	100.00%	4,787	92.88%

2023 HDX Competition Report
HIC Data for MI-501 - Detroit CoC

2023 HDX Competition Report

HIC Data for MI-501 - Detroit CoC

Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

**For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	2138	2236	2218	2225

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	200	194	175	135

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	853	891	902	726

2023 HDX Competition Report
HIC Data for MI-501 - Detroit CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for MI-501 - Detroit CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	3695	4713	94	109	15	55	69	14
1.2 Persons in ES, SH, and TH	4076	5002	125	125	0	72	81	9

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	4438	5543	418	471	53	171	192	21
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	4686	5778	428	477	49	193	203	10

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	261	11	4%	5	2%	13	5%	29	11%
Exit was from ES	1643	207	13%	97	6%	110	7%	414	25%
Exit was from TH	339	21	6%	10	3%	19	6%	50	15%
Exit was from SH	18	2	11%	0	0%	2	11%	4	22%
Exit was from PH	574	41	7%	28	5%	23	4%	92	16%
TOTAL Returns to Homelessness	2835	282	10%	140	5%	167	6%	589	21%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		1691	
Emergency Shelter Total	1047	1279	232
Safe Haven Total	23	16	-7
Transitional Housing Total	223	194	-29
Total Sheltered Count	1293	1489	196
Unsheltered Count		202	

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	4259	5084	825
Emergency Shelter Total	3879	4775	896
Safe Haven Total	43	53	10
Transitional Housing Total	613	516	-97

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1427	1453	26
Number of adults with increased earned income	72	60	-12
Percentage of adults who increased earned income	5%	4%	-1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1427	1453	26
Number of adults with increased non-employment cash income	400	445	45
Percentage of adults who increased non-employment cash income	28%	31%	3%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	1427	1453	26
Number of adults with increased total income	438	494	56
Percentage of adults who increased total income	31%	34%	3%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	491	648	157
Number of adults who exited with increased earned income	38	47	9
Percentage of adults who increased earned income	8%	7%	-1%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	491	648	157
Number of adults who exited with increased non-employment cash income	148	159	11
Percentage of adults who increased non-employment cash income	30%	25%	-5%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	491	648	157
Number of adults who exited with increased total income	180	198	18
Percentage of adults who increased total income	37%	31%	-6%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	3845	4432	587
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1394	1037	-357
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	2451	3395	944

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	4561	5321	760
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1667	1440	-227
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	2894	3881	987

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	958	1049	91
Of persons above, those who exited to temporary & some institutional destinations	269	261	-8
Of the persons above, those who exited to permanent housing destinations	500	528	28
% Successful exits	80%	75%	-5%

Metric 7b.1 – Change in exits to permanent housing destinations

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	3041	4020	979
Of the persons above, those who exited to permanent housing destinations	1579	2225	646
% Successful exits	52%	55%	3%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	2713	2807	94
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2687	2783	96
% Successful exits/retention	99%	99%	0%

2023 HDX Competition Report

FY2022 - SysPM Data Quality

MI-501 - Detroit CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	834	970	969	569	329	271	2855	2947	3117	837	828	839			
2. Number of HMIS Beds	834	970	969	569	329	271	2300	2397	2630	837	828	839			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	80.56	81.34	84.38	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	5341	3913	4777	975	617	515	2773	2947	3119	1526	1987	2100	2511	2146	2329
5. Total Leavers (HMIS)	4648	3117	3879	709	410	364	323	361	503	645	768	1170	1154	1113	1119
6. Destination of Don't Know, Refused, or Missing (HMIS)	59	66	108	36	15	4	1	5	4	9	2	5	402	30	25
7. Destination Error Rate (%)	1.27	2.12	2.78	5.08	3.66	1.10	0.31	1.39	0.80	1.40	0.26	0.43	34.84	2.70	2.23

2023 HDX Competition Report
FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for MI-501 - Detroit CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/27/2023	Yes
2023 HIC Count Submittal Date	4/27/2023	Yes
2022 System PM Submittal Date	3/1/2023	No

From: [Kiana Harrison](#)
To: [Amanda Sternberg](#); [Denise Goshton](#)
Subject: Fw: Follow up & Request for Guidance RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question
Date: Thursday, September 21, 2023 5:42:58 PM

Yesssss! :) finally heard from Mr. Snow!.

From: Snow, William <William.Snow@hud.gov>
Sent: Thursday, September 21, 2023 10:30 AM
To: Kiana Harrison <kiana@handetroit.org>; HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Cc: CoCNOFO <CoCNOFO@hud.gov>
Subject: RE: Follow up & Request for Guidance RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Hey Kiana,

I'm sorry. For some reason this had slipped off my radar. I can confirm that we have documentation that your submission was on time. We will rely on that documentation for scoring purposes.

Thanks,

William Snow
Office of Special Needs Assistance Programs
U.S. Department of Housing and Urban Development
William.Snow@hud.gov

From: Kiana Harrison <kiana@handetroit.org>
Sent: Thursday, September 21, 2023 7:30 AM
To: HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>; Snow, William <William.Snow@hud.gov>
Cc: CoCNOFO <CoCNOFO@hud.gov>
Subject: FW: Follow up & Request for Guidance RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Hi – I realize this is busy time for HUD! Just following up on the inquiry below – We are preparing to submit our application and wanted to get guidance about the SPM submission status (details below). I apologize not including the other email addresses last month.

Thank You, Kiana

Kiana L. Harrison, LMSW (Micro & Macro Licensed)
HAND HMIS Manager

3701 Miracles Boulevard; Suite 101
Detroit, Mi 48201
Direct Line: 313-380-1715
www.handetroit.org

From: Kiana Harrison <kiana@handetroit.org>
Sent: Friday, August 18, 2023 11:11 AM
To: HUDCoCSystemPerformance HUDCoCSystemPerformance@hud.gov
Subject: Follow up & Request for Guidance RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Good Morning William – Hope all is well with you!

As we continue to prepare our CoC application I wanted to request guidance related to the decision below. I am aware there is limited support that you can provide during the competition.

The MI 501 - HDX report is still reflecting the SPM's as late. Do we need to attach the email (below) as confirmation of the "on-time" status or is there an internal mechanism that HUD has to denote the decision below?

Thank you, Kiana

Kiana L. Harrison, LMSW (Micro & Macro Licensed)
HAND HMIS Manager

3701 Miracles Boulevard; Suite 101
Detroit, Mi 48201
Direct Line: 313-380-1715
www.handetroit.org

From: HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Sent: Wednesday, March 15, 2023 9:38 AM
To: Kiana Harrison <kiana@handetroit.org>; HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Subject: RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Hey Kiana,

Thank you for your patience. We will count your report as on time for the purpose of the competition. We likely will not do that in the future under similar circumstances. Again, we know

you are all doing so much and appreciate your work.

Thanks,

William Snow
Office of Special Needs Assistance Programs
U.S. Department of Housing and Urban Development
William.Snow@hud.gov

From: Kiana Harrison <kiana@handetroit.org>
Sent: Monday, March 06, 2023 4:04 PM
To: HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Subject: RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Thank you William for your informative and honest response.

We pride ourselves in timely and accurate submissions and do not take your guidance or deadlines lightly. This was a one-time glitch that I never encountered before. I had not had issues previously signing in and I was sure of my password. My system looped continuously until I got the reset to go through. We have already started to put in place a mitigation plan in the event we have to submit on the “day of” in the future that includes additional “submit” authorization access as a back-up. It is our goal to submit early whenever we are able to do so.

Please keep me posted on what your final decision is – I appreciate your time and consideration.

Thank you, Kiana

Kiana L. Harrison, LMSW (Macro & Micro) - HMIS Manager
[Homeless Action Network of Detroit \(HAND\)](http://HomelessActionNetworkofDetroit.org)
3701 Miracles Boulevard, Suite 101
Detroit, MI 48201
O: (313) 964-3666 x105
Direct Line/Text: (313) 380-1715 ***New Number***
kiana@handetroit.org

From: HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Sent: Monday, March 6, 2023 3:18 PM
To: Kiana Harrison <kiana@handetroit.org>; HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Subject: RE: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Hey Kiana,

Thanks for your email. We just responded to your AAQ on this. We acknowledge the submission. I will need to confirm how to treat this for competition purposes. It appears you did not try to log into the system until the very last minute which is a common issue. User access issues should be resolved ahead of time. That being said, we know that there is also a lot going on. My guess is that I can get approval to allow it to go through this year as on time but we won't be able to approve that in the future if it is an issue tied to determining the correct user.

Thanks,

William Snow
Office of Special Needs Assistance Programs
U.S. Department of Housing and Urban Development
William.Snow@hud.gov

From: Kiana Harrison <kiana@handetroit.org>
Sent: Thursday, March 02, 2023 9:37 AM
To: HUDCoCSystemPerformance <HUDCoCSystemPerformance@hud.gov>
Subject: <External Message> FW: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. If you have concerns about the content of the email, please send it to phishing@hud.gov or click the Report Phishing Button on the Outlook ribbon or Phishing option within OWA.

Hi – I submitted three AAQ's on 2/28 related to issues with logging into HDX but I only go confirmation on two.

We were able to submit but it was past the 8pm deadline due to technical issues.

I am trying to find out what the immediate ramifications are as well as the CoC Competition implications for submitting the SPM late. I also asked for any consideration.

Please assist when you can.

I did attempt to send the info below to our AHAR Region 5 rep but it bounced back – I then copied that and submitted to the AAQ as a follow-up.

Thanks, Kiana

Kiana L. Harrison, LMSW (Macro & Micro) - HMIS Manager

Homeless Action Network of Detroit (HAND)
3701 Miracles Boulevard, Suite 101
Detroit, MI 48201
O: (313) 964-3666 x105
Direct Line/Text: (313) 380-1715 ***New Number***
kiana@handetroit.org

From: aaq@hudexchange.info <aaq@hudexchange.info>
Sent: Wednesday, March 1, 2023 12:11 AM
To: Kiana Harrison <kiana@handetroit.org>
Subject: Confirmation for Question ID 208567 - HUD Exchange Ask A Question

Question Status: In Progress

Thank you for submitting a question via the HUD Exchange. We will review the question and try to provide you with a response within 7-10 business days. However, note that some questions must be referred to HUD subject matter experts and/or attorneys and will take longer to address. We appreciate your patience as we work to provide a response as quickly as possible.

Requestor Name: Kiana Harrison

Requestor Email: kiana@handetroit.org

Question Related To: Homelessness Data Exchange (including AHAR, HIC, LSA, PDX, PIT, Stella, Sys PM)

Question ID: 208567

Question Subject:

SPM SUBMITTED LATE DUE TO TECHNICAL ISSUES

Question Text:

Hi. Hope all is well. I did also reach out to the AAQ.

Our SPM was complete with no errors at 5pm however we were not able to hit submit by 8pm.

The data entry admin (Denise Goshton) did not have submit rights. I do & was unable to get on the HDX site at all from 5pm to 9:00pm. I tried several times to log-in , on different computers even my phone & it kept looping. I was finally able to get a reset to go through at 9pm. Then was able to submit. Let me know if you want a copy of the Aaq request.

I am asking for any consideration. We have never submitted any of the regulatory reports tardy in our tenure.

Thanks a lot! Kiana

Please click on the [View Question] button below to perform the following actions:

- **View your question**, answer, and any applicable attachments
- **Add additional information** to this question
- **Ask another question** using the same requestor information
- **Cancel this question** if a response is no longer necessary

[View Question](#)

This email account (aaq@hudexchange.info) does not have the ability to reply to emails. Please DO NOT REPLY to this email address, as all messages sent to this address will not be responded to. Please direct any inquiries regarding HUD Exchange or its Ask A Question system to info@hudexchange.info or ask another question using the "View Question" link located above. Please keep this email for your records.

Attachment 3A-1a: Housing Leveraging Commitment

CoC: MI-501

Attached is documentation of the housing leveraging commitments from the following new PSH project applications:

Applicant	Project	Number of Units (Application Question 4B)	Number of Units with documented housing leverage
Alternatives for Girls	Dr. Maya Angelou Village	23	23
Mariners Inn	Mariners Inn Permanent Supportive Housing (aka The Anchor)	12	44
Southwest Housing Solutions	Campbell Street PSH	20	20

Alternatives for Girls Dr. Maya Angelou Village **Housing Leverage Documentation Details**

The following pages provide details to the housing leverage documentation being submitted for this new PSH project. Specifically, please find:

- Letter dated November 1, 2021 from the Michigan State Housing Development Authority (MSHDA) indicating the reservation of Low Income Housing Tax Credits (LIHTC) to this project, located at 16711 Burt Road, Detroit (the same address given for the project in Screen 4B in the project application). This award letter states all 45 units in this building have been awarded LIHTC.
- Letter dated March 23, 2022 from MSHDA stating that 23 of the units in this building have been awarded Project-Based Vouchers (PBV).
- Letter from Full Circle Communities (project developer) to the Detroit CoC updating on the progress of the project, noting that there will be 23 units of PSH in this project, targeted to the top 10% of the Detroit CoC's prioritization list. The Detroit CoC's prioritization policies for PSH prioritize people experiencing chronic homelessness first for PSH (a subset of DedicatedPLUS).
- Addendum III Initial Concept stating all 23 PSH units for this project will be targeted to the most vulnerable supportive housing populations, defined as the top 10% of the Detroit CoC's prioritization list. The Detroit CoC's prioritization policies for PSH prioritize people experiencing chronic homelessness first for PSH (a subset of DedicatedPLUS).
- Addendum III Application noting the 23 units in the project that will be targeted to the "top 10% of local CoC prioritization list".



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
LANSING

GARY HEIDEL
ACTING EXECUTIVE DIRECTOR

November 1, 2021

Carl Kunda
FCC AFG Burt Road Limited Dividend Housing Association Limited Partnership
310 S. Peoria Street, Suite 500
Chicago, IL 60607

Re: AFG Miller Grove Center (Project # L21033)

Dear Mr. Kunda:

The Michigan State Housing Development Authority has awarded the above referenced project a Reservation for Low Income Housing Tax Credit in an annual amount up to \$1,450,000. The Reservation document, included with this letter, is to be signed by an authorized representative of your organization, notarized, and returned to this office within ten days. The Reservation will not be considered valid, and the project will not be considered to have Tax Credits, until the signed document is received in our office.

The Reservation is conditional because the Environmental study received a Conditional Go. These conditions, which have been incorporated into the Reservation document, must be corrected for the Reservation to remain in effect. Information demonstrating that the conditions have been met must be submitted and determined to be acceptable by the Authority's LIHTC Allocations Manager and the Authority's Chief Environmental Officer no later than November 1, 2022, or the credit will be rescinded.

IMPORTANT NOTE on SUBSIDY LAYERING REVIEWS (SLR): For projects relying on the use of funding from HUD, USDA RD and/or MSHDA – Prior to the project closing on construction debt financing, permanent debt financing, and/or investor equity and starting construction, the applicant is required to complete a SLR Application (found on MSHDA's website) and submit the completed SLR Application to Katy VanHouten at MSHDA. All SLRs should be completed and approved prior to project closings. Please refer to the SLR Memorandum of Understanding (SLR MOU) and related documents on MSHDA's website for information regarding whether a SLR is required for your project and the process for having a SLR completed. According to the SLR MOU, Applicants should expect 30-40 working days to complete an SLR and are encouraged to coordinate and plan accordingly. A SLR will also be conducted at the time of final review after construction completion.

IMPORTANT NOTE on APPRAISAL REQUIREMENTS: For all projects having an acquisition cost as a part of the total project costs, please review LIHTC Allocation Policy #8, Real Estate Appraisal Requirements, found in Tab W of MSHDA's Combined Application for Rental Housing Programs, to understand how the acquisition costs included in the transaction will be valued.

735 EAST MICHIGAN AVENUE • P.O. BOX 30044 • LANSING, MICHIGAN 48909
Michigan.gov/MSHDA • FAX 517-335-4797 • TOLL-FREE 855-MI-MSHDA (855-648-7432)

AFG Miller Grove Center
November 1, 2021
Page 2

With regard to future deadlines the project will be expected to meet in order to demonstrate substantial progress, owners should also be reminded that all of the requirements of Section XII of the 2021 Qualified Allocation Plan must be fulfilled within one year of the date of the Reservation. Failure to fulfill these requirements will result in a loss of the tax credit allocation and may result in negative points to the Applicant in future funding rounds.

Also enclosed is the Gross Rent Floor Election form. This form must be signed and returned with the Reservation document.

The Authority charges a fee equal to 6% of the annual tax credit dollar amount awarded. Three percent of the annual tax credit dollar amount, \$43,500, is to be returned with the executed Reservation form. The remaining 3% shall be due at the time of the 10% Test.

All signed documents should be returned to the attention of Carol Thompson in the Low Income Housing Tax Credit Program office at the address below:

MSHDA
Low Income Housing Tax Credit Program
735 East Michigan Avenue
PO Box 30044
Lansing, MI 48909

If sending via overnight mail, leave out the PO Box and use Zip Code 48912.

If you have any questions regarding this process, please call LIHTC Staff at (517) 335-9802.

Sincerely,

Elizabeth A Rademacher

Elizabeth A. Rademacher
Allocations Manager
Low Income Housing Tax Credit Program

Enclosure

Michigan State Housing Development Authority

LOW INCOME HOUSING TAX CREDIT PROGRAM

735 East Michigan Avenue
PO Box 30044
Lansing, MI 48909
(517) 373-6007

**INVOICE
Reservation Fee**

DATE: November 1, 2021

TO: Mr. Carl Kunda
FCC AFG Burt Road Limited Dividend Housing Association Limited Partnership

RE: Reservation Fee for AFG Miller Grove Center (Project # L21033)

AMOUNT OF RESERVATION: \$ 1,450,000

6% OF RESERVATION AMOUNT: \$ 87,000

3% OF RESERVATION AMOUNT DUE NOW: \$ 43,500

This fee is to be returned *within 10 days* along with the signed Reservation Document.

DETACH HERE

DETACH HERE

Retain top portion for your records

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
LOW INCOME HOUSING TAX CREDIT PROGRAM
735 East Michigan Avenue, PO Box 30044
Lansing, MI 48909

Reservation Fee for AFG Miller Grove Center (Project # L21033)

AMOUNT DUE: \$ 43,500

AMOUNT ENCLOSED: \$ 43,500

Please send check or money order made payable to: MSHDA
(Do Not Send Cash)

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
735 East Michigan Avenue, PO Box 30044
Lansing, Michigan 48909

RESERVATION OF LOW INCOME HOUSING TAX CREDIT

The Michigan State Housing Development Authority (the "Authority") has completed its review of your Application for Low Income Housing Tax Credit from its 2021 year tax credit authority. Subject to the terms and conditions below, the Authority has reserved tax credit authority (the "Reservation") for the buildings in the project described below.

OWNER: FCC AFG Burt Road Limited Dividend Housing Association
Limited Partnership
310 S. Peoria Street, Suite 500
Chicago, IL 60607

TAXPAYER ID#: 86-1483516

PROJECT: AFG Miller Grove Center
16711 Burt Road
Detroit, MI 48219

Amount of Reservation: \$1,450,000
Number of Buildings: 1
Number of Low-Income Units: 45/45
Authority Set-Aside: PSH / Nonprofit

Terms and Conditions

1. This Reservation has been issued in reliance on the Application submitted, and the information contained therein is considered material. It is conditioned on the Applicant's agreement to submit all required applications, documentation and certifications and comply with all requirements for a Low Income Housing Tax Credit ("LIHTC") imposed by Federal and State laws, rules, and regulations. This Reservation does not bind the Authority to issue an Allocation of tax credit authority.
2. The following minimum set-aside has been elected by the Applicant:

At least forty percent (40%) of the units will be both rent restricted and occupied by tenants whose gross income does not exceed sixty percent (60%) of the area median gross income adjusted for family size.

3. THIS RESERVATION IS CONDITIONAL DUE TO THE FOLLOWING:

The Environmental Study received a Conditional Go. The deficiencies listed below must be corrected and determined to be acceptable by the Authority's LIHTC Allocations Manager and the Authority's Environmental Officer within one year of the date this Reservation is issued. If you have questions regarding the requirements, please contact Daniel Lince at (517) 335-0183:

Prior to initial closing, the sponsor will complete items below and submit to MSHDA for review and approval:

1. **Noise** – A HUD noise assessment is required for the subject property and the report provided to MSHDA. If the resultant DNL is above 65, provide documentation signed by the project architect (Figure 19, STraCAT calculation, or equivalent) demonstrating that the affected building envelope will meet interior noise threshold (45db). Describe any additional mitigation measures necessary.
2. **NEPA** – Retain consultant from MSHDA "Group B" qualified consultant list to provide NEPA documentation demonstrating compliance with 24 CFR Part 58 environmental review requirements for the use of federal funds.

NEPA Review: Environmental Assessment required

MSHDA Project-Based Vouchers (PBV) have been requested for this project. This new construction activity requires an Environmental Assessment to be prepared in accordance with 24 CFR 58. A MSHDA Group B consultant must be retained to complete the documentation necessary to demonstrate compliance with 24 CFR Part 58 for the PBVs.

Upon successful completion of the Environmental Assessment, MSHDA will publish a Combined Notice for the use of federal funds and request from HUD an Authority to Use Grant Funds letter upon expiration of a public comment period. *Parties to this activity are advised not to take any irreversible or choice limiting actions until the release of funds is received.*

4. This Reservation will be valid for a maximum of one year from the date of issuance, at which time documentation must be submitted to the Authority which verifies that the syndication has closed. However, this Reservation is not a covenant by the Authority that it will make an allocation of tax credit authority to the Applicant.
5. The Authority makes no representations concerning, or guarantee that the Applicant will ultimately be eligible to receive a tax credit. Determination of the Applicant's eligibility to claim the tax credit, once allocated, will be made by the Internal Revenue Service.

6. The Authority is not responsible for any actions taken by the Applicant based on this Reservation.

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

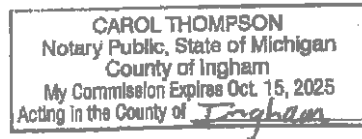
By: *Chad Benson*
Chad Benson
Director of Development

Date signed: 11/1/2021

The foregoing instrument was acknowledged before me this 1st day of November, 2021

Carol Thompson, Notary Public

Ingham County, Michigan.
My Commission expires 10/15/2025



◆◆◆

FCC AFG Burt Road Limited Dividend Housing Association Limited Partnership
(Owner)

By: *Lindsey Haines*
Signature

November 4, 2021
Date Signed

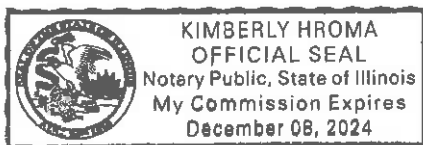
Lindsey Haines
Typed or Printed Name

Senior Vice President, Full Circle Communities, Inc.
Sole Member of FCC AFG Burt Road GP, LLC; General Partner of Owner
Office Held

The foregoing instrument was acknowledged before me this 11 day of November, 2021

Kimberly Hroma *Kimberly Hroma*, Notary Public, Cook County,

Illinois (State). My Commission expires: December 8, 2024



MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
Low Income Housing Tax Credit Program

POLICY STATEMENT

GROSS RENT FLOOR ELECTION

The maximum (gross) rent which a project owner can charge for a LIHTC eligible low income unit is based on the Multifamily Tax Subsidy Program (MTSP) area median gross income (AMGI). Under Section 42 of the Internal Revenue Code, the gross rent for a unit cannot exceed 30 percent of the imputed income limit for a qualified low income household (50 percent or 60 percent of AMGI).

The MTSP AMGI figures are published by the Department of Housing and Urban Development and are revised on an annual basis. As the MTSP AMGI of an area changes, the rent limitation for a particular unit will change; however the Housing and Economic Recovery Act of 2008 indicates that a qualified project's income and rent limits never have to decrease from a prior years applicable limits.

If the AMGI decreases, a reduction in the gross rent may be required. However, the gross rent limitation does not ever need to go below the limitation applicable for the earliest period the building (that contains the unit) was included in the determination of whether the project is a qualified low-income housing project (gross rent floor).

IRS Revenue Procedure 94-57 provides clarification on determining the effective date of the gross rent floor. It states the general rule that the gross rent floor takes effect on the date the credit agency initially allocates tax credit to a building (or date of reservation for Tax-Exempt buildings); however, an owner may elect to have the gross rent floor take effect on a building's placed in service date.

To establish the gross rent floor effective date from this time forward, a project owner will be required to file an election statement with the Michigan State Housing Development Authority (MSHDA Form # LIHTC 023). The project owner may opt to establish the gross rent floor at either the date of allocation (or date of reservation for Tax-Exempt buildings) or at the placed in service date. This election statement must be executed at the time of the issuance of the Reservation and/or Carryover of Low Income Housing Tax Credit. In any event, any election must be made prior to the placed in service date. Once this election is made, it is irreversible. Owners are not required to file any documentation with the IRS to make the election.

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
735 East Michigan Avenue – P.O. Box 30044
Lansing, Michigan 48909

GROSS RENT FLOOR ELECTION STATEMENT
LOW INCOME HOUSING TAX CREDIT

As owner of AFG Miller Grove Center located in Detroit
(Name of Project) (City or Township)

Wayne County, Michigan, I hereby elect the effective date of the gross rent floor
(County)

for this project to be:

date of allocation (or date of reservation for Tax-Exempt)

placed in service date

FCC AFG Burt Road Limited Dividend Housing Association Limited Partnership

(Name of Ownership Entity)

Lindsey Haines
(Signature of Authorized Official)

Lindsey Haines

(Typed Name of Authorized Official)

November 4, 2021

(Date)

L21033

(LIHTC Project #)

(MSHDA Project #)

86-1483516

(Federal Taxpayer ID #)

Senior Vice President

(Title)

Full Circle Communities, Inc.

Sole Member of FCC AFG Burt Road GP, LLC

General Partner of FCC AFG Burt Road LDHA, LP

FOR MSHDA/LIHTC USE ONLY:

Date of Allocation: _____
(or date of reservation for Tax-Exempt buildings)

Placed in Service Date: _____

LIHTC 023
Gross Rent Floor Election



STATE OF MICHIGAN

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
LANSING

GRETCHEN WHITMER
GOVERNOR

GARY HEIDEL
ACTING EXECUTIVE DIRECTOR

March 23, 2022

VIA EMAIL: Carl Kunda ckunda@fcommunities.org

Carl Kunda
Full Circle Communities, Inc.
310 S Peoria Street, Suite 500
Chicago, IL 60607

RE: 2022 PBV Preliminary Determination for the Award of Project-Based Vouchers (PBV) – AFG Miller Grove Center – Wayne County

Dear Mr. Kunda:

The application for Project-Based Vouchers (PBV) for the development noted above has been received and reviewed. Based on the selection criteria established for Project-Based Vouchers (PBV) awards, as set forth in the Administrative Plan and PBV Policy of the Michigan State Housing Development Authority (MSHDA), the proposed project for 23 PBVs in Wayne County being requested by FCC AFG Burt Road Limited Dividend Housing Association Limited Partnership meets the MSHDA PHA Administrative Plan criteria.

MSHDA Underwriting: A LIHTC Reservation has been provided; thus, MSHDA's underwriting process has been completed. HUD Subsidy Layering process will be forthcoming.

PBV Site Selection Criteria, a requirement of 24 CFR 983.57 has been satisfied and documented within the owner's proposal for a newly constructed housing project.

Documentation regarding compliance with the Competitive Process, a requirement of 24 CFR 983.51(b)(2): The project received a 2021 LIHTC Reservation dated November 1, 2021. This date was within the past three years and the competitive selection process did not involve any consideration that the project would receive PBV assistance. The project: therefore, meets the competitive process criteria stated in the HUD PBV regulations. PBV selection criteria provided in the owner proposal was found to be acceptable.

PBV Project Cap: Based on 24 CFR 983.56(a), (b)(1) and (2) this project will not exceed the project cap. The development has a total of 45 units; with 23 PBV units. The number of units within the project are within HUD requirements of program cap.

Agreement to Enter into Housing Assistance Payments Contract (AHAP) and Housing Assistance Payment (HAP) Contract: Once the following conditions are met and subject to HUD appropriations and regulations; MSHDA/PHA will enter into an Agreement and HAP Contract with the owner of the property selected to have project-based vouchers. Current regulations allow MSHDA to enter into initial HAP contracts for a period of twenty years. Within one year prior to expiration, MSHDA may agree to extend the term of the initial HAP contract for an additional term of up to twenty years for a total of 40 years if it is determined an extension is appropriate to

continue providing affordable housing to extremely low-income families. Any extensions will be subject to conditions set by HUD at the time of the extension.

CONDITIONS THAT MUST BE MET PRIOR TO THE EXECUTION OF THE AHAP

NOTE: The Agreement must be executed prior to the commencement of construction work. *Construction begins when excavation or site preparations (including clearing of the land) begins for the housing. If work begins prior to the execution of the Agreement, MSHDA/PHA will not be able to provide PBV rental assistance to this development.*

- A. **Subsidy Layering:** HUD subsidy layering process must be complete per 24 CFR 983.55. Refer to the following link for guidance and contact information:
<http://www.michigan.gov/mshda/0,4641,7-141--263960--,00.html>
- B. **Environmental Review:** Procedures per 24 CFR 58 must be completed to include HUD's approval of the environmental certification and request for release of funds. Refer to the following link for guidance and contact information:
https://www.michigan.gov/mshda/0,4641,7-141-5587_22721---,00.html
- C. **Equal Employment Opportunity and Labor Standards:** EEO and Labor Standards requirements apply to this project. EEO contact James Flanagan at 517.335.5186. Refer to the following link for more information:
https://www.michigan.gov/documents/mshda/TAB_F_-_EEO_Plan_Requirements_653229_7.pdf. Labor Standards: contact Etta Henderson at 313.456.3605 for guidance needed to address these requirements.
- D. **Relocation Assistance (URA).** 24 CFR 983.7 Uniform Relocation Act. – if URA is triggered; the owner must submit a certification that all URA requirements have been complied with. If you have questions regarding URA requirements you may contact: Geoffrey Ehnis-Clark at 517.241.2996 or ehnisclarkg@michigan.gov. Refer to the following link for further information:
https://www.michigan.gov/documents/mshda/Revised_URA_Guidelines_5.18.18_623685_7.pdf
- E. **Work write-up (Rehabilitation Project) and/or work description (Newly Constructed Project) specifications and drawings** must be submitted to MSHDA's Chief Architect for review and compliance with the design and construction requirements of the Fair Housing Act and implementing regulations at 24 CFR 100.205 and the accessibility requirements under section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.22 and 8.23. Please contact Maryanne Vukonich at 517.373.9478 or vukonichm@michigan.gov for further information.
- F. **Construction Contract with MSHDA Appendix and required Attachments.** This must be submitted for legal review for all LIHTC deals with no other MSHDA financing other than HCV/PBVs. Projects with MSHDA financing will submit to HDO through the underwriting and review process. Please contact Margaret Meyers at 517.335.2036 or meyersm@michigan.gov for all 9% deals with no other MSHDA funding other than HCV Project based vouchers.

CONDITIONS TO BE MET PRIOR TO THE EXECUTION OF THE HAP CONTRACT

- A. **Certifications and addition information addressed within the AHAP:** Section 1.8 Work Completion, Section 1.13 Uniform Relocation Act, and Section 1.24 Lobbying Certifications. All certifications must be submitted to MSHDA/RAHS Division.
- B. **Construction Specialist Inspections:** All 9% projects with no other MSHDA financing must be inspected by a MSHDA Construction Specialist. There will be two inspections: one at the rough in stage (before drywall installation); second at projects completion to confirm that all work meets AHAP Exhibit B. NOTE: MSHDA will be reviewing the site, parking lots, walks, exterior, common areas and the specific PBV units that will be include in the HAP contract. The sponsor MUST contact MSHDA to schedule these inspections, timely.
- C. **HQS Inspections:** All PBV units must be physically inspected by the MSHDA contracted Housing Agent and pass HUD Housing Quality Standards (HQS).
- D. **Rents to the Owner:** Final HAP Rents must be determined by MSHDA per 24 CFR 983 Subpart G and documented in the file to ensure rent reasonableness.

CONDITIONS TO BE MET AFTER EXECUTION OF THE HAP CONTRACT

- A. **Income Eligibility:** At initial admission to the MSHDA HCV/PBV Program, all participants at **AFG Miller Grove Center**, must meet the MSHDA HCV/PBV Program income eligibility requirement of being at or below 30% of the area median income for **Wayne** County based on family size.
- B. **PBV Requirements:** PBV Participants must meet all PBV requirements to continue to occupy the PBV unit.
- C. **PBV Units:** All PBV units must be occupied by eligible PBV participants throughout the term of the HAP contract. If MSHDA finds that these units are not occupied by eligible households the unit(s) may be deleted from the HAP contract and not re-instated.

When this **Newly Constructed Housing Project** is near the time of occupancy, the Division of Rental Assistance and Homeless Solutions (RAHS) will allocate Housing Choice (HCV) Project Based Vouchers (PBV) from our portfolio to this project. At that time, RAHS will assign PBV staff and a contracted housing agent for administration of the vouchers including waiting list, applicant eligibility determinations and income verifications.

Feel free to contact Kathy French at 517.599.6389 (CELL) or frenchk@michigan.gov if you should have further questions or concerns.

Sincerely,



Lisa Kemmis, Director
Rental Assistance and Homeless Solutions
Michigan State Housing Development Authority

Cc: MSHDA Staff: Nicholas Shattuck, Daniel Lince, Michael Volick, Etta Henderson, Margaret Meyers, Guy Stockard, Maryanne Vukonich, Elizabeth Rademacher



Alternatives For Girls Integrated Permanent Supportive Housing Project Update

Since June the project has changed slightly. **There will be 23 units of Permanent Supportive Housing**, a reduction of 2 units from our prior submission.

A minimum of 20 hours of on-site supportive services will be provided to tenants of the project, although the service model currently projects a full-time Case Planner and support staff (1.5 FTE) for the tenant population. In addition to their direct service provision Southwest Counseling Solutions will also be providing weekly technical assistance to Alternatives for Girls related to service delivery in a PSH setting.

The following are the members of the Development Team for the project:

Sponsor/Developer/Owner: Full Circle Communities, Inc.
Service Provider: Southwest Counseling Solutions (Lead Agency), Alternatives for Girls
Property Management: KMG Prestige

Project Contact Person: Carl Kunda
Senior Project Manager, Full Circle Communities, Inc.
310 S. Peoria Street, Suite 500, Chicago, IL 60607
ckunda@fccommunities.org
847-849-5310

All 23 PSH units at 16711 Burt Road will be targeted the most vulnerable supportive housing populations, defined as the Top 10% of the Detroit CoC's Prioritization List. Alternatives For Girls's mission is to help homeless and high-risk girls and young women avoid violence, teen pregnancy, and exploitation, and help them to explore and access the support, resources, and opportunities necessary to be safe, to grow strong and to make positive choices in their lives. AFG currently operates temporary or fixed-term housing interventions but has identified a need for permanent supportive housing and affordable housing.

According to the Homeless Action Network of Detroit (HAND), there were 10,744 homeless people counted in 2018. Over 869 young people, ages 18-24, were served by homeless providers, accounting for 8% of the total homeless population. Of those youth, 24% experienced domestic violence, and 46% have a disabling condition. Furthermore the Detroit CoC recognizes that the total population of homeless youth is under-represented in the data; therefore, efforts continue to ensure that all youth in housing-specific crises have the chance to receive services. AFG has been instrumental in advocating for adjustments to the assessment and referral process to correct well-known deficiencies in assessing youth homelessness, including the use of the TAY VI-SPDAT, and additional training at CAM Access Points. AFG routinely serves over 500 unique young people ages 0 to 65 each year. In FY 2018, 96% (approx. 480) were female, 3% (approx. 150) were male and 1% identified as other genders. Seventy percent of AFG's participants were African American, 18% were Latinx, 7% were Caucasian and 4% identified as other races/ethnicities. In FY 2019, AFG's housing programs (Shelter, TIL, and RRH) served 164 (approx. 32% of all participants served) unique youth experiencing homelessness, very unstable housing, or aging out of the foster care/juvenile justice systems. Additionally, in terms of preliminary assessments of need, 2018 data from the Coordinated Assessment Model (CAM) team reflects that 107 youth ages 18 to 24 (12 parenting youth and 95 unaccompanied youth) scored for PSH. A preliminary review of data from the first three quarters 2020 shows 62 single youth and 10 parenting youth that score in the PSH range.

The AFG development will provide a low-barrier admission to housing. Referrals to PSH units will be made through the Detroit CoC Coordinated Assessment Model (CAM). The CAM is open to all individuals that satisfy HUD definition of homeless under Categories 1, 2 or 4. The CAM assesses potential participants using the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT), to assess their weaknesses and the immediacy of their needs. Southwest Counseling Solutions and Alternatives for Girls have worked with the CAM to utilize the Transition Age Youth -Vulnerability Index-Service Prioritization Decision Assistance Tool (TAY-SPDAT), as well as a Family VI-SPDAT, so that youth and young families are adequately assessed based on criteria suited to their specific vulnerabilities. In order to necessitate significant, collaborative, and community-wide change for persons experiencing homelessness or a housing crisis, the CAM utilizes an In Person Access Point Model with entry points for families, singles, youth, and veterans. Those who score high enough for permanent support housing will work with the navigator to collect all the necessary documents and paperwork to submit an application. The navigator will submit the completed PSH packet to the CAM and the client will be placed on the shared Housing Prioritization Registry, sorted by level of need, and pulled for openings in any PSH program within the Detroit CoC. The intake process for the development will take place at AFG or another CAM Access Point). When the property is in its initial lease up (and in the future as units turn over), the CAM will provide a list of applicants from its prioritization list. These referrals will then complete the property application. This development is designed to be a low barrier for persons with no previous history in housing, or issues on their rental, credit, or criminal record. Furthermore, tenants will be paired with the Case Planner during their application during the initial screening process. The project is Housing First, and accessing supportive services is not a requirement for gaining, nor sustaining tenancy. The project has been intentionally designed to serve the unique needs of AFG's clients, but all potential applicants will know of the inclusive, safe, and respectful environment we intend to create. As mentioned previously in this LOI, AFG currently serves both young men and women through its rapid rehousing program and in other programs.

This project is located at 16711 Burt Road, on a stable residential block at the northwest side of the City, just off Grand River Avenue and south of McNichols Road. The development will be located on currently vacant land owned by the Detroit Land Bank Authority. The area enjoys transit access on Grand River as McNichols to Corktown (including AFG's headquarters), the University District and connections to Woodward Ave. The immediate neighborhood includes amenities such as a Meijer, laundromat, and several pharmacies. There are several churches, a public library branch, the Crowell Community Center, schools and social services.

The development will be mixed-use with 23 units of PSH and 22 income-restricted units at 30-50% AMI (45 total). The PSH units will include 1 three-bedroom units (2 total), 3 two-bedroom units (5 total), and 19 one-bedroom units (36 total). All PSH units will seek rental assistance from MSHDA, and referrals come through the Detroit CAM. The residential space will include generous community amenity space such as areas for social gatherings and cooking, a resource library and computer lab, and indoor and outdoor play spaces for toddlers and children. Property management will have an on-site office for a full-time property manager. The project will also have space dedicated to supportive service delivery to tenants including an office for case management. The project will also create an approximately 3,000 SF childcare center that will be open to tenants of the building and the surrounding community.

We intend to apply for LIHTC in the February 2021 funding round. The project will begin construction in the spring of 2022, and will open approximately 14 months later in the summer of 2023.

Full Circle Communities, Inc. formed in 1999, is a 501c3 nonprofit organization dedicated to expanding access to quality affordable housing through preservation and development, thoughtful design, and the provision of significant and targeted supportive services to our residents and the surrounding communities. Full Circle has a strong record of success as a non-profit developer, owner, and manager of a diverse portfolio of affordable housing. From the beginning, Full Circle has strived to produce quality multifamily housing, developed and managed for the long term success of the project and the residents. Currently, Full Circle owns and operates over 1000 units of affordable housing in three states. Full Circle Communities dedicates 75% of developer fee towards providing supportive services at its projects. While not a direct service provider, Full Circle builds relationships with communities and service providers to create a comprehensive housing intervention, responsive to the needs of the community and unique tenant population. While the Full Circle model cannot provide the total funding needed for supportive housing, it provides an invaluable and flexible resource for service providers. Full Circle Communities is currently under construction on a 43-unit PSH development in partnership with the Ruth Ellis Center. That project shares many similarities to this project, and will utilize the CAM process for tenant referrals.

Southwest Counseling Solutions is part of Southwest Solutions, one of the largest supportive service and economic development agencies in Detroit. SWCS will be the lead service provider and will provide oversight and technical assistance to case management and property management staff at the property. They also provide HARA services and are a CMH Provider for Detroit. They add additional capacity through their experience working with their internal housing development and property management companies for permanent supportive housing developments. SWCS will also participate in outcomes and program assessment with the project's owners. SWCS has significant experience working with the Detroit CAM.

Alternatives for Girls (AFG), founded in 1987, is a youth social services agency with a mission to provide short-term and long-term residential safe space and support services for runaway, homeless, and at-risk girls and young women. Alternatives for Girls approach is designed to help their constituents avoid violence, teen pregnancy, and exploitation, and help them explore and access the support, resources, and opportunities necessary to be safe, grow strong, and make positive choices. Through their shelter program, rapid-rehousing program, prevention programs, and outreach efforts, Alternatives for Girls serves as a lifeline to many young and adult women seeking to remove themselves from situations and activities that threaten their well-being, futures, and lives. In the summer of 2018, Alternatives for Girls began managing Detroit's first RRH targeting youth, and since then, the program has housed 41 youth. Through this work, Alternatives for Girls has grown service offerings that are not gender-specific, and will be the basis for their work at the proposed development. AFG is an active member of the Continuum of Care and has experience with the policies and procedures of the Detroit CAM.



Addendum III – Initial Concept Form

Project Name: AFG 16711 Burt Road

Funding Round: February 2021

All applicants applying under the Permanent Supportive Housing (PSH) Category of the 2019-2020 Qualified Allocation Plan (QAP) will be required to submit the following form and return it to MSHDA no later than the Addendum III Initial Concept Letter Due Date in Section V.A. of the 2019-2020 QAP.

1. Please provide the name and address of the project, including the county.

16711 Burt Road, Detroit, MI 48219 (Wayne County)

2. Please attach the following:

- Pages 11-17 of the Addendum III Checklist and Application. This includes the Addendum III application pages and Supportive Services Commitment Chart. Do not attach the checklist or the experience forms. If you have questions about anything in the checklist or experience forms, please plan to discuss those at the Initial Addendum III Review Meeting.
- The Addendum III Funding Analysis and Rental Income tabs of the 2019-2020 LIHTC Program Application.
- A site map and proposed drawings of the project.

3. Please describe the targeted PSH population(s) and how many PSH units will be targeted to each population.

All 23 PSH units at 16711 Burt Road will be targeted the most vulnerable supportive housing populations, defined as the Top 10% of the Detroit CoC's Prioritization List. Individuals are scored based on the Service Prioritization Decision Assistance Tool (SPDAT) to determine their acuity for PSH. This development will address a critical gap in the current continuum of housing resources by offering comprehensive supportive services that address the unique circumstances of homeless youth, particularly young women that are pregnant or currently parenting. While the development will not be age-restricted, nor single-gender – it includes design considerations and amenities that will benefit this population and will have marketing and outreach efforts to enfranchise this difficult to serve group. The number of PSH units has been selected in proportion to need in the community, following input from the CoC.

4. Please describe the process for which PSH tenant referrals will be made to the development for the PSH units. This should be a summary and not the entire Tenant Selection Plan.

Referrals to PSH units will be made through the Detroit CoC Coordinated Assessment Model (CAM). The CAM is open to all individuals that satisfy HUD definition of homeless under Categories 1 or 4. The CAM assesses potential participants using the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT), to assess their weaknesses and the immediacy of their needs. Southwest Counseling Solutions and Alternatives for Girls have worked with the CAM to utilize the Transition Age Youth - Vulnerability Index-Service Prioritization Decision Assistance Tool (TAY-SPDAT), as well as a Family VI-SPDAT, so that youth and young families are adequately assessed based on criteria suited to their specific vulnerabilities. In order to necessitate significant, collaborative, and community-wide change for persons experiencing homelessness or a housing crisis, the CAM utilizes an In Person Access Point Model with entry points for families, singles, youth, and veterans. Those who score high enough for permanent support housing will work with the navigator to collect all the necessary documents and paperwork to submit an application. The navigator will submit the completed PSH packet to the CAM and the client will be placed on the shared Housing Prioritization Registry, sorted by level of need, and pulled for openings in any PSH program within the Detroit CoC. The intake process for the development will take place at AFG or another CAM Access Point (depending on COVID-19, as all Access Points are currently closed and intake is done over the phone). When the property is in its initial lease up (and in the future as units turn over), the CAM will provide a list of applicants from its prioritization list. These referrals will then complete the property application. This development is designed to be a low barrier for persons with no previous history in housing, or issues on their rental, credit, or criminal record. Furthermore, tenants will be paired with the Case Planner during their application during the initial screening process. The project is Housing First, and accessing supportive services is not a requirement for gaining, nor sustaining tenancy. Tenants must also satisfy the definition of "Eligible Support Housing Tenant" as defined in MSHDA's 2021 Addendum III.

5. Please provide an explanation of the services that will be available at the property or that will be available on a referral basis to residents, the service providers that will be performing those services, and the funding sources that the service providers will utilize to make the services available (including Medicaid billing). This should be a summary and not the entire Service Coordination Plan.

Southwest Counseling Solutions (SWCS) is the lead service provider for PSH services at the project, and Alternatives for Girls (AFG) is the local service provider who specializes in the target population. AFG and SWCS will provide on-site staff to administer case management services as well as coordinate services with other agencies, organizations, and businesses based upon each tenant's plan for increasing stability and self-sufficiency. Services, resources, and supports offered will be based on specific individual plans to meet the needs to each tenant.

The minimum 20 hours per week of supportive services will be coordinated by SWCS and AFG. Participation in these services is voluntary, and it is acknowledged that those in permanent

supportive housing have the choice not to accept services and still remain in their homes, as long as they meet all of the conditions of tenancy. Specialized service support agencies will be incorporated into the treatment plans when necessary. It is our intention to provide much more than the minimum number of hours required by the QAP. Our current staffing plan calls for one full-time Case Planner and one half-time position.

The minimum commitment will be funded through FCC's commitment of 75% of the project's developer fee. This amount is guaranteed by FCC's corporate services reserve.

6. Has the project been presented to the Continuum of Care (CoC)? What conversations are being held regarding the project and the targeted population(s)? Does the CoC support the project?

Southwest Counseling Solutions and Alternatives for Girls are lead organizations in the Detroit Continuum of Care. FCC, SWCS and AFG have been working iteratively with the CoC on this project for several years. The development was initially intended for an April 2020 application, which ultimately did not advance, but the project was presented to the CoC in the Fall of 2019. Most recently FCC presented the project concept to the CoC in June of 2020, and members also participated in their LIHTC intake process that same month. Based on feedback from the CoC the total number of PSH units, and the unit type were revised from earlier concepts to reflect need in the community based on CAMs data. The project will also be presented on December 8, where the CoC will decide whether to support the project for a February 2021 application.

7. Has the development team met with MSHDA's Addendum III Review Committee in the past? When was the most recent meeting?

N/A

Thank you for completing this form. Please submit this form along with the documentation that is requested in item #2 above and MSHDA will contact you to schedule a meeting to discuss the project, if necessary.

ADDENDUM III APPLICATION

Project Name: 16711 Burt Road

A. OWNER IDENTIFICATION:

Organization	Full Circle Communities, Inc.
Primary Address	310 S. Peoria St, Suite 500
Contact Person	Carl Kunda
Contact Phone	847-849-5310
Contact Fax	
Contact Email	ckunda@fccommunities.org
President/CEO	Joshua Wilmoth

B. PROPERTY MANAGEMENT COMPANY IDENTIFICATION INFORMATION:

Organization	KMG Prestige, Inc.
Primary Address	102 S. Main Street, Mt. Pleasant, MI 48858
Contact Person	Karen Mead
Contact Phone	989-772-3261
Contact Fax	
Contact Email	Karen.mead@kmgprestige.com
President/CEO	Karen Mead

C. LEAD ORGANIZATION IDENTIFICATION INFORMATION:

Organization	Southwest Counseling Solutions
Primary Address	1700 Waterman Street, Detroit, MI 49209
Contact Person	Jamie Ebaugh
Contact Phone	313-481-7901
Contact Fax	
Contact Email	jebaugh@swsol.org
President/CEO	Jamie Ebaugh

D. SERVICE ORGANIZATION IDENTIFICATION INFORMATION:

Organization	Alternatives for Girls
Primary Address	903 W Grand Blvd, Detroit, MI 48208
Contact Person	Amanda Good
Contact Phone	313-361-4000
Contact Fax	

Contact Email	agood@alternativesforgirls.org
President/CEO	Amanda Good

E. CONTINUUM OF CARE IDENTIFICATION (COC) INFORMATION:

Organization	Homeless Action Network of Detroit
Primary Address	3701 Miracles Blvd, Suite 101, Detroit, MI 48201
Contact Person	Kaitie Giza
Contact Phone	313-964-3666
Contact Fax	
Contact Email	kaitie@handetroit.org
President/CEO	Tasha Gray

F. HOUSING ASSESSMENT AND RESOURCE AGENCY (HARA) IDENTIFICATION INFORMATION:

Organization	Southwest Counseling Solutions
Primary Address	1700 Waterman Street, Detroit, MI 49209
Contact Person	Jamie Ebaugh
Contact Phone	313-481-7901
Contact Fax	
Contact Email	jebaugh@swsol.org
President/CEO	Jamie Ebaugh

F. UNIT DESCRIPTION, TARGETED SUPPORTIVE HOUSING POPULATIONS AND COMMUNITY NEED

Number of Units	Efficiency	1 Bedroom	2 Bedrooms	3 Bedrooms	4+ Bedrooms	Total Number of units
Total Project		36	7	2		45
Supportive Housing		19	3	1		23
With PBV		19	3	1		23
Barrier Free		4	1	1		6

Identify number of buildings and the number of stories per building: 1, 3 stories

Identify number of units per building: 45

Identify accessible features available for targeted units: Included in project narrative

Identify the type of units:(apartment, single family home, townhouse, duplex) Apartment

Does the building have an elevator? Yes

G. TARGETED SUPPORTIVE HOUSING POPULATIONS:

Projects must fill out the following chart. This information should also be clearly outlined in the MOU and Tenant Selection Plan. Please see the Targeted Supportive Housing Populations section of the [2021 Scoring Summary](#) for more information. **Note:** If the required percentage of the units is not a whole number, the development must round up to the next whole unit to meet this criteria. For example, if there are 50 units, there must be at least 18 permanent supportive housing units in the development (35% x 50 units = 17.5, rounded up to 18). Manager or employee units do not count towards either the total number of units or the supportive housing units in the development.

	Targeted Populations	Number of Units	Percentage of Units
Option 1:	<input type="checkbox"/> Chronically Homeless <input type="checkbox"/> Households who meet Category 1 Homeless and have a disability <input type="checkbox"/> Households who meet Category 4 Homeless and have a disability <input type="checkbox"/> Data Match	_____	_____
Option 2:	<input type="checkbox"/> Chronically Homeless <input type="checkbox"/> Data Match <input checked="" type="checkbox"/> Top 10% of the Local CoC Prioritized List	23	51%
Other PSH Populations:	<input type="checkbox"/> Chronically Homeless <input type="checkbox"/> Special Needs <input type="checkbox"/> Homeless <ul style="list-style-type: none"> <input type="checkbox"/> An individual or family who lacks a fixed, regular, and adequate nighttime residence <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Data Match	_____	_____
Other LIHTC/Market Units:	<input checked="" type="checkbox"/> LIHTC <input type="checkbox"/> Market	<u>22</u>	<u>49%</u>

H. SUPPORTIVE SERVICES COMMITMENT

Information is to be provided for all services under “Case Management Service Coordination”. Information should be provided for the applicable services under “Other Services – As Applicable”. Projects that do not provide commitment letters from all of the funding sources will not pass threshold and will not receive an award of credits. For services listed under “Other Services – As Applicable”, mark N/A if the services are not available. The service and funding agencies in this chart should be consistent with the rest of the Addendum III submission, including but not limited to the MOU, letters of support, and funding analysis.

	Name of Agency Providing Service <i><u>Must sign MOU</u></i>	Date of MOU	Included in the Addendum III Submission	Name of Agency Funding Services <i><u>Must provide Letter of Support</u></i>	Date of Letter of Support	Included in the Addendum III Submission
<i>CASE MANAGEMENT SERVICE COORDINATION (ALL SERVICES BELOW ARE REQUIRED TO BE COMPLETED)</i>						
All services under this heading (Tenant Stabilization, Building Support Systems, Basic Needs, Benefit Assistance, Employment Related Services, Mental Health, and Substance Abuse Services) must be supported by an MOU signed by the agency(ies) providing services and a letter of support from the agency(ies) providing funding.						
Tenant Stabilization – Assist tenants to care for their apartment, ADL’s, get along with neighbors, landlord, etc.	Southwest Counseling Solutions Alternatives for Girls		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes
Building Support Systems – Assist tenants to re-engage with local community.	Southwest Counseling Solutions		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes

	Alternatives for Girls					
Basic Needs – Assist tenants to obtain resources (food, clothing, transportation, etc.).	Southwest Counseling Solutions Alternatives for Girls		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes
Benefit Assistance - Provide on-going support including referrals, assistance obtaining benefits, linkages with services, “whatever it takes”.	Southwest Counseling Solutions Alternatives for Girls		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes
Employment Related Services	Alternatives for Girls		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes
Mental Health – ACT, counseling, therapy, medications and medication management.	Southwest Counseling Solutions Alternatives for Girls Development Centers, Inc.		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes

*****If the targeted populations include chronically homeless and/or various Data Match populations, the CMH **MUST** be part of the supportive services team and the service commitment **MUST** be included in the MOU and other documents. **Failure to include the CMH as an integral member of the service team when targeting this population will be considered a material deficiency and make the project ineligible for an award of tax credits.*******

Substance Abuse Services – Outpatient treatment, self-help options, and counseling.	Southwest Counseling Solutions		<input checked="" type="checkbox"/> Yes	Full Circle Communities, Inc.		<input type="checkbox"/> Yes
Other Services – As Applicable If any of the following services are provided to the tenants, provide MOU(s) from the agency(ies) providing service and letter(s) of support from the agency(ies) funding the services. If these services are not applicable to the project, please note with an “N/A”.						
HIV/AIDS – Specialized health care.	Detroit Community Health Connection, Inc.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Full Circle Communities, Inc.		<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Legal Services – Related to civil arrears, family law, uncollected benefits.	Neighborhood Legal Services United Community Housing Coalition		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Full Circle Communities, Inc.		<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Veteran Services			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A			<input type="checkbox"/> Yes <input type="checkbox"/> N/A

Domestic Violence Counseling	Alternatives for Girls		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Full Circle Communities, Inc.		<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Child Care	Alternatives for Girls		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Full Circle Communities, Inc.		<input type="checkbox"/> Yes <input type="checkbox"/> N/A
School Related Services	Alternatives for Girls Covenant House		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	Full Circle Communities, Inc.		<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Other			<input type="checkbox"/> Yes <input type="checkbox"/> N/A			<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Other			<input type="checkbox"/> Yes <input type="checkbox"/> N/A			<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Other			<input type="checkbox"/> Yes <input type="checkbox"/> N/A			<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Other			<input type="checkbox"/> Yes <input type="checkbox"/> N/A			<input type="checkbox"/> Yes <input type="checkbox"/> N/A

Mariners Inn Permanent Supportive Housing Housing Leverage Documentation Details

The following pages provide details to the housing leverage documentation being submitted for this new PSH project.

NOTE: Within this documentation, this project is referred to as “*The Anchor*”. This is the name the organization is using for this new development. In the PSH expansion application to HUD, this project is called “Mariners Inn PSH Expansion”, to be in alignment with how the current (renewal) project is named and to be in alignment with HUD’s instructions on naming convention for expansion applications.

NOTE: Within this documentation, HUD will note a project address of 445 Ledyard, Detroit. In screen 4B of this expansion application, the address is given as 2627 Cass Ave, Detroit. These addresses are referring to the same building, as these two streets form a corner. The Ledyard address is the location of the current PSH building. Once the new construction is completed, the building will be facing Cass Ave, hence the Cass Ave address.

Specifically, please find:

- Letter dated October 30, 2020 from MSHDA stating that 44 of the units in this building have been awarded Project-Based Vouchers (PBV).
- Addendum III (part of the application for Low Income Housing Tax Credits) noting that the target population will be Category 1 homeless and the chronically homeless (a subset of DedicatedPLUS).
- A letter dated May 12, 2019 from the organization describing the target population to be people experiencing homelessness who are the most vulnerable.



STATE OF MICHIGAN

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
LANSING

GRETCHEN WHITMER
GOVERNOR

GARY HEIDEL
ACTING EXECUTIVE DIRECTOR

October 30, 2020

Ed Potas
445 Ledyard Street
Detroit, MI 48201

**RE: 2020 PBV Preliminary Determination for the Award of Project-Based Vouchers (PBV) –
The Anchor at Mariners Inn – Wayne County**

Dear Mr. Potas:

The application for Project-Based Vouchers (PBV) for the development noted above has been received and reviewed. Based on the selection criteria established for Project-Based Vouchers (PBV) awards, as set forth in the Administrative Plan and PBV Policy of the Michigan State Housing Development Authority (MSHDA), the proposed project for 44 PBVs in Wayne County being requested by The Anchor at Mariners Inn Limited Dividend Housing Association Limited Partnership meets the MSHDA PHA Administrative Plan criteria.

MSHDA Underwriting: A LIHTC Reservation has been provided; thus, MSHDA's underwriting process has been completed. HUD Subsidy Layering process will be forthcoming.

PBV Site Selection Criteria, a requirement of 24 CFR 983.57 has been satisfied and documented within the owner's proposal for a newly constructed housing project.

Documentation regarding compliance with the Competitive Process, a requirement of 24 CFR 983.51(b)(2): The project received a 2020 LIHTC Reservation dated March 23, 2020. This date was within the past three years and the competitive selection process did not involve any consideration that the project would receive PBV assistance. The project: therefore, meets the competitive process criteria stated in the HUD PBV regulations. PBV selection criteria provided in the owner proposal was found to be acceptable.

PBV Project Cap: Based on 24 CFR 983.56(a), (b)(1) and (2) this project will not exceed the project cap. The development has a total of 44 PBV units; with 25 qualifying as excepted units which are not included in the cap calculation.

Agreement to Enter into Housing Assistance Payments Contract (AHAP) and Housing Assistance Payment (HAP) Contract: Once the following conditions are met and subject to HUD appropriations and regulations; MSHDA/PHA will enter into an Agreement and HAP Contract with the owner of the property selected to have project-based vouchers. Current regulations allow MSHDA to enter into initial HAP contracts for a period of twenty years. Within one year prior to expiration, MSHDA may agree to extend the term of the initial HAP contract for an additional term of up to twenty years for a total of 40 years if it is determined an extension is appropriate to

continue providing affordable housing to extremely low-income families. Any extensions will be subject to conditions set by HUD at the time of the extension.

CONDITIONS THAT MUST BE MET PRIOR TO THE EXECUTION OF THE AHAP

NOTE: The Agreement must be executed prior to the commencement of construction work. *Construction begins when excavation or site preparations (including clearing of the land) begins for the housing. If work begins prior to the execution of the Agreement, MSHDA/PHA will not be able to provide PBV rental assistance to this development.*

- A. **Subsidy Layering:** HUD subsidy layering process must be complete per 24 CFR 983.55. Refer to the following link for guidance and contact information:
<http://www.michigan.gov/mshda/0,4641,7-141--263960--,00.html>
- B. **Environmental Review:** Procedures per 24 CFR 58 must be completed to include HUD's approval of the environmental certification and request for release of funds. Refer to the following link for guidance and contact information:
http://www.michigan.gov/documents/mshda/mshda_li_ca_13b_tab_d_nepa_rvw_chklst_271152_7.pdf
- C. **MSHDA/HUD Section 3 Plan:** This plan must be submitted to Guy Stockard for approval; he can be reached at 517.335.9921. Refer to the following link for guidance and contact information: <http://www.michigan.gov/mshda/0,4641,7-141--232877--,00.htm>
- D. **Equal Employment Opportunity and Labor Standards:** EEO and Labor Standards requirements apply to this project. EEO contact James Flanagan at 517.335.5186. Refer to the following link for more information:
https://www.michigan.gov/documents/mshda/TAB_F_-_EEO_Plan_Requirements_653229_7.pdf. Labor Standards: contact Etta Henderson at 313.456.3605 for guidance needed to address these requirements.
- E. **Relocation Assistance (URA).** 24 CFR 983.7 Uniform Relocation Act. – if URA is triggered; the owner must submit a certification that all URA requirements have been complied with. If you have questions regarding URA requirements you may contact: Geoffrey Ehnis-Clark at 517.241.2996 or ehnisclark@michigan.gov. Refer to the following link for further information:
https://www.michigan.gov/documents/mshda/Revised_URA_Guidelines_5.18.18_623685_7.pdf
- F. **Work write-up (Rehabilitation Project) and/or work description (Newly Constructed Project) specifications and drawings** must be submitted to MSHDA's Chief Architect for review and compliance with the design and construction requirements of the Fair Housing Act and implementing regulations at 24 CFR 100.205 and the accessibility requirements under section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.22 and 8.23. Please contact Maryanne Vukonich at 517.373.9478 or vukonichm@michigan.gov for further information.
- G. **Construction Contract with MSHDA Appendix and required Attachments.** This must be submitted for legal review for all LIHTC deals with no other MSHDA financing other than HCV/PBVs. Projects with MSHDA financing will submit to HDO through the underwriting and review process. Please contact Margaret Meyers at 517.335.2036 or meyersm@michigan.gov for all 9% deals with no other MSHDA funding other than HCV Project based vouchers.

CONDITIONS TO BE MET PRIOR TO THE EXECUTION OF THE HAP CONTRACT

- A. **Certifications and addition information addressed within the AHAP:** Section 1.8 Work Completion, Section 1.13 Uniform Relocation Act, and Section 1.24 Lobbying Certifications. All certifications must be submitted to MSHDA/RAHS Division.
- B. **Construction Specialist Inspections:** All 9% projects with no other MSHDA financing must be inspected by a MSHDA Construction Specialist. There will be two inspections: one at the rough in stage (before drywall installation); second at projects completion to confirm that all work meets AHAP Exhibit B. NOTE: MSHDA will be reviewing the site, parking lots, walks, exterior, common areas and the specific PBV units that will be include in the HAP contract. The sponsor MUST contact MSHDA to schedule these inspections, timely.
- C. **HQS Inspections:** All PBV units must be physically inspected by the MSHDA contracted Housing Agent and pass HUD Housing Quality Standards (HQS).
- D. **Rents to the Owner:** Final HAP Rents must be determined by MSHDA per 24 CFR 983 Subpart G and documented in the file to ensure rent reasonableness.

CONDITIONS TO BE MET AFTER EXECUTION OF THE HAP CONTRACT

- A. **Income Eligibility:** At initial admission to the MSHDA HCV/PBV Program, all participants at **The Anchor at Mariners Inn** must meet the MSHDA HCV/PBV Program income eligibility requirement of being at or below 30% of the area median income for Wayne County based on family size.
- B. **PBV Requirements:** PBV Participants must meet all PBV requirements to continue to occupy the PBV unit.
- C. **PBV Units:** All PBV units must be occupied by eligible PBV participants throughout the term of the HAP contract. If MSHDA finds that these units are not occupied by eligible households the unit(s) may be deleted from the HAP contract and not re-instated.

When this **Newly Construct Housing, Project** is near the time of occupancy, the Division of Rental Assistance and Homeless Solutions (RAHS) will allocate Housing Choice (HCV) Project Based Vouchers (PBV) from our portfolio to this project. At that time the RAHS will assign PBV staff and a contracted housing agent for administration of the vouchers including waiting list, applicant eligibility determinations and income verifications.

Feel free to contact Kathy French at 517.599.6389(cell) or frenchk@michigan.gov if you should have further questions or concerns.

Sincerely,

Lisa Kemmis,
Acting Director, RAHS
Michigan State Housing Development Authority

Cc: Joe Heaphy, Ethos Development Partners
MSHDA Staff: Paul Stoddard, Dan Lince, Etta Henderson, Margaret Meyers, Guy Stockard, Maryanne Vukonich, Elizabeth Rademacher, James Flanagan

ADDENDUM III – Continuum of Care Form

This form should be completed and submitted with the Addendum III LIHTC application . The Developer must complete pages 1-2 and the CoC must complete pages 3-4. If additional exhibits are needed to describe the information requested please attach the information to this form.

Owner Identification:

Organization	Mariners Inn
Primary Address	445 Ledyard St
Contact Person	Dave Sampson
Contact Phone	1-313-962-9416 ext 224
Contact Email	dsampson@marinersinn.org
President/CEO	Dave Sampson

Continuum of Care Identification Information:

Organization	Homeless Action Network of Detroit
Primary Address	3701 Miracles Boulevard, Suite 101, Detroit, MI
Contact Person	Tasha Grey
Contact Phone	313-964-3666 x101
Contact Email	tasha@handetroit.org
Chair or Designee	Tasha Grey

Housing Assessment and Resource Agency (HARA):

Organization	Southwest Solutions
Primary Address	1600 Porter Street, Detroit, MI

Contact Person	Jamie Ebaugh
Contact Phone	313-515-3073
Contact Email	jebaugh@swsol.org
Chair or Designee	Jamie Ebaugh

Lead Organization Identification Information:

Organization	Mariners Inn
Primary Address	445 Ledyard St
Contact Person	Dave Sampson
Contact Phone	1-313-962-9416 ext 224
Contact Email	dsampson@marinersinn.org
Chair or Designee	Dave Sampson

Project Name: The Anchor at Mariners Inn

Project Location: 445 Ledyard, Detroit County Wayne

Attach a copy of the letter of intent describing the proposed Permanent Supportive Housing Development as described below:

- a. The Developer is encouraged to submit a concept letter of intent to the CoC describing the proposed Permanent Supportive Housing Development. The letter should include:
 - a. The total number of units
 - b. The number of PSH units
 - c. Targeted Population
 - d. Description of the housing units, ie. Townhouses, Apartments, Single Family homes.
 - e. Bedroom mix of the proposed PSH units
 - f. Location of the Development
 - g. Proposed Services and Amenities

If the Developer is seeking points for CoC engagement and participation, the developer must attend a CoC meeting to discuss the proposed development outlined in the concept letter and provide a signed copy of the CoC Support Form.

Targeted Populations

Please check all that apply to this development:

Head of Household or Adult Member of Household must meet at least one of the following criteria: Definition details can be found in Attachment A of the Addendum III.

1. Homeless (please check below all that apply)

Category 1 An individual or family who lacks a fixed, regular, and adequate nighttime residence.

Category 2 An individual or family who will imminently lose their primary nighttime residence.

Category 3 Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition.

Category 4 Domestic Violence

2. Chronically Homeless

3. Special Needs

If targeted populations include homeless populations **attach HMIS data** supporting the need for the proposed permanent supportive housing units and **describe** the community's screening and **referral process** for permanent supportive housing. Describe how this process will provide referrals to the proposed development.

HMIS data can be found in **Exhibit 13.3** of Addendum III. Mariner's Inn is a Housing First project, an approach and philosophy embraced by the development team. Using this approach, Mariner's Inn will move individuals into permanent supportive housing and provide an array of voluntary supportive services aimed at stabilizing the clients during the first year of being housed. The supportive services model for this new PSH community is built upon low-barrier admissions practices and providing housing to the most vulnerable clients on the project waitlist will be given priority based upon assessment scores.

The project will accept referrals through Detroit's The Coordinated Assessment Model (CAM), a systematic approach to homelessness in Detroit, Highland Park and Hamtramck that focuses on aligning the needs of individuals and families experiencing homelessness or at imminent risk of becoming homeless to available shelter and housing resources. Mariners Inn will rely on CAM for screening community members for various housing programs based on homeless status, disability status, and Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) scores to determine vulnerability and the immediacy of their needs.

CoC Comments:

Please provide a letter of support for the proposed development and provide any additional comments below:

Letter of Support from CoC can be found in **Exhibit 9.3** of Addendum III.

Attach a copy of the CoC meeting minutes from the meeting that the Development Team presented the Permanent Supportive Housing proposal including the date of the meeting, an attendee roster with the name of the attendee and the agency represented.

See **Exhibit 9.2** of Addendum III



MARINERS INN

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Chief Financial Officer

Nicole Freeman, MBA

May 12, 2019

Ms. Tasha Gray
Executive Director
Homeless Action Network of Detroit (HAND)
3701 Miracles Blvd. Suite 101
Detroit, MI 48201

Re: Mariners Inn Permanent Supportive Housing Project

Dear Ms. Gray:

On behalf of the Mariners Inn and our development partner Cinnaire Solutions, I am pleased to submit this letter of intent for our plan to develop approximately 60 one-bedroom units of **Permanent Supportive Housing (PSH) for homeless individuals on Cass Avenue** in Detroit's Midtown neighborhood. Mariners Inn is also considering having a portion of these units set-aside for Recovery Housing. The creation of community amenity space and space for supportive service delivery for residents will also be included. The project will seek project-based rental assistance from MSHDA and the Detroit Housing Commission for all units.

A minimum of 40 hours of on-site supportive services will be provided to tenants of the project. There are few programmatic prerequisites to permanent housing entry and low barrier admission policies. All services for residents will be voluntary. The owners, service providers, and property management company will agree to a blended management approach, using a Housing First model.

Our team is working with the architect for the project to include community amenity space such as areas for social gatherings, a community kitchen, a resource library and computer lab, art room, and media room. Property management will have an on-site office for a full-time property manager. The project will also have space dedicated to supportive service delivery to tenants including offices for case management, and group therapy rooms.

The following are the members of the Development Team for the project:

Sponsor/Developer/Owner: Mariners Inn and Cinnaire
Service Provider: Mariners Inn
Consultant: Ethos Development Partners
Property Management: TBD



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Mariners Inn Overview

Mariners Inn began in 1925 as a program of the Detroit Episcopal City Mission Society, whose headquarters were in the Mariners Church. It became one of the oldest centers of Social Service in the City of Detroit.

For the next 27 years, Mariners Inn provided food and shelter to more than 6,500 men a year in a three-floor building on Jefferson and Woodward. In the early 1950's the City of Detroit was changing. A plan for a new civic center to be built on the waterfront was underway and Mariners Inn needed to relocate. It was determined that Mariners Inn should be located in the downtown area, and in 1955 a new Inn was constructed on **Ledyard and Cass**, our home for the past 63 years.

Mariners Inn remains a refuge for those in need. The Inn strives to fulfill its mission of providing professional and compassionate residential substance abuse treatment for homeless men, helping them gain their health, independence, and self-esteem. The mission of Mariners Inn and the commitment of the staff are as strong now as they were when it began in 1925.

All Mariners Inn consumers enroll and remain at the Inn voluntarily; they must have chosen to participate in substance abuse treatment. Our services include:

- Residential Treatment Program: Provides State-licensed and CARF-accredited residential substance abuse treatment and a broad range of other services for up to 90 days (70 bed capacity, plus 10 emergency beds).
- Recovery Housing (RH) Program: Offers up to 6 months of supportive pre-independent living arrangements and substance abuse counseling for homeless men who have completed the Residential Treatment Program (36 bed capacity).
- Mariners Extended Residency (MER) Program: Provides long-term services to consumers who have completed the Residential Treatment Program but are not yet ready to pursue independent living because of physical or mental disabilities, illiteracy, or lack of job skills (28 bed capacity).
- Strengthening Families Youth Prevention Program: This program is grounded in SAMHSA's Strengthening Families Program (SFP) model, which is evidence-based with proven results. SFP uses family systems and cognitive-behavioral techniques to improve parenting skills, strengthen family relationships, and increase children's life and social skills (e.g. peer resistance and communication) so they are more likely to avoid high-risk activities. At least 30 families are served each year.
- Alumni Program: Provides our graduates with ongoing substance abuse counseling, recreational activities, and skill-building sessions that help them remain sober, employed, and housed.
- Peer Mentoring: This peer-driven recovery support program is targeted to individuals and families who have been impacted by substance abuse. The Peer Mentoring Program will stimulate the growth and development of a strong and active community of peers in recovery who will share their experience, knowledge, and support with those who are just beginning their recovery journeys.

Recovery is Real...and Begins at Mariners Inn

- Residential Youth Prevention Program (RYPP): RYPP services young men ages 18-29 that are in imminent danger of falling into homelessness, drug addiction, and/or criminal behavior. RYPP houses men up to 90 days in a residential setting and provides individual therapy, drug prevention classes, vocational assistance, mental health treatment, peer support, art therapy, entry-level employment, and housing placement.
- Strong-Healthy-Empowered (SHE): SHE is a skill development program for young women that focuses on building a positive understanding of self-worth and confidence by focusing on the subject areas of Living, Feeling and Thinking Healthy.

Ongoing case management helps clients stay on track and ensures they are accessing the services they need. To help residential clients avoid future homelessness, Mariners Inn provides vocational counseling, access to employment skills training, transportation, referrals for medical and mental health care, help with goal setting and planning, and housing referrals.

Additional supportive services provided to clients include 3 nutritious meals a day, didactic lectures, group therapy, life skills classes (e.g. parenting, nutrition, and personal organization), computer classes, special services to HIV-positive clients and those who suffer from co-occurring disorders, tutoring, and GED classes.

Cinnaire Solutions Overview

Building Blocks Non-Profit Housing Corporation (“Cinnaire Solutions”), a Michigan nonprofit corporation exempt from income tax under Section 501(c)(3) of the Code, was founded in 1994. Cinnaire Solutions mission is to foster and sponsor development that supports the economic wellbeing of low income individuals, families and communities. Its efforts focus on creating safe, strong, economically vital communities for all residents. This is accomplished through expanding the financial and technical resources available to the development partners with which it works. Cinnaire Solutions considers their market niche to be spaces with high barriers to engaging private sector investments.

The Mission and Guiding Principles of Cinnaire Solutions are:

People: To help communities reach their highest potential by leveraging our talents, financial resources, and development partners. Cinnaire strongly values safety, security, and economic well-being for the people we serve – these are guiding principles in our work and greatly influence our decisions. They work to build capacity with their growing partners.

Place: To the greatest extent possible create impact through intentional design to complement and support a community’s vision of place while working to protect their authenticity and future sustainability.

Partnerships: To focus on expanding the financial and technical resources of development partners. Cinnaire values getting work done in teams and are committed to strengthening the capacities of disadvantaged partners, particularly people of color.

Pioneering: To work in spaces with high barriers to entry. Because Cinnaire has talented people, a strong track record, and key partners, they have opportunities to create new, notable opportunities. They believe that success breeds success, and they work to ensure that their work becomes a model for others.

Prosperity. Doing well by doing good and creating prosperity at all intersections of their work.

Recovery is Real...and Begins at Mariners Inn

Target Population

The proposed 60 units of Permanent Supportive Housing will be primarily targeted to respond to the circumstances of homeless men, helping them gain their health, independence, and self-esteem. Homelessness in Detroit continues to be a staggering public problem. According to the Homeless Action Network of Detroit (HAND), there were 14,117 homeless people counted in 2016. Of those, 9,560 were single adults and single men represented 73% of that population. Over the course of 2016, a total of 2,107 people were identified as being chronically homeless, 71% of the chronically homeless were males and the average age was 48. Of the chronically homeless, 90% were African American, 9% were White, and 1% were other.

The proposed project will help address the evident need for PSH within the Detroit Continuum of Care for homeless and those at risk of being homeless. Mariners Inn serves as an anchor for those struggling to navigate the treacherous waters of homelessness and substance abuse through a wide range of social service programs that achieve the best possible outcomes for adults, families and youth affected by addiction.

Mariners Inn provides 24 hour residential substance abuse treatment for adult homeless men in a professional, compassionate, therapeutic environment conducive to reducing their problems of drug and alcohol addiction, thereby promoting their return to health, independence, and increased self-worth. A Recovery Housing Program offers up to six months of supportive pre-independent living arrangements and substance abuse counseling for homeless men who have completed the Residential Treatment Program.

In addition, the Mariners Extended Residency (MER) Program provides beds and long-term services to consumers who have completed the Residential Treatment Program but are not yet ready to pursue independent living because of physical or mental disabilities, illiteracy, or lack of job skills. Additional programs and services include: Strengthening Families Youth Substance Abuse Prevention Program; Alumni Program; Peer Mentoring; Outpatient Counseling; Residential Youth Preservation Program (RYPPP); Strong-Healthy-Empowered (SHE) program, a skill development program for young women; ongoing case management; life skills training; computer classes; and 3 nutritious meals a day.

Referral and Assessment

The development will provide a low-barrier admission to housing. While all who meet the homeless and special needs eligibility criteria, as defined by MSHDA, the most vulnerable are given priority based upon assessment scores. Potential tenants will be assessed by the Coordinated Access Model agency (Detroit CoC CAM/HARA) using the Service Prioritization Decision Assistance Tool (VI-SPDAT and full SPDAT) to assess their vulnerability and the immediacy of their needs. Eligible tenants will then be placed on shared Housing Prioritization Registry, sorted by level of need, and pulled for openings in any PSH program within the Detroit CoC. The Arizona Self-sufficiency Matrix (ASM) will be used to determine the benchmarks for self-sufficiency across 8 domains. The ASM is completed for each individual using HMIS at entry and periodically (at least every 6 months) as an additional tool for assessing client progress towards self-sufficiency. Mariners Inn currently participates in the Detroit CoC CAM system. CAM refers men who are interested in recovery housing or permanent supportive housing. Mariners Inn participates in the bi-monthly CAM meetings to share information about the open beds with other CoC agencies.

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Marketing

Mariners Inn promotes equal opportunities for safe and affordable housing to all persons, regardless of race, color, sex, sexual orientation, religion, ancestry, national origin, marital status, age, disability, HIV/AIDS status or place of residence.

The advertising/announcement content for the new PSH will indicate where and when people can pick up applications for the waiting list and will provide as much information as feasible regarding the documents necessary to submit an application.

Notices will be sent to non-profit organizations and other agencies serving low-income individuals, men with SUD, disabled adults, and others. Announcements will be posted at the management entity's offices, the lease-up office at the PSH program, and at other buildings managed by the management entity. For the initial rent up, ads will also appear in local newspapers. Because of cost factors and because the homeless population is not effectively reached through commercial media, ads will not appear in local newspapers after initial marketing efforts.

Project Summary

The development is located in the heart of Detroit in the new District Detroit neighborhood less than a block from the new Little Caesars Arena. The property is next to the mixed-use development led by the Ilitch organization that unites theater and three sporting venues in one vibrant, walkable destination for people who want to live, work and play in an exciting urban environment. The neighborhood has plans for new restaurants, shops, bars, parks and more coming online as part of this transformational development project. Amenities provided within a mile radius of the new PSH facility include a pharmacy, a dollar store, a FCHC clinic, parks, and numerous eating establishments. Additionally, public transit access on Woodward and Cass Avenues ensures connectivity for residents, while providing employment and cultural opportunities along the Woodward Corridor. Mariners Inn will also provide transportation for tenants.

Service Model

Mariners Inn will be the Lead Agency and will provide case management services to residents. Mariners Inn staff will also work closely with the property management staff onsite at the development. The project will offer affordable housing linked to health, substance abuse services, mental health, employment, and other support services. Supportive housing is intended to be a pragmatic solution that helps people recover and succeed while reducing the overall cost of care. Services in supportive housing are voluntary, flexible, and primarily focused on the outcome of housing stability.

The development will benefit from the experience the Lead Agency has with The Mariners Inn Extended Residency (MER) program which provides long-term housing and services to consumers who have completed the organization's Residential Treatment Program but are not yet ready to pursue independent living because of physical or mental disabilities, illiteracy, or lack of job skills. MER is a proven, cost-effective way to end homelessness for people who face the most complex challenges. This Supportive Housing Program is provided to help homeless persons meet three overall goals: achieve residential stability; increase their skill levels and/or incomes, and; obtain greater self-determination.

Mariners Inn will be responsible for hiring a full-time case manager for the project, along with coordinating additional supportive services with other agencies or service providers, as needed. The development will support a person-centered approach, developing Individualized Service Plans (ISP),

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and providing direct supportive services, and coordination services with other service providers, entitlement and benefit programs, transportation, education, and employment programs.

It is anticipated that these comprehensive services and opportunities will allow some tenants to eventually attain a level of stability and self-sufficiency to move on from the project. It is also expected that a portion of tenants will require intensive supportive services throughout their lives. This development will offer those tenants an opportunity to lead enriched lives with dignity and security.

Expected Project Outcomes

Mariners Inn and Cinnaire Solutions plan to submit an application for this project in the MSHDA 9% LIHTC funding round on October 1, 2019. Expected operation date of the project is mid 2021.

The Permanent Supportive Housing Program will have three basic goals:

- To help participants obtain and remain in permanent housing,
- To help participants increase skills and/or income, and
- To help participants achieve greater self-determination.

The Mariners Inn PSH will provide a unique opportunity for households who are homeless, at-risk of homelessness, or who have very low incomes. Tenants of the PSH will live in a community with full access to services that will meet their specific needs, while encouraging independence and growth. The project will offer different levels of support, depending on the service needs of the individual. Populations will thrive and flourish in an environment that offers a variety of levels of support. Services will be offered through a coordinated effort among the owner, property management staff, on-site service staff, and the tenants themselves –ensuring a healthy living environment for all tenants.

The overall philosophy of service delivery at the Mariners Inn PSH will focus on helping tenants to maximize their ability to live independently. Our service philosophy is based on providing compassionate, individualized, voluntary services designed to help tenants meet their own goals for self-sufficiency and self-determination.

Mariners Inn and Cinnaire Solutions appreciate the consideration and support of the Detroit Continuum of Care and look forward to discussing the project in greater detail.

Sincerely,

A handwritten signature in black ink, appearing to read 'D. Sampson' with a stylized flourish at the end.

David Sampson
Chief Executive Officer

Southwest Housing Solutions Campbell Street PSH **Housing Leverage Documentation Details**

The following pages provide details to the housing leverage documentation being submitted for this new PSH project. Specifically, please find:

- HAP contract with the Michigan State Housing Development Authority (MSHDA) for the project-based vouchers
- Letter dated October 25, 2022 from MSHDA stating that all 40 of the units in this building have been awarded Project-Based Vouchers (PBV).
- This project was awarded Project-Based Vouchers prior to its applying to the CoC for Permanent Supportive Housing funding. As noted in the attached excerpt from the project application, if this project is awarded CoC funds, the applicant will complete an amendment to the Michigan State Housing Development Authority to change the target population for 20 units in this building to target people who are chronically homeless and/or meet the definition of DedicatedPLUS.

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing**

SECTION 8 PROJECT-BASED VOUCHER PROGRAM

**AGREEMENT TO ENTER INTO A
HOUSING ASSISTANCE PAYMENTS CONTRACT**

NEW CONSTRUCTION OR REHABILITATION

PART I

Public reporting burden for this collection of information is estimated to average 0.5 hours. This includes the time for collecting, reviewing and reporting the data. The information is being collected as required by 24 CFR 983.152, which requires the PHA to enter into an Agreement with the owner prior to execution of a HAP contract for PBV assistance as provided in §983.153. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection.

Privacy Act Statement. HUD is committed to protecting the privacy of individuals' information stored electronically or in paper form, in accordance with federal privacy laws, guidance, and best practices. HUD expects its third-party business partners, including Public Housing Authorities, who collect, use maintain, or disseminate HUD information to protect the privacy of that information in Accordance with applicable law.

1.1 Parties

This Agreement to Enter into Housing Assistance Payments Contract (“Agreement”) is between:

_____ (“PHA”) and

_____ (“owner”).

1.2 Purpose

The owner agrees to develop the Housing Assistance Payments Contract (“HAP Contract”) units to in accordance with Exhibit B and to comply with Housing Quality Standards (“HQS”), and the PHA agrees that, upon timely completion of such development in accordance with the terms of the Agreement, the PHA will enter into a HAP Contract with the owner of the Contract units.

1.3 Contents of Agreement

This Agreement consists of Part I, Part II, and the following Exhibits:

EXHIBIT A: The approved owner's PBV proposal. (Selection of proposals must be in accordance with 24 CFR 983.51.)

EXHIBIT B: Description of work to be performed under this Agreement, including:

- if the Agreement is for rehabilitation of units, this exhibit must include the rehabilitation work write-up and, where the PHA has determined necessary, specifications and plans.
- if the Agreement is for new construction of units, the work description must include the working drawings and specifications.
- any additional requirements beyond HQS relating to quality, design and architecture that the PHA requires.
- work items resulting from compliance with the design and construction requirements of the Fair Housing Act and implementing regulations at 24 CFR 100.205, the accessibility requirements under section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.22 and 8.23, and accessibility requirements under Titles II and III of the Americans with Disabilities Act at 28 CFR parts 35 and 36, as applicable.

EXHIBIT C: Description of housing, including:

- project site.
- total number of units in project covered by this Agreement.
- locations of contract units on site.
- number of contract units by area (size) and number of bedrooms and bathrooms.
- services, maintenance, or equipment to be supplied by the owner without charges in addition to the rent to owner.
- utilities available to the contract units, including a specification of utility services to be paid by the owner (without charges in addition to rent) and utility services to be paid by the tenant.

- estimated initial rent to owner for the contract units.

EXHIBIT D: The HAP contract.

1.4 Significant Dates

- A. **Effective Date of the Agreement:** The Agreement must be executed promptly after PHA notice of proposal selection to the owner has been given. The PHA may not enter this Agreement with the owner until a subsidy layering review has been performed and an environmental review has been satisfactorily completed in accordance with HUD requirements.
- B. A project may either be a single-stage or multi-stage project. A single-stage project will have the same Agreement effective date for all contract units. A multi-stage project will separate effective dates for each stage.

_____ **Single-stage project**

- i. Effective Date for all contract units: _____
- ii. Date of Commencement of the Work: The date for commencement of work is not later than _____ calendar days after the effective date of this Agreement.
- iii. Time for Completion of Work: The date for completion of the work is not later than _____ calendar days after the effective date of this Agreement.

_____ **Multi-Stage Project**

Enter the information for each stage upon execution of the Agreement for the corresponding stage.

STAGE	NUMBER OF UNITS	EFFECTIVE DATE	DATE OF COMMENCEMENT OF WORK	TIME FOR COMPLETION OF WORK

1.5 Nature of the Work

_____ This Agreement is for **New Construction** of units to be assisted by the project-based Voucher program.

_____ This Agreement is for **Rehabilitation** of units to be assisted by the project-based Voucher program.

1.6 Schedule of Completion

- A. **Timely Performance of Work:** The owner agrees to begin work no later than the date for commencement of work as stated in paragraph (d). In the event the work is not commenced, diligently continued and completed as required under this Agreement, the PHA may terminate this Agreement or take other appropriate action. The owner agrees to report promptly to the PHA the date work is commenced and furnish the PHA with progress reports as required by the PHA.
- B. **Time for Completion:** All work must be completed no later than the end of the period stated in paragraph (d). Where completion in stages is provided for, work related to units included in each stage shall be completed by the stage completion date and all work on all stages must be completed no later than the end of the period stated in paragraph (d).
- C. **Delays:** If there is a delay in the completion due to unforeseen factors beyond the owner’s control as determined by the PHA, the PHA agrees to extend the time for completion for an appropriate period as determined by the PHA in accordance with HUD requirements.

1.7 Changes in Work

- A. The owner must obtain prior PHA approval for any change from the work specific in Exhibit B which would alter the design or quality of the rehabilitation or construction. The PHA is not required to approve any changes requested by the owner. PHA approval of any change may be conditioned on establishment of a lower initial rent to owner at the amounts determined by PHA.

- B. If the owner makes any changes in the work without prior PHA approval, the PHA may establish lower initial rents to owner at the amounts determined by PHA in accordance with HUD requirements.
- C. The PHA (or HUD in the case of insured or coinsured mortgages) may inspect the work during rehabilitation or construction to ensure that work is proceeding on schedule, is being accomplished in accordance with the terms of the Agreement, meets the level of material described in Exhibit B and meets typical levels of workmanship for the area.

1.8 Work completion

- A. Conformance with Exhibit B: The work must be completed in accordance with Exhibit B. The owner is solely responsible for completion of the work.
- B. Evidence of Completion: When the work is completed, the owner must provide the PHA with the following:
 - 1. A certification by the owner that the work has been completed in accordance with the HQS and all requirements of this Agreement.
 - 2. A certification by the owner that the owner has complied with labor standards and equal opportunity requirements in the development of the housing. (See 24 CFR 983.155(b)(1)(ii).)
 - 3. Additional Evidence of Completion: At the discretion of the PHA, or as required by HUD, this Agreement may specify additional documentation that must be submitted by owner as evidence of completion of the housing. Check the following that apply:
 - _____ A certificate of occupancy or other evidence that the contract units comply with local requirements.
 - _____ An architect's or developer's certification that the housing complies with:
 - _____ the HQS;
 - _____ State, local, or other building codes;
 - _____ Zoning;
 - _____ The rehabilitation work write-up for rehabilitated housing;

_____ The work description for newly constructed housing; or

_____ Any additional design or quality requirements pursuant to this Agreement.

1.9 Inspection and Acceptance by the PHA of Completed Contract Units

- A. Completion of Contract Units: Upon receipt of owner notice of completion of Contract units, the PHA shall take the following steps:
 - 1. Review all evidence of completion submitted by owner.
 - 2. Inspect the units to determine if the housing has been completed in accordance with this Agreement, including compliance with the HQS and any additional requirements imposed by the PHA under this Agreement.
- B. Non-Acceptance: If the PHA determines the work has not been completed in accordance with this Agreement, including non-compliance with the HQS, the PHA shall promptly notify the owner of this decision and the reasons for the non-acceptance. The parties must not enter into the HAP contract.
- C. Acceptance: If the PHA determines housing has been completed in accordance with this Agreement, and that the owner has submitted all required evidence of completion, the PHA must submit the HAP contract for execution by the owner and must then execute the HAP contract.

1.10 Acceptance where defects or deficiencies are reported:

- A. If other defects or deficiencies exist, the PHA shall determine whether and to what extent the defects or deficiencies are correctable, whether the units will be accepted after correction of defects or deficiencies, and the requirements and procedures for such correction and acceptance.
- B. Completion in Stages: Where completion in stages is provided for, the procedures of this paragraph shall apply to each stage.

1.11. Execution of HAP Contract

- A. Time and Execution: Upon acceptance of the units by the PHA, the owner and the PHA execute the HAP contract.

- B. Completion in Stages: Where completion in stages is provided for the number and types of units in each stage, and the initial rents to owner for such units, shall be separately shown in Exhibit C of the contract for each stage. Upon acceptance of the first stage, the owner shall execute the contract and the signature block provided in the contract for that stage. Upon acceptance of each subsequent stage, the owner shall execute the signature block provided in the contract for such stage.
- C. Form of Contract: The terms of the contract shall be provided in Exhibit D of this Agreement. There shall be no change in the terms of the contract unless such change is approved by HUD headquarters. Prior to execution by the owner, all blank spaces in the contract shall be completed by the PHA.
- D. Survival of owner Obligations: Even after execution of the contract, the owner shall continue to be bound by all owner obligations under the Agreement.

1.12 Initial determination of rents

- A. The estimated amount of initial rent to owner shall be established in Exhibit C of this Agreement.
- B. The initial amount of rent to owner is established at the beginning of the HAP contract term.
- C. The estimated and initial contract rent for each units may in no event exceed the amount authorized in accordance with HUD regulations and requirements. Where the estimated initial rent to owner exceeds the amount authorized in accordance with HUD regulations, the PHA shall establish a lower initial rent tow owner, in accordance with HUD regulations and requirements.

1.13 Uniform Relocation Act

- A. A displaced person must be provided relocation assistance at the levels described in and in accordance with the requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA) (42 U.S.C. 4201-4655) and implementing regulations at 49 CFR part 24.
- B. The cost of required relocation assistance may be paid with funds provided by the owner, or with local public funds, or with funds available from other sources. Payment of relocation assistance must be paid in accordance with HUD requirements.

- C. The acquisition of real property for a project to be assisted under the program is subject to the URA and 49 CFR part 24, subpart B.
- D. The PHA must require the owner to comply with the URA and 49 CFR part 24.
- E. In computing a replacement housing payment to a residential tenant displaced as a direct result of privately undertaken rehabilitation or demolition of the real property, the term “initiation of negotiations” means the execution of the Agreement between the owner and the PHA.

1.14 Protection of In-Place Families

- A. In order to minimize displacement of in-place families, if a unit to be placed under Contract is occupied by an eligible family on the proposal selection date, the in-place family must be placed on the PHA’s waiting list (if they are not already on the list) and, once their continued eligibility is determined, given an absolute selection preference and referred to the project owner for an appropriately sized unit in the project.
- B. This protection does not apply to families that are not eligible to participate in the program on the proposal selection date.
- C. The term “in-place family” means an eligible family residing in a proposed contract unit on the proposal selection date.
- D. Assistance to in-place families may only be provided in accordance with the program regulations and other HUD requirements.

1.15 Termination of Agreement and Contract

The Agreement or HAP contract may be terminated upon at least 30 days notice to the owner by the PHA or HUD if the PHA or HUD determines that the contract units were not eligible for selection in conformity with HUD requirements.

1.16 Rights of HUD if PHA Defaults Under Agreement

If HUD determines that the PHA has failed to comply with this Agreement, or has failed to take appropriate action to HUD’s satisfaction or as directed by HUD, for enforcement of the PHA’s rights under this Agreement, HUD may assume the PHA’s rights and obligations under the Agreement, and may perform the obligations and enforce the rights of the PHA under the Agreement. HUD will, if it determines that the owner is not in default, pay Annual Contributions for the purpose of providing housing assistance payments with respect to the dwelling unit(s) under this Agreement for the duration of the HAP contract.

1.17 Owner Default and PHA Remedies

A. Owner Default

Any of the following is a default by the owner under the Agreement:

1. The owner has failed to comply with any obligation under the Agreement.
2. The owner has violated any obligation under any other housing assistance payments contract under Section 8 of the United States Housing Act of 1937 (42 U.S.C. 1437f).
3. The owner has committed any fraud or made any false statement to the PHA or HUD in connection with the Agreement.
4. The owner has committed fraud, bribery, or any other corrupt or criminal act in connection with any Federal housing assistance program.
5. If the property where the contract units are located is subject to a lien or security interest securing a HUD loan or mortgage insured by HUD and:
 - a. The owner has failed to comply with the regulations for the applicable HUD loan or mortgage insurance program, with the mortgage or mortgage note, or with the regulatory agreement; or
 - b. The owner has committed fraud, bribery, or any other corrupt or criminal act in connection with the HUD loan or HUD-insured mortgage.
6. The owner has engaged in any drug-related criminal activity or any violent criminal activity.

B. PHA Remedies

1. If the PHA determines that a breach has occurred, the PHA may exercise any of its rights or remedies under the Agreement.
2. The PHA must notify the owner in writing of such determination. The notice by the PHA to the owner may require the owner to take corrective action (as verified by the PHA) by a time prescribed in the notice.

3. The PHA's rights and remedies under the Agreement include, but are not limited to: (i) terminating the Agreement; and (ii) declining to execute the HAP contract for some or all of the units.

C. PHA Remedy is not Waived

The PHA's exercise or non-exercise of any remedy for owner breach of the Agreement is not a waiver of the right to exercise that remedy or any other right or remedy at any time.

1.18 PHA and Owner Relation to Third Parties

A. Selection and Performance of Contractor

1. The PHA has not assumed any responsibility or liability to the owner, or any other party for performance of any contractor, subcontractor or supplier, whether or not listed by the PHA as a qualified contractor or supplier under the program. The selection of a contractor, subcontractor or supplier is the sole responsibility of the owner and the PHA is not involved in any relationship between the owner and any contractor, subcontractor or supplier.
2. The owner must select a competent contractor to undertake rehabilitation or construction. The owner agrees to require from each prospective contractor a certification that neither the contractor nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in contract by the Comptroller General or any federal Department or agency. The owner agrees not to award contracts to, otherwise engage in the service of, or fund any contractor that does not provide this certification.

B. Injury Resulting from Work under the Agreement: The PHA has not assumed any responsibility for or liability to any person, including a worker or a resident of the unit undergoing work pursuant to this Agreement, injured as a result of the work or as a result of any other action or failure to act by the owner, or any contractor, subcontractor or supplier.

C. Legal Relationship: The owner is not the agent of the PHA and this Agreement does not create or affect any relationship between the PHA and any lender to the owner or any suppliers, employees, contractor or subcontractors used by the owner in the implementation of the Agreement.

D. Exclusion of Third Party Claims: Nothing in this Agreement shall be construed as creating any right of any third party (other than HUD) to

enforce any provision of this Agreement or the Contract, or to assert any claim against HUD, the PHA or the owner under the Agreement or the Contract.

- E. Exclusion of owner Claims against HUD: Nothing in this Agreement shall be construed as creating any right of the owner to assert any claim against HUD.

1.19 PHA-Owned Units

Notwithstanding Section 1.18 of this Agreement, a PHA may own units assisted under the project-based voucher program, subject to the special requirements in 24 CFR 983.59 regarding PHA-owned units.

1.20 Conflict of Interest

- A. Interest of Members, Officers, or Employees of PHA, Members of Local Governing Body, or Other Public Officials
 - 1. No present or former member or officer of the PHA (except tenant-commissioners), no employee of the PHA who formulates policy or influences decisions with respect to the housing choice voucher program or project-based voucher program, and no public official or member of a governing body or State or local legislator who exercises functions or responsibilities with respect to these programs, shall have any direct or indirect interest, during his or her tenure or for one year thereafter, in the Agreement or HAP contract.
 - 2. HUD may waive this provision for good cause.
- B. Disclosure

The owner has disclosed to the PHA any interest that would be a violation of the Agreement or HAP contract. The owner must fully and promptly update such disclosures.

1.21 Interest of Member or Delegate to Congress

No member of or delegate to the Congress of the United States of America or resident-commissioner shall be admitted to any share or part of the Agreement or HAP contract or to any benefits arising from the Agreement or HAP contract.

1.22 Transfer of the Agreement, HAP Contract, or Property

A. PHA Consent to Transfer

The owner agrees that the owner has not made and will not make any transfer in any form, including any sale or assignment, of the Agreement, HAP contract, or the property without the prior written consent of the PHA. A change in ownership in the owner, such as a stock transfer or transfer of the interest of a limited partner, is not subject to the provisions of this section. Transfer of the interest of a general partner is subject to the provisions of this section.

B. Procedure for PHA Acceptance of Transferee

Where the owner requests the consent of the PHA for a transfer in any form, including any sale or assignment, of the Agreement, the HAP contract, or the property, the PHA must consent to a transfer of the Agreement or HAP contract if the transferee agrees in writing (in a form acceptable to the PHA) to comply with all the terms of the Agreement and HAP contract, and if the transferee is acceptable to the PHA. The PHA's criteria for acceptance of the transferee must be in accordance with HUD requirements.

C. When Transfer is Prohibited

The PHA will not consent to the transfer if any transferee, or any principal or interested party, is debarred, suspended, subject to a limited denial of participation, or otherwise excluded under 2 CFR part 2424, or is listed on the U.S. General Services Administration list of parties excluded from Federal procurement or nonprocurement programs.

1.23 Exclusion from Federal Programs

A. Federal Requirements

The owner must comply with and is subject to requirements of 2 CFR part 2424.

B. Disclosure

The owner certifies that:

1. The owner has disclosed to the PHA the identity of the owner and any principal or interested party.

2. Neither the owner nor any principal or interested party is listed on the U.S. General Services Administration list of parties excluded from Federal procurement and nonprocurement programs; and none of such parties are debarred, suspended, subject to a limited denial of participation, or otherwise excluded under 2 CFR part 2424.

1.24 Lobbying Certifications

- A. The owner certifies, to the best of the owner's knowledge and belief, that:
 1. No Federally appropriated funds have been paid or will be paid, by or on behalf of the owner, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of the Agreement or HAP contract, or the extension, continuation, renewal, amendment, or modification of the HAP contract.
 2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the Agreement or HAP contract, the owner must complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- B. This certification by the owner is a prerequisite for making or entering into this transaction imposed by 31 U.S.C. 1352.

1.25 Subsidy Layering

- A. Owner Disclosure

The owner must disclose to the PHA, in accordance with HUD requirements, information regarding any related assistance from the Federal government, a State, or a unit of general local government, or any agency or instrumentality thereof, that is made available or is expected to be made available with respect to the contract units. Such related assistance includes, but is not limited to, any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance.

B. Limit of Payments

Housing assistance payments under the HAP contract must not be more than is necessary, as determined in accordance with HUD requirements, to provide affordable housing after taking account of such related assistance. The PHA will adjust in accordance with HUD requirements the amount of the housing assistance payments to the owner to compensate in whole or in part for such related assistance.

1.26 Prohibition of Discrimination

- A. The owner may not refuse to lease contract units to, or otherwise discriminate against, any person or family in leasing of a contract unit, because of race, color, religion, sex, national origin, disability, age, or familial status.
- B. The owner must comply with the following requirements:
1. The Fair Housing Act (42 U.S.C. 3601–19) and implementing regulations at 24 CFR part 100 *et seq.*;
 2. Executive Order 11063, as amended by Executive Order 12259 (3 CFR 1959–1963 Comp., p. 652, and 3 CFR, 1980 Comp., p. 307) (Equal Opportunity in Housing Programs) and implementing regulations at 24 CFR part 107;
 3. Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d–2000d–4) (Nondiscrimination in Federally Assisted Programs) and implementing regulations at 24 CFR part 1;
 4. The Age Discrimination Act of 1975 (42 U.S.C. 6101–6107) and implementing regulations at 24 CFR part 146;
 5. Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794) and implementing regulations at part 8 of this title;
 6. Title II of the Americans with Disabilities Act, 42 U.S.C. 12101 *et seq.*;
 7. 24 CFR part 8;
 8. Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) and implementing regulations at 24 CFR part 135;

9. Executive Order 11246, as amended by Executive Orders 11375, 11478, 12086, and 12107 (3 CFR, 1964–1965 Comp., p. 339; 3 CFR, 1966–1970 Comp., p. 684; 3 CFR, 1966–1970 Comp., p. 803; 3 CFR, 1978 Comp., p. 230; and 3 CFR, 1978 Comp., p. 264, respectively) (Equal Employment Opportunity Programs) and implementing regulations at 41 CFR chapter 60;
10. Executive Order 11625, as amended by Executive Order 12007 (3 CFR, 1971–1975 Comp., p. 616 and 3 CFR, 1977 Comp., p. 139) (Minority Business Enterprise Development); and
11. Executive Order 12138, as amended by Executive Order 12608 (3 CFR, 1977 Comp., p. 393, and 3 CFR, 1987 Comp., p. 245) (Women’s Business Enterprise).
12. HUD’s Equal Access Rule at 24 CFR 5.105. [OGC- Nonconcurrency: This section failed to reference protections with respect to actual or perceived sexual orientation, gender identity, or marital status in accordance with HUD’s Equal Access Rule at 24 CFR 5.105(a). Revising as indicated above is sufficient to resolve this concern.

C. The PHA and the owner must cooperate with HUD in the conducting of compliance reviews and complaint investigations pursuant to all applicable civil rights statutes, Executive Orders, and all related rules and regulations.

1.27 Owner Duty to Provide Information and Access to HUD and PHA

- A. The owner must furnish any information pertinent to this Agreement as may be reasonably required from time to time by the PHA or HUD. The owner shall furnish such information in the form and manner required by the PHA or HUD.
- B. The owner must permit the PHA or HUD or any of their authorized representatives to have access to the premises during normal business hours and, for the purpose of audit and examination, to have access to any books, documents, papers, and records of the owner to the extent necessary to determine compliance with this Agreement.

1.28 Notices and Owner Certifications

- A. Where the owner is required to give any notice to the PHA pursuant to this Agreement, such notice shall be in writing and shall be given in the manner designated by the PHA.

- B. Any certification or warranty by the owner pursuant to the Agreement shall be deemed a material representation of fact upon which reliance was placed when this transaction was entered into.

1.29 HUD Requirements

- A. The Agreement and the HAP contract shall be interpreted and implemented in accordance with all statutory requirements, and will all HUD requirements, including amendments or changes in HUD requirements. The owner agrees to comply with all such laws and HUD requirements.
- B. HUD requirements are requirements that apply to the project-based voucher program. HUD requirements are issued by HUD Headquarters as regulations, *Federal Register* notices, or other binding program directives.

1.30 Applicability of Part II Provisions — Check All that Apply

- _____ Training, Employment, and Contracting Opportunities
Section 2.1 applies if the total of the contract rents for all units under the proposed HAP contract, over the maximum term of the contract, is more than \$200,000.
- _____ Equal Employment Opportunity
Section 2.2 applies only to construction contracts of more than \$10,000.
- _____ Labor Standards Requirements
Sections 2.4, 2.8, and 2.10 apply only when this Agreement covers nine or more units.
- _____ Flood Insurance
Section 2.11 applies if units are located in areas having special flood hazards and in which flood insurance is available under the National Flood Insurance Program.

EXECUTION OF THE AGREEMENT

PUBLIC HOUSING AGENCY (PHA) Name of PHA (Print)
By: <i>Lucy Kim</i> Signature of authorized representative
Name and official title (Print)
Date
OWNER Name of Owner (Print)
By: <i>Timothy S Thorland</i> Signature of authorized representative
Name and official title (Print)
Timothy S Thorland, Manager
Date 06.05.2023

AHAP Exhibit A

The approved owner's PBV Proposal.

Refer to the following PBV Preliminary Award Letter.



STATE OF MICHIGAN

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
LANSING

GRETCHEN WHITMER
GOVERNOR

GARY HEIDEL
ACTING EXECUTIVE DIRECTOR

October 25, 2022

Janay Mallett
5800 LDHA LP
1920 25th Street, Suite A
Detroit, MI 48216

Sent Via Email: jmallett@swsol.org

RE: 2022 PBV Preliminary Determination for the Award of Project-Based Vouchers (PBV) – Campbell Street Apts., of Detroit – Wayne County

Dear Ms. Mallett:

The application for Project-Based Vouchers (PBV) for the development noted above has been received and reviewed. Based on the selection criteria established for Project-Based Vouchers (PBV) awards, as set forth in the Administrative Plan and PBV Policy of the Michigan State Housing Development Authority (MSHDA), the proposed project for 40 PBVs in Wayne County being requested by 5800 Limited Dividend Housing Association Limited Partnership meets the MSHDA PHA Administrative Plan criteria.

MSHDA Underwriting: A Mortgage Loan Commitment has been issued; thus, MSHDA's underwriting process has been completed. HUD Subsidy Layering process will be forthcoming.

PBV Site Selection Criteria, a requirement of 24 CFR 983.57 has been satisfied and documented within the owner's proposal for a newly construction housing project.

Documentation regarding compliance with the Competitive Process, a requirement of 24 CFR 983.51(b)(2): The project received a 2022 Mortgage Loan Commitment dated October 20, 2022. This date was within the past three years and the competitive selection process did not involve any consideration that the project would receive PBV assistance. The project: therefore, meets the competitive process criteria stated in the HUD PBV regulations. PBV selection criteria provided in the owner proposal was found to be acceptable.

PBV Project Cap: Based on 24 CFR 983.56(a), (b)(1) and (2) and amended by HOTMA the limitation on the number of PBVs is the greater of 25 units or 25% of the units within a project. The development has a total of 40 units; with 40 PBV units all units will be eligible for services (exempt units); therefore, within the project cap. (In projects that are in a census tract with a poverty rate of 20% or less are subject to a higher (40%) cap. (The greater of 25 or 40% of units within the project documented by American Community Survey 5-Year Estimates.)

Agreement to Enter into Housing Assistance Payments Contract (AHAP) and Housing Assistance Payment (HAP) Contract: Once the following conditions are met and subject to HUD appropriations and regulations; MSHDA/PHA will enter into an Agreement and HAP Contract with the owner of the property selected to have project-based vouchers. Current regulations allow

MSHDA to enter into initial HAP contracts for a period of twenty years. Within one year prior to expiration, MSHDA may agree to extend the term of the initial HAP contract for an additional term of up to twenty years for a total of 40 years if it is determined an extension is appropriate to continue providing affordable housing to extremely low-income families. Any extensions will be subject to conditions set by HUD at the time of the extension.

CONDITIONS THAT MUST BE MET PRIOR TO THE EXECUTION OF THE AHAP

NOTE: The Agreement must be executed prior to the commencement of construction work. *Construction begins when excavation or site preparations (including clearing of the land) begins for the housing. If work begins prior to the execution of the Agreement, MSHDA/PHA will not be able to provide PBV rental assistance to this development.*

- A. **Subsidy Layering:** HUD subsidy layering process must be complete per 24 CFR 983.55. Refer to the following link for guidance and contact information:
<http://www.michigan.gov/mshda/0,4641,7-141--263960--,00.html>
- B. **Environmental Review:** Procedures per 24 CFR 58 must be completed to include HUD's approval of the environmental certification and request for release of funds. Refer to the following link for guidance and contact information:
https://www.michigan.gov/mshda/0,4641,7-141-5587_22721---,00.html
- C. **Equal Employment Opportunity and Labor Standards:** EEO requirements and Labor Standards requirements apply to this project. For EEO contact James Flanagan at 517.335.5186 or Flanaganj@Michigan.gov. Labor Standards: contact Etta Henderson at 313.456.3605 or HendersonE@michigan.gov for guidance needed to address these requirements. Refer to the following link for more information:
https://www.michigan.gov/documents/mshda/TAB_F_-_EEO_Plan_Requirements_653229_7.pdf.
- D. **Relocation Assistance (URA).** 24 CFR 983.7 Uniform Relocation Act. – if URA is triggered; the owner must submit a certification that all URA requirements have been complied with. If you have questions regarding URA requirements you may contact: Geoffrey Ehnis-Clark at 517.241.2996 or ehnisclarkg@michigan.gov. Refer to the following link for further information:
https://www.michigan.gov/documents/mshda/Revised_URA_Guidelines_5.18.18_623685_7.pdf
- E. **Work write-up (Rehabilitation Project) and/or work description (Newly Constructed Project) specifications and drawings** must be submitted to MSHDA's Chief Architect for review and compliance with the design and construction requirements of the Fair Housing Act and implementing regulations at 24 CFR 100.205 and the accessibility requirements under section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.22 and 8.23. Please contact Maryanne Vukonich at 517.373.9478 or vukonichm@michigan.gov for further information.

CONDITIONS TO BE MET PRIOR TO THE EXECUTION OF THE HAP CONTRACT

- A. **Certifications and addition information addressed within the AHAP:** Section 1.8 Work Completion, Section 1.13 Uniform Relocation Act, and Section 1.24 Lobbying Certifications. All certifications must be submitted to MSHDA/RAHS Division.

- B. **Construction Specialist Inspections:** All projects with no other MSHDA financing must be inspected by a MSHDA Construction Specialist. There will be two inspections: one at the rough in stage (before drywall installation); second at projects completion to confirm that all work meets AHAP Exhibit B. NOTE: MSHDA will be reviewing the site, parking lots, walks, exterior, common areas and the specific PBV units that will be include in the HAP contract. The sponsor MUST contact MSHDA to schedule these inspections, timely.
- C. **HQS Inspections:** All PBV units must be physically inspected by the MSHDA contracted Housing Agent and pass HUD Housing Quality Standards (HQS).
- D. **Rents to the Owner:** Final HAP Rents must be determined by MSHDA per 24 CFR 983 Subpart G and documented in the file to ensure rent reasonableness.

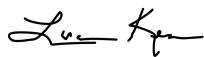
CONDITIONS TO BE MET AFTER EXECUTION OF THE HAP CONTRACT

- A. **Income Eligibility:** At initial admission to the MSHDA HCV/PBV Program, all participants at **Campbell Street Apartments**, must meet the MSHDA HCV/PBV Program income eligibility requirement of being at or below 30% of the area median income for **Wayne** County based on family size.
- B. **PBV Requirements:** PBV Participants must meet all PBV requirements to continue to occupy the PBV unit.
- C. **PBV Units:** All PBV units must be occupied by eligible PBV participants throughout the term of the HAP contract. If MSHDA finds that these units are not occupied by eligible households the unit(s) may be deleted from the HAP contract and not re-instated.

When this **Newly Constructed Housing Project** is near the time of occupancy, the Division of Rental Assistance and Homeless Solutions (RAHS) will allocate Housing Choice (HCV) Project Based Vouchers (PBV) from our portfolio to this project. At that time, RAHS will assign PBV staff and a contracted housing agent for administration of the vouchers including waiting list, applicant eligibility determinations and income verifications.

Feel free to contact Kathy French at 517.241.0505 or frenchk@michigan.gov if you should have further questions or concerns.

Sincerely,



Lisa Kemmis, Director
Rental Assistance and Homeless Solutions
Michigan State Housing Development Authority

Cc: Laura Santos, Southwest Housing Solutions
MSHDA Staff: Nicholas Shattuck, Daniel Lince, Michael Volick, Etta Henderson, Margaret Meyers, Guy Stockard, Maryanne Vukonich, Elizabeth Rademacher, Karen Waite.

AHAP EXHIBIT B

Description of work to be performed under this Agreement

Construction of a new 4-story, elevator, mixed-use building which includes 40 apartments, leasable office space and associated site development for parking. 10% (4) Units will be Type A, accessible units. 5% (2) units will be constructed to accommodate visually/hearing impaired tenants. The remaining units, 85% or (34) units, will be Type B units which are adaptable as per FHA guidelines. Resident amenity space to include Common Area Laundry, Lounge, Multi-Purpose Room, Security Office, (2) Support Offices, and outdoor landscaped areas. Building to meet NGBS Silver Certification. Building to have Natural Gas Generator. Site to contain secure parking with electronic gate access. Building plans have been approved by the City of Detroit, and building plans and specification book have been approved by MSHDA's Chief Architect.

The work description must include the working drawings and specifications.

Architectural Drawings dated April 24, 2023, Civil Drawings dated April 24, 2023, Mechanical and Electrical Drawings dated April 24, 2023, Structural Drawings dated April 24, 2023, and the Specifications prepared by the Architect dated July 29, 2022 further define the work to be performed under this agreement.

List work items resulting from compliance with the design and construction requirements of the Fair Housing Act and implementing regulations at 24 CFR 100.205 and the accessibility requirements under section 504 of the Rehabilitation Act of 1973 and implementing regulations at 24 CFR 8.22 and 8.23.

Fair Housing

Parking accessing the building entry and the building circulation paths are located along an accessible route. Dumpster access and location are along an accessible route. 10% (4) Units will be Type A, accessible units. 5% (2) units will be constructed to accommodate visually/hearing impaired tenants. The remaining units, 85% or (34) units, will be Type B units which are adaptable as per FHA guidelines.

Mobility/Accessible Units

Bathrooms will be accessible. Kitchens will be accessible and include switches, outlets, and cabinetry at accessible heights. Clear floor space and a workspace are also included in the kitchens. Switches will be located at an accessible height throughout the units.

Hearing/Visual Units:

Visual and audible notification devices will be installed to inform hearing/visual impaired tenants of a fire emergency. A phone will also be provided with visual/audible notification of phone call or guest at main entry.

AHAP EXHIBIT C
Description of housing

Project site brief narrative to include location of PBV contract units on site

The new 4-story mixed-use building includes 40 permanent supportive housing apartments and approximately 3,500 of first floor office space. Five (5) units will be located on the first floor of the building. Eleven (11) units will be located on the second floor. Twelve (12) units each will be located on floors three and four. The project consists of 5 one-bedroom units; 29 two-bedroom units and 6 three-bedroom units. An outdoor garden area will be provided.

Total number of PBV units in project covered by this Agreement

All units within this project will be assisted with project-based vouchers.

Number of PBV contract units by area (size) and number of bedrooms and bathrooms and estimated contract rent.

# PBV units	# BR	Size	# Bathrooms	Contract Rent
5	1	600 net square feet	1	\$1,017
29	2	850 net square feet	1	\$1,300
6	3	1,271 net square feet	2	\$1,645

Services, maintenance, or equipment to be supplied by the owner without charges in addition to the rent to owner

The following will be provided to tenants with no additional charges to the tenants:

- Snow removal
- Mini Blinds
- Lawn care
- Security cameras
- Gated and secured off-street parking
- Broad band internet services in community spaces as well as lap top computers
- Support services provided by Southwest Counseling Solution Corporation

Utilities available to the contract units, including a specification of utility services to be paid by owner (without charges in addition to rent) and utility services to be paid by the tenant.

All utilities will be paid by the owner to include, natural gas/heating, electric cooking, electric water heating, electricity, air conditioning, water and sewer and trash collection.

EXHIBIT D
The HAP Contract

As this is a new construction project the HUD 52530A – PBV Housing Assistance Payments Contract – New Construction or Rehabilitation document will be prepared and executed once construction is complete and HQS inspections are completed. This document is available for review on MSHDA’s website at this location: http://www.michigan.gov/mshda/0,4641,7-141-5555_60730---,00.html .

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing**

SECTION 8 PROJECT-BASED VOUCHER PROGRAM

**AGREEMENT TO ENTER INTO A
HOUSING ASSISTANCE PAYMENTS CONTRACT**

NEW CONSTRUCTION OR REHABILITATION

PART II

Public reporting burden for this collection of information is estimated to average 0.5 hours. This includes the time for collecting, reviewing and reporting the data. The information is being collected as required by 24 CFR 983.152, which requires the PHA to enter into an Agreement with the owner prior to execution of a HAP contract for PBV assistance as provided in §983.153. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection.

Privacy Act Statement. HUD is committed to protecting the privacy of individuals' information stored electronically or in paper form, in accordance with federal privacy laws, guidance, and best practices. HUD expects its third-party business partners, including Public Housing Authorities, who collect, use maintain, or disseminate HUD information to protect the privacy of that information in Accordance with applicable law.

2.1 Training, Employment, and Contracting Opportunities

- A. The project assisted under this Agreement is subject to the requirements of section 3 of the Housing Urban Development Act of 1968, as amended, 12 U.S.C. 1701u. The owner shall carry out the provisions of section 3 and the regulations issued by HUD as set forth in 24 CFR part 135 and all applicable rules and orders of HUD issued thereunder prior to the execution of this Agreement. This shall be a condition of the Federal financial assistance provided to the project, binding upon the owner, the owner's contractors and subcontractors, successors and assigns. Failure to fulfill these requirements shall subject the owner, the owner's contractors and subcontractors, successors and assigns to the sanctions specified by this Agreement, and to such sanctions as are specified by 24 CFR part 135.
- B. The owner shall incorporate or cause to be incorporated into any contract or subcontract for work pursuant to this Agreement in excess of \$100,000 the following clause:

1. The work to be performed under this contract is subject to the requirements of section 3 of the Housing Urban Development Act of 1968, as amended, 12 U.S.C. 1701u. The purpose of section 3 is to ensure that employment and other economic opportunities generated by HUD assistance or HUD-assisted projects covered by section 3 shall, to the greatest extent feasible, be directed to low- and very low-income persons, particularly persons who are recipients of HUD assistance for housing.
2. The parties to this Agreement agree to comply with HUD's regulations in 24 CFR part 135, which implement section 3. As evidenced by their execution of this Agreement, the parties to this Agreement certify that they are under no contractual or other impediment that would prevent them from complying with the part 135 regulations.
3. The contractor agrees to send to each labor organization or representative of workers with which the contractor has a collective bargaining agreement or other understanding, if any, a notice advising the labor organization or workers' representative of the contractor's commitments under this section 3 clause, and will post copies of the notice in conspicuous places at the work site where both employees and applicants for training and employment positions can see the notice. The notice shall describe the section 3 preference, and shall set forth minimum number and job titles subject to hire, availability of apprenticeship and training positions, the qualifications for each; the name and location of the person(s) taking applications for each of the positions; and the anticipated date the work shall begin.
4. The contractor agrees to include this section 3 clause in every subcontract subject to compliance with regulations in 24 CFR part 135, and agrees to take appropriate action, as provided in an applicable provision of the subcontract or in this section 3 clause, upon a finding that the subcontractor is in violation of the regulations in 24 CFR part 135. The contractor will not subcontract with any subcontractor where the contractor has notice or knowledge that the subcontractor has been found in violation of the regulations in 24 CFR part 135.
5. The contractor will certify that any vacant employment positions, including training positions, that are filled (1) after the contractor is selected but before the contract is executed, and (2) with persons other than those to whom the regulations of 24 CFR part 135

require employment opportunities to be directed, were not filled to circumvent the contractor's obligations under 24 CFR part 135.

6. Pursuant to 24 CFR §135.90, recipients of HUD financial assistance that is subject to Part 135 requirements, are required to submit Section 3 Annual Reports on Form HUD-60002 to the Office of Fair Housing and Equal Opportunity (FHEO). This form must be submitted electronically and can be found at www.hud.gov/section3.
7. Noncompliance with HUD's regulations in 24 CFR part 135 may result in sanctions, termination of this Agreement for default, and debarment or suspension from future HUD assisted contracts.
8. With respect to work performed in connection with section 3 covered Indian housing assistance, section 7(b) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 405e) also applies to the work to be performed under this contract. Section 7(b) requires that to the greatest extent feasible: (i) preference and opportunities for training and employment shall be given to Indians, and (ii) preference in the award of contracts and subcontracts shall be given to Indian organizations and Indian-owned Economic Enterprise. Parties to this contract that are subject to the provisions of section 3 and section 7(b) agree to comply with section 3 to the maximum extent feasible, but not in derogation of compliance with section 7(b).

2.2 Equal Employment Opportunity

- A. The owner shall incorporate or cause to be incorporated into any contract in excess of \$10,000 for construction work, or modification thereof, as defined in the regulations of the Secretary of Labor at 41 CFR chapter 60, which is to be performed pursuant to this Agreement, the following nondiscrimination clause:

During the performance of this contract, the contractor agrees as follows:

1. The contractor will not discriminate against any employee or applicant for employment because of race, color, creed, religion, sex, or national origin. The contractor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, creed, sex, or national origin. Such action shall include, but not be limited to, the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising;

layoffs or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of this nondiscrimination clause.

2. The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, creed, sex, or national origin.
3. The contractor will send to each labor union or representative of workers with which the contractor has a collective bargaining agreement or other contract or understanding, a notice to be provided by or at the direction of the Government advising the labor union or workers representative of the contractor's commitments under this section, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
4. The contractor of will comply with all provisions of Executive Order No. 11246 of September 24, 1965, and with the rules, regulations, and relevant orders of the Secretary of Labor.
5. The contractor will furnish all information and reports required by Executive Order No. 11246 of September 24, 1965, and by the rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to its books, records, and accounts by HUD and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations and orders.
6. In the event of the contractor's noncompliance with the nondiscrimination clauses of this contract or with any of the rules, regulations, or orders, the contract may be canceled, terminated, or suspended in whole or in part and the contractor may be declared ineligible for further contracts in accordance with procedures authorized in Executive Order No. 11246 of September 24, 1965, and such other sanctions as may be imported and remedies invoked as provided in Executive Order No. 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor or as otherwise provided by law.

7. The contractor will include the provisions of paragraphs (1) through (7) in every subcontract or purchase order unless exempted by the rules, regulations, or orders of the Secretary of Labor issued pursuant to section 204 of Executive Order No. 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The contractor will take such action with respect to any subcontract or purchase order as the Government may direct as a means of enforcing such provisions including sanctions for noncompliance; provided, however, that in the event a contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the Government, the contractor may request the United States to enter into such litigation to protect the interest of the United States.

- B. The owner agrees to be bound by the above nondiscrimination clause with respect to his or her own employment practices when participating in federally assisted construction work.

- C. The owner agrees to assist and cooperate actively with HUD and the Secretary of Labor in obtaining the compliance of contractors and subcontractors with the nondiscrimination clause and the rules, regulations, and relevant orders of the Secretary of Labor, to furnish HUD and the Secretary of Labor such information as they may require for the supervision of such compliance, and to otherwise assist HUD in the discharge of HUD's primary responsibility for securing compliance.

- D. The owner further agrees to refrain from entering into any contract or contract modification subject to Executive Order No. 11246 of September 24, 1965, with a contractor debarred from, or who has not demonstrated eligibility for, Government contracts and federally assisted construction contracts pursuant to the Executive Order and will carry out such sanctions and penalties for violation of the nondiscrimination clause as may be imposed upon contractors and subcontractors by HUD or the Secretary of Labor pursuant to the Executive Order. In addition, if the owner fails or refuses to comply with these undertakings, HUD may take any or all of the following actions; cancel, terminate, or suspend in whole or in part this Agreement; refrain from extending any further assistance to the owner under the program with respect to which the failure or refusal occurred until satisfactory assurance of future compliance has been received from the owner, and refer the case to the Department of Justice for appropriate legal proceedings.

2.3 Reserved

2.4 HUD—Federal Labor Standards Provisions

The owner is responsible for inserting the entire text of section 2.4 of this Agreement in all construction contracts and, if the owner performs any rehabilitation work on the project, the owner must comply with all provisions of section 2.4. (Note: Sections 2.4(b) and (c) apply only when the amount of the prime contract exceeds \$100,000.)

(a)(1) Minimum Wages. (i) All laborers and mechanics employed or working upon the site of the work (or under the United States Housing Act of 1937 or under the Housing Act of 1949 in the construction or development of the project) will be paid unconditionally and not less often than once a week, and without subsequent deduction or rebate on any account (except such payroll deductions as are permitted by regulations issued by the Secretary of Labor under the Copeland Act (29 CFR part 3)), the full amount of wages and bona fide fringe benefits (or cash equivalents thereof) due at time of payment computed at rates not less than those contained in the wage determination of the Secretary of Labor which is attached hereto and made part hereof regardless of any contractual relationship which may be alleged to exist between the contractor and such laborers and mechanics. Contributions made or costs reasonably anticipated for bona fide fringe benefits under section l(b)(2) of the Davis-Bacon Act on behalf of laborers or mechanics are considered wages paid to such laborers or mechanics, subject to the provisions of 29 CFR 5.5(a)(1)(iv); also, regular contributions made or costs incurred for more than a weekly period (but not less often than quarterly) under plans, funds, or programs, which cover the particular weekly period, are deemed to be constructively made or incurred during such weekly period.

Such laborers and mechanics shall be paid the appropriate wage rate and fringe benefits on the wage determination for the classification of work actually performed, without regard to skill, except as provided in 29 CFR 5.5(a)(4). Laborers or mechanics performing work in more than one classification may be compensated at the rate specified for each classification for the time actually worked therein: Provided, That the employer's payroll records accurately set forth the time spent in each classification in which work is performed. The wage determination (including any additional classification and wage rates conformed under 29 CFR 5.5(a)(1)(ii) and the Davis-Bacon poster (WH-

1321)) shall be posted at all times by the contractor and its subcontractors at the site of the work in a prominent and accessible place where it can be easily seen by the workers.

(ii)(A) Any class of laborers or mechanics, including helpers, which is not listed in the wage determination and which is to be employed under the contract shall be classified in conformance with the wage determination. HUD shall approve an additional classification and wage rate and fringe benefits therefore only when the following criteria have been met:

(1) The work to be performed by the classification requested is not performed by a classification in the wage determination;

(2) The classification is utilized in the area by the construction industry; and

(3) The proposed wage rate, including any bona fide fringe benefits, bears a reasonable relationship to the wage rates contained in the wage determination.

(B) If the contractor and the laborers and mechanics to be employed in the classification (if known), or their representatives, and HUD or its designee agree on the classification and wage rate (including the amount designated for fringe benefits where appropriate), a report of the action taken shall be sent by HUD or its designee to the Administrator of the Wage and Hour Division, U.S. Department of Labor, Washington, D. C. 20210. The Administrator, or an authorized representative, will approve, modify, or disapprove every additional classification action within 30 days of receipt and so advise HUD or its designee or will notify HUD or its designee within the 30-day period that additional time is necessary.

(C) In the event the contractor, the laborers or mechanics to be employed in the classification or their representatives, and HUD or its designee do not agree on the proposed classification and wage rate (including the amount designated for fringe benefits, where appropriate), HUD or its designee shall refer the questions, including the views of all interested parties and the recommendation of HUD or its designee, to the Administrator for determination. The Administrator, or an authorized representative, will issue a determination within 30 days of receipt and so advise HUD or its designee or will notify HUD or its designee within the 30-day period that additional time is necessary.

(D) The wage rate (including fringe benefits where appropriate) determined pursuant to subparagraphs (1)(B) or (C) of this paragraph, shall be paid to all workers performing work in the classification under this contract from the first day on which work is performed in the classification.

(iii) Whenever the minimum wage rate prescribed in the contract for a class of laborers or mechanics includes a fringe benefit which is not expressed as an hourly rate, the contractor shall either pay the benefit as stated in the wage determinations or shall pay another bona fide fringe benefit or an hourly cash equivalent thereof.

(iv) If the contractor does not make payments to a trustee or other third person, the contractor may consider as part of the wages of any laborer or mechanic the amount of any costs reasonably anticipated in providing bona fide fringe benefits under a plan or program: Provided, That the Secretary of Labor has found, upon the written request of the contractor, that the applicable standards of the Davis-Bacon Act have been met. The Secretary of Labor may require the contractor to set aside in a separate account assets for the meeting of obligations under the plan or program.

(2) Withholding. HUD or its designee shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld from the contractors under this contract or any other Federal contract with the same prime contractor, or any other Federally-assisted contract subject to Davis-Bacon prevailing wage requirements, which is held by the same prime contractor so much of the accrued payments or advances as may be considered necessary to pay laborers and mechanics, including apprentices, trainees and helpers, employed by the contractor or any subcontractor the full amount of wages required by the contract. In the event of failure to pay any laborer or mechanic, including any apprentice, trainee or helper, employed or working on the site of the work (or under the United States Housing Act of 1937 or under the Housing Act of 1949 in the construction or development of the project), all or part of the wages required by the contract, HUD or its designee may, after written notice to the contractor, sponsor, applicant, or owner, take such action as may be necessary to cause the suspension of any further payment, advance, or guarantee of funds until such violations have ceased. HUD or its designee may, after written notice to the contractor, disburse such amounts withheld for and

on account of the contractor or subcontractor to the respective employees to whom they are due.

(3)(i) Payrolls and Basic Records. Payrolls and basic records relating thereto shall be maintained by the contractor during the course of the work and preserved for a period of three years thereafter for all laborers and mechanics working at the site of the work (or under the United States Housing Act of 1937, or under the Housing Act of 1949, in the construction or development of the project). Such records shall contain the name, address, and social security number of each such worker, his or her correct classification, hourly rates of wages paid (including rates of contributions or costs anticipated for bona fide fringe benefits or cash equivalents thereof of the types described in section 1(b)(2)(B) of the Davis-Bacon Act), daily and weekly number of hours worked, deductions made and actual wages paid. Whenever the Secretary of Labor has found under 29 CFR 5.5 (a)(1)(iv) that the wages of any laborer or mechanic include the amount of any costs reasonably anticipated in providing benefits under a plan or program described in section 1(b)(2)(B) of the Davis-Bacon Act, the contractor shall maintain records which show that the commitment to provide such benefits is enforceable, that the plan or program is financially responsible, and that the plan or program has been communicated in writing to the laborers or mechanics affected, and records which show the costs anticipated or the actual cost incurred in providing such benefits. Contractors employing apprentices or trainees under approved programs shall maintain written evidence of the registration of apprenticeship programs and certification of trainee programs, the registration of the apprentices and trainees, and the ratios and wage rates prescribed in the applicable programs.

*(ii)(A) The contractor shall submit weekly for each week in which any contract work is performed a copy of all payrolls to HUD the PHA. The payrolls submitted shall set out accurately and completely all of the information required to be maintained under 29 CFR 5.5(a)(3)(i), except that full social security numbers and home addresses shall not be included in weekly transmittals. Instead the payrolls shall only need to include an individually identifying number for each employee (e.g. the last four digits of the employee's social security number). The required weekly payroll information may be submitted in any form desired. Optional Form WH-347 is available for this purpose from the Wage and Hour Division Web site at:
<http://www.dol.gov/esa/whd/forms/wh347instr.htm> or its successor*

site. The prime contractor is responsible for the submission of copies of payrolls by all subcontractors. Contractors and subcontractors shall maintain the full social security number and current address of each covered worker, and shall provide them upon request to HUD or its designee if the agency is a party to the contract, but if the agency is not such a party, the contractor will submit them to the applicant, sponsor, or owner, as the case may be, for transmission to HUD, the contractor, or the Wage and Hour Division of the Department of Labor for purposes of an investigation or audit of compliance with prevailing wage requirements. It is not a violation of this section for a prime contractor to require a subcontractor to provide addresses and social security numbers to the prime contractor for its own records, without weekly submission to the sponsoring government agency (or the applicant, sponsor, or owner).

(B) Each payroll submitted shall be accompanied by a “Statement of Compliance,” signed by the contractor or subcontractor or his or her agent who pays or supervises the payment of the persons employed under the contract and shall certify the following:

(1) That the payroll for the payroll period contains the information required to be provided under 29 CFR 5.5(a)(3)(ii), the appropriate information is being maintained under 29 CFR 5.5(a)(3)(i) and that such information is correct and complete;

(2) That each laborer or mechanic (including each helper, apprentice, and trainee) employed on the contract during the payroll period has been paid the full weekly wages earned, without rebate, either directly or indirectly, and that no deductions have been made either directly or indirectly from the full wages earned, other than permissible deductions as set forth in 29 CFR part 3;

(3) That each laborer or mechanic has been paid not less than the applicable wage rates and fringe benefits or cash equivalents for the classification of work performed, as specified in the applicable wage determination incorporated into the contract.

(C) The weekly submission of a properly executed certification set forth on the reverse side of Optional Form WH-347 shall satisfy the requirement for submission of the “Statement of Compliance” required by paragraph (a)(3)(ii)(B) of this section.

(D) The falsification of any of the above certifications may subject the contractor or subcontractor to civil or criminal prosecution

under section 1001 of Title 18 and section 231 of Title 31 of the United States Code.

(iii) The contractor or subcontractor shall make the records required under paragraph (a)(3)(i) of this section available for inspection, copying, or transcription by authorized representatives of HUD or its designee or the Department of Labor, and shall permit such representatives to interview employees during working hours on the job. If the contractor or subcontractor fails to submit the required records or to make them available, HUD or its designee may, after written notice to the contractor, sponsor, applicant, or owner, take such action as may be necessary to cause the suspension of any further payment, advance, or guarantee of funds. Furthermore, failure to submit the required records upon request or to make such records available may be grounds for debarment action pursuant to 29 CFR 5.12.

(4) Apprentices and Trainees.(i) Apprentices. Apprentices will be permitted to work at less than the predetermined rate for the work they performed when they are employed pursuant to and individually registered in a bona fide apprenticeship program registered with the U.S. Department of Labor, Employment and Training Administration, Office of Apprenticeship Training, Employer and Labor Services, or with a State Apprenticeship Agency recognized by the Office, or if a person is employed in his or her first 90 days of probationary employment as an apprentice in such an apprenticeship program, who is not individually registered in the program, but who has been certified by the Office of Apprenticeship Training, Employer and Labor Services, or a State Apprenticeship Agency (where appropriate) to be eligible for probationary employment as an apprentice. The allowable ratio of apprentices to journeymen on the job site in any craft classification shall not be greater than the ratio permitted to the contractor as to the entire work force under the registered program. Any worker listed on a payroll at an apprentice wage rate, who is not registered or otherwise employed as stated above, shall be paid not less than the applicable wage rate on the wage determination for the classification of work actually performed. In addition, any apprentice performing work on the job site in excess of the ratio permitted under the registered program shall be paid not less than the applicable wage rate on the wage determination for the work actually performed. Where a contractor is performing construction on a project in a locality other than that in which its program is registered, the ratios and wage rates (expressed in percentages of the journeyman's hourly rate) specified in the

contractor's or subcontractor's registered program shall be observed. Every apprentice must be paid at not less than the rate specified in the registered program for the apprentice's level of progress, expressed as a percentage of the journeymen hourly rate specified in the applicable wage determination. Apprentices shall be paid fringe benefits in accordance with the provisions of the apprenticeship program. If the apprenticeship program does not specify fringe benefits, apprentices must be paid the full amount of fringe benefits listed on the wage determination for the applicable classification. If the Administrator determines that a different practice prevails for the applicable apprentice classification, fringes shall be paid in accordance with that determination. In the event the Office of Apprenticeship Training, Employee and Labor Services, or a State Apprenticeship Agency recognized by the Office, withdraws approval of an apprenticeship program, the contractor will no longer be permitted to utilize apprentices at less than the applicable predetermined rate for the work performed until an acceptable program is approved.

(ii) Trainees. Except as provided in 29 CFR 5.16, trainees will not be permitted to work at less than the predetermined rate for the work performed unless they are employed pursuant to and individually registered in a program which has received prior approval, evidenced by formal certification by the U.S. Department of Labor, Employment and Training Administration. The ratio of trainees to journeymen on the job site shall not be greater than permitted under the plan approved by the Employment and Training Administration. Every trainee must be paid at not less than the rate specified in the approved program for the trainee's level of progress, expressed as a percentage of the journeyman hourly rate specified in the applicable wage determination. Trainees shall be paid fringe benefits in accordance with the provisions of the trainee program. If the trainee program does not mention fringe benefits, trainees shall be paid the full amount of fringe benefits listed on the wage determination unless the Administrator of the Wage and Hour Division determines that there is an apprenticeship program associated with the corresponding journeyman wage rate on the wage determination which provides for less than full fringe benefits for apprentices. Any employee listed on the payroll at a trainee rate who is not registered and participating in a training plan approved by the Employment and Training Administration shall be paid not less than the applicable wage rate on the wage determination for the classification of work actually performed. In addition, any trainee performing work on the job site in excess of the ratio permitted

under the registered program shall be paid not less than the applicable wage rate on the wage determination for the work actually performed. In the event the Employment and Training Administration withdraws approval of a training program, the contractor will no longer be permitted to utilize trainees at less than the applicable predetermined rate for the work performed until an acceptable program is approved.

(iii) Equal Employment Opportunity. The utilization of apprentices, trainees and journeymen under this part shall be in conformity with the equal employment opportunity requirements of Executive Order 11246, as amended, and 29 CFR part 30.

(5) Compliance with Copeland Act Requirements. The contractor shall comply with the requirements of 29 CFR part 3 which are incorporated by reference in this Agreement.

(6) Subcontracts. The contractor or subcontractor will insert in any subcontracts the clauses contained in section 2.4(a)(1) through (11) and such other clauses as HUD or its designee may by appropriate instructions require, and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for the compliance by any subcontractor or lower tier subcontractor with all the contract clauses in this section 2.4(a).

(7) Contract Terminations; Debarment. A breach of the contract clauses in 29 CFR 5.5 may be grounds for termination of the contract, and for debarment as a contractor and a subcontractor as provided in 29 CFR 5.12.

(8) Compliance with Davis-Bacon and Related Act Requirements. All rulings and interpretations of the Davis-Bacon and related Acts contained in 29 CFR parts 1, 3, and 5 are herein incorporated by reference in this contract.

(9) Disputes Concerning Labor Standards. Disputes arising out of the labor standards provisions of this contract shall not be subject to the general disputes clause of this contract. Such disputes shall be resolved in accordance with the procedures of the Department of Labor set forth in 29 CFR parts 5, 6, and 7. Disputes within the meaning of this clause include disputes between the contractor (or any of its subcontractors) and the PHA, HUD, the U. S. Department of Labor, or the employees or their representatives.

(10) Certification of Eligibility. (i) By entering into this Agreement, the contractor certifies that neither it (nor he or she) nor any person or firm who has an interest in the contractor's firm is a person or firm ineligible to be awarded Government contracts by virtue of section 3(a) of the Davis-Bacon Act or 29 CFR 5.12(a)(1) or to be awarded HUD contracts or participate in HUD programs pursuant to 24 CFR part 24.

(ii) No part of this Agreement shall be subcontracted to any person or firm ineligible for award of a Government contract by virtue of section 3(a) of the Davis-Bacon Act or 29 CFR 5.12(a)(1) or to be awarded HUD contracts or participate in HUD programs pursuant to 24 CFR part 24.

(iii) The penalty for making false statements is prescribed in the U.S. Criminal Code, 18 U.S.C. 1001. Additionally, U.S. Criminal Code, section 1010, Title 18, U.S.C., "Federal Housing Administration transactions, provides in part: "Whoever, for the purpose of ...influencing in any way the action of such Administration...makes, utters or publishes any statement, knowing the same to be false... shall be fined not more than \$5,000 or imprisoned not more than two years, or both."

11. Complaints, Proceedings, or Testimony by Employees. No laborer or mechanic to whom the wage, salary, or other labor standards provisions of this Agreement are applicable shall be discharged or in any other manner discriminated against by the Contractor or any subcontractor because such employee has filed any complaint or instituted or caused to be instituted any proceeding or has testified or is about to testify in any proceeding under or relating to the labor standards applicable under this Agreement to his employer.

(b) Contract Work Hours and Safety Standards Act. The provisions of this paragraph (b) are applicable only where the amount of the prime contract exceeds \$100,000. As used in this paragraph, the terms "laborers" and "mechanics" include watchmen and guards.

(1) Overtime Requirements. No contractor or subcontractor contracting for any part of the contract work which may require or involve the employment of laborers or mechanics shall require or permit any such laborer or mechanic in any workweek in which he or she is employed on such work to work in excess of forty hours in such workweek unless such laborer or mechanic receives compensation at a rate not less than one and one-half times the

basic rate of pay for all hours worked in excess of forty hours in such workweek.

(2) Violation; Liability for Unpaid Wages; Liquidated Damages. In the event of any violation of the clause set forth in subparagraph (1) of this paragraph, the contractor and any subcontractor responsible therefore shall be liable for the unpaid wages. In addition, such contractor and subcontractor shall be liable to the United States (in the case of work done under contract for the District of Columbia or a territory, to such District or to such territory), for liquidated damages. Such liquidated damages shall be computed with respect to each individual laborer or mechanic, including watchmen and guards, employed in violation of the clause set forth in subparagraph (1) of this paragraph, in the sum of \$25 for each calendar day on which such individual was required or permitted to work in excess of the standard workweek of forty hours without payment of the overtime wages required by the clause set forth in subparagraph (1) of this paragraph.

(3) Withholding for Unpaid Wages and Liquidated Damages. HUD or its designee shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld, from any monies payable on account of work performed by the contractor or subcontractor under any such contract or any other Federal contract with the same prime contractor, or any other Federally-assisted contract subject to the Contract Work Hours and Safety Standards Act, which is held by the same prime contractor such sums as may be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for unpaid wages and liquidated damages as provided in the clause set forth in subparagraph (2) of this paragraph.

(4) Subcontractors. The contractor or subcontractor shall insert in any subcontracts the clauses set forth in subparagraph (1) through (4) of this paragraph and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for compliance by any subcontractor or lower tier subcontractor with the clauses set forth in subparagraphs (1) through (4) of this paragraph.

(c) Health and Safety. The provisions of this paragraph (c) are applicable only where the amount of the prime contract exceeds \$100,000.

- (1) No laborer or mechanic shall be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous to his health and safety as established under construction safety and health standards promulgated by the Secretary of Labor by regulation.*
- (2) The contractor shall comply with all regulations issue by the Secretary of Labor pursuant to Title 29 part 1926 and failure to comply may result in imposition of sanctions pursuant to the Contract Work Hours and Safety Standards Act, 40 USC 3701 et seq.*
- (3) The contractor shall include the provisions of this paragraph in every subcontract so that such provisions will be binding on each subcontractor. The contractor shall take such action with respect to any subcontract as the Secretary of Housing and Urban Development or the Secretary of Labor shall direct as a means of enforcing such provisions.*

2.5 Reserved

2.6 Reserved

2.7 Reserved

2.8 Wage and Claims Adjustments

The owner shall be responsible for the correction of all violations under section 2.4, including violations committed by other contractors. In cases where there is evidence of underpayment of salaries or wages to any laborers or mechanics (including apprentices and trainees) by the owner or other contractor or a failure by the owner or other contractor to submit payrolls and related reports, the owner shall be required to place an amount in escrow, as determined by HUD sufficient to pay persons employed on the work covered by the Agreement the difference between the salaries or wages actually paid such employees for the total number of hours worked and the full amount of wages required under this Agreement, as well as an amount determined by HUD to be sufficient to satisfy any liability of the owner or other contractor for liquidated damages pursuant to section 2.4. The amounts withheld may be disbursed by HUD for and on account of the owner or other contractor to the respective employees to whom they are due, and to the Federal Government in satisfaction of liquidated damages under section 2.4.

2.9 Reserved

2.10 Evidence of Unit(s) Completion; Escrow

- A. The owner shall evidence the completion of the unit(s) by furnishing the PHA, in addition to the requirements listed in Part I of this Agreement, a certification of compliance with the provisions of sections 2.4 and 2.8 of this Agreement, and that to the best of the owner's knowledge and belief there are no claims of underpayment to laborers or mechanics in alleged violation of these provisions of the Agreement. In the event there are any such pending claims to the knowledge of the owner, the PHA, or HUD, the owner will place a sufficient amount in escrow, as directed by the PHA or HUD, to assure such payments.
- B. The escrows required under this section and section 2.8 of shall be paid to HUD, as escrowee, or to an escrowee designated by HUD, and the conditions and manner of releasing such escrows shall be designated and approved by HUD.

2.11 Flood Insurance

If the project is located in an area that has been identified by the Federal Emergency Management Agency as an area having special flood hazards and if the sale of flood insurance has been made available under the National Flood Insurance Program, the owner agrees that: (1) the project will be covered, during the life of the property, by flood insurance in an amount at least equal to its development or project cost (less estimated land cost) or to the limit of coverage made available with respect to the particular type of property under the National Flood Insurance Act of 1968, whichever is less; and (2) that it will advise any prospective purchaser or transferee of the property in writing of the continuing statutory requirement to maintain such flood insurance during the life of the property.

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

The Campbell Street Apartments will consist of 40 new, affordable housing units, consisting of 5-one bedroom, 29-two bedrooms, and 6-three bedroom units. If funded by HUD, SWHS will complete an amendment to MSHDA to change the target population for 20 of the 40 units to include a prioritization for people experiencing chronic homelessness or Dedicated Plus. SWHS will provide full range of wrap around services, including outreach and engagement, case management, peer support, educational and employment opportunities, transportation, and linkage and coordination to integrated healthcare services. Effective outreach and engagement are often the first step in developing and fostering a therapeutic relationship. Through coordinated, flexible, and persistent outreach and engagement, staff are able to bring services directly to clients/families. By eliminating barriers, clients/families are more likely to be successful in their housing outcomes.

If funded, the target population for 20 units within this building would be applicants who meet the HUD definition of literally homeless, with a preference for chronically homeless or Dedicated Plus.

SWHS operates all affordable housing projects utilizing a Housing First approach to connect individuals and families experiencing homelessness quickly and successfully to permanent housing without other programmatic requirements, such as sobriety, mental health or substance abuse treatment, or service participation. Once housed, supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.

Referrals are accepted directly from Coordinated Entry and the tenant selection plan will mirror that of the current prioritization priorities. Clients/families who enroll in the Permanent Housing program will be given reasonable accommodation with their rent and eviction prevention plans will be completed when issues arise. All efforts will be made to prevent eviction, when possible.

SWHS projects to meet the following system performance measures include maintained or exited the project to other permanent housing will be greater than or equal to 95%, funds expended will be greater than or equal to 90%, leavers with one or more sources of cash income will be greater than or equal to 65%, leavers with one or more sources of non-cash income will be greater than or equal to 85%, leavers who exited with employment will be greater than or equal to 10%, adult stayers who have health insurance will be greater than or equal to 80%, and utilization will be greater than or equal to 90%, and more.

SWHS partners with RPI Management (MSHDA Housing Agent) for Certification, MSHDA for PBV's, SWES to provide job training, financial classes and educational opportunities, Lakeshore Legal Aid to provide pro-bono legal services, SWCS for integrated health services, Covenant Care for primary healthcare services, MDHHS for mainstream benefits, and more.

To provide this intensive service delivery model, SWHS will require 1 FTE Housing Case Manager, 1 FTE Peer Support Specialist, .10 FTE Administrative Assistance, and .10 FTE Director. All roles are vital to implementation and programming needed to support the clients. Additional costs include transportation and other vehicle costs, security, household and other supplies, furniture, equipment, and administrative costs.

Attachment 3A-2a: Healthcare Formal Agreement

CoC: MI-501

Attached is documentation of the healthcare leveraging commitments from the following new PSH project applications:

Applicant	Project	Amount of New Project Funding Requested	Amount of Documented Healthcare Leveraging	Percentage Leveraged
Alternatives for Girls	Dr. Maya Angelou Village	\$347,116	\$139,996	40.3%
Southwest Housing Solutions	Campbell Street PSH	\$226,689	\$60,000	26.5%

Alternatives for Girls Dr. Maya Angelou Village Healthcare Leverage Documentation Details

The following pages provide details to the healthcare leverage documentation being submitted for this new PSH project. Specifically, please find:

Wayne Health Agreement

Value: \$3,333/month

Annual value: \$39,996

Metro Health Foundation

Annual value: \$25,000

Southwest Counseling Solutions

Annual value: \$75,000

Total Annual Value all commitments: \$139,996



September 7, 2022

Keith Hernandez
Director
U.S. Department of Housing and Urban Development
Office of Community Planning and Development
477 Michigan Avenue
Detroit, MI 48226

Subject: Letter of Commitment of Health Resources

Dear Mr. Hernandez,

Wayne Health is please to commit healthcare resources in support of Alternatives For Girls' (AFG) Permanent Supportive Housing(PSH) project within the Detroit Continuum of Care should the Department of Housing and Urban Development fund the project.

Wayne Health is a non-profit, multi-specialty physician practice group affiliated with the Wayne State University School of Medicine in Detroit, Michigan. Wayne Health's mission is to provide integrated 'whole-person' physical and behavioral services, including cultivating and strengthening partnership to address the social determinants of health (poverty, housing, transportation, food insecurity) that affect a person's health and well-being. Wayne Health emphasizes early intervention and preventative care, both in conventional health care settings, and non-traditional community locations.

Wayne Health understands the intersectionality between health and housing. Homelessness is one of the top-ranked social determinants of health as a barrier to health and quality of life. Wayne Health began partnering with Alternatives For Girls in 2022 to host our mobile health unit on site at AFG facilities. The mobile health unit provides free, bi-monthly clinical services including:

- Wellness screenings, including diabetes, cholesterol, kidney function, and blood pressure;
- Urinary tract infection (UTI) and Sexually transmitted infection (STI) screenings;
- Rapid HIV and HEP A screenings
- Behavioral Health resources;
- Primary-care physician and specialist referrals;
- COVID-19 Vaccinations and Boosters (ages 5 and up).

AFG has been a valuable and trusted partner in our efforts to expand care into the community. Wayne Health will commit to provide mobile unit leveraged health resources contingent on funding availability to support AFG PSH residents in improving their long-term health outcomes critical to maintaining permanent housing. Wayne Health's mobile unit will provide various healthcare services using awarded external funding sources valued at \$ 3,333 per month.



Either party may terminate this Letter of Commitment at any time for any reason or no reason. This Letter of Commitment is not intended to impose any legally binding obligations upon either party; rather, it is intended to memorialize the cooperative undertakings the parties intend to pursue with respect to the Project.

Sincerely,

DocuSigned by:

C655107585084B7...
Jeff Kohlitz
CFO
Wayne Health



August 2, 2023

Amanda (Amy) Good, CEO
Alternatives for Girls
903 W. Grand Blvd.
Detroit, MI 48208

Re: Grant No. 23-762

PO Box 615
Allen Park, MI 48101-0615
(313) 965-4220

RUTH KALENIECKI
Executive Director

TRUSTEES

RICHARD TEETS
President

CHERYL CHANDLER
Vice President

RAYMOND COCHRAN
Treasurer

JUDITH BEAN

VALERIE HEROD BELAY

LAURA CHAMPAGNE

MARK LEZOTTE

MADIHA TARIQ

Dear Amy:

I am pleased to inform you that at the Metro Health Foundation Board of Trustees meeting held on June 14, 2023, the following resolution was passed:

RESOLVED, that a grant to **Alternatives for Girls**, in the amount of **\$25,000** is hereby approved to support outreach, navigation, and assistance throughout the Medicaid redetermination process.

Payment of funds is subject to acceptance of standard grant terms and will be disbursed according to the schedule set forth on the enclosed "Terms of Agreement." **To accept the grant terms, please sign and return the agreement to me via email at rkaleniecki@metrohealthfdn.org.**

Grant distributions will be made by using Bill.com. If your organization has an existing Bill.com account, the payments will be made through ACH transfer. If your organization does not have an existing Bill.com account, the payment will be made by paper check though Bill.com. There should not be any charges against these payments through the Bill.com platform.

Metro Health Foundation is proud to be your funding partner in helping people to access the health care they need and deserve.

If you should have any questions regarding this grant, please feel free to contact me at 313-965-4220.

Sincerely,

Ruth Kaleniecki
Executive Director

Enclosures

METRO HEALTH FOUNDATION

PO Box 615

Allen Park, Michigan 48101

Telephone (313) 965-4220

TERMS OF AGREEMENT

On July 19, 2023, the Trustees of **Metro Health Foundation** ("MHF") awarded a grant (Grant #23-762) in the amount of \$25,000 to **Alternatives for Girls** ("Grantee") as follows:

RESOLVED, that a grant to **Alternatives for Girls**, in the amount of \$25,000 is hereby approved to support outreach, navigation, and assistance throughout the Medicaid redetermination process.

MHF and Grantee agree to the following terms and conditions of the grant:

1. Grant funds paid pursuant to this Agreement are for the explicit purpose(s) and amount(s) set forth in the approved grant proposal and as specified above. Advance written approval from MHF must be requested and received for any departure from the specified and approved budget. All funds are payable solely to Grantee, and may not be transferred or assigned without the express written consent of MHF. *Grantee must repay any portion of the amount granted which is not used for the purpose of the grant, and return to MHF any unexpended funds if any grant conditions are not satisfied or if the Grantee loses its exemption from federal income taxation.*
2. The grant number cited above must be used in all communications concerning this grant.
3. **PAYMENT OF GRANT FUNDS:**
 - (a) Grant funds may be used only for charitable and/or educational purposes. They cannot be used to: promote or oppose the election of any candidate for any office; personally benefit any elected official; attempt to influence legislation; promote or defeat any ballot measure; or make grants to individuals or other organizations which do not comply with the requirements of IRS §4945(d)(3)[or(4)].
 - (b) The fiscal year for this Grant is: August 1, 2023 – July 31, 2024. Grant funds shall be released to Grantee pursuant to the following schedule:

A full and single payment of \$25,000 shall be issued on upon receipt of signed agreement;

A final financial report, indicating that the awarded funds have been fully expended as intended will be due on August 31, 2024 (through grant year end, July 31, 2024).
4. **REVIEW OF GRANT ACTIVITY:**
 - (a) During the grant period, Grantee will participate in occasional (no more than quarterly) MHF Grantee Convenings, which serve as an opportunity for networking and for ongoing learning.
 - (b) Grantee will coordinate with MHF to ensure that at least one site visit and/or discussion of grant progress occurs within the grant period. This will be in lieu of narrative reporting.
 - (c) Funds provided by MHF shall be accounted for separately within the financial records of Grantee. These records, including financial records, and supporting documents relating to this grant, will be made available for review and/or audit at the request of MHF for up to five (5) years from the date of this agreement.

5. MISCELLANEOUS PROVISIONS:

- (a) MHF will not fund organizations that, in their by-laws, policies, or practice discriminate on the basis of age, race, ethnic origin, religion, sexual orientation, gender identity, disability, or sex, or any other basis prohibited by applicable law. By accepting this grant, Grantee confirms that it is in compliance with this anti-discrimination policy, will remain in compliance throughout the grant period, and will not make sub-grants to any entity in non-compliance.
- (b) By accepting this grant, Grantee confirms that it is, and will remain during the term of the grant in compliance with all federal, state, and local laws, rules, and regulations.
- (c) By accepting this grant, Grantee confirms that it is and will remain during the term of the grant in compliance with federal Executive Order 13224 (2001), and the U.S. Department of Treasury Voluntary Anti-Terrorist Funding Guidelines (2006), and that it will not promote or engage in violence, terrorism, bigotry, or the destruction of any state, nor will it make sub-grants to any entity that engages in these activities.
- (d) Grantee authorizes MHF to include information contained in Grantee's written reports in MHF's reports to the public.
- (e) Upon advance notice, Grantee shall authorize MHF to monitor and evaluate its operation under this grant, which may include visits from MHF personnel to observe programs, and review financial and other records connected with the activities financed by this grant.
- (f) Payment of grant funds by MHF to Grantees are made via direct deposit to Grantee's checking account utilizing Automated Clearing House (ACH) transactions. Grantee authorizes that these deposits be made to its bank account and agrees to provide required bank account information to MHF or MHF's ACH processor (e.g., Bill.com) for this purpose. If ever an incorrect amount is deposited, Grantee authorizes MHF, in conjunction with the Grantee's bank, to make the appropriate adjustment.
- (g) This Agreement shall supersede any prior oral or written understandings or communications between the parties and constitutes the entire agreement of the parties with respect to the grant herein awarded. The Terms of Agreement governing this grant may not be amended or modified, except in writing signed by both parties hereto.

Dated: August 2, 2023

Signed: Amanda L. Good

METRO HEALTH FOUNDATION

Name (Print): AMANDA L. GOOD

Ruth Kaleniecki

Title: CEO

Ruth Kaleniecki, Executive Director

January 14, 2021

Mr. Gary Heidel
Acting Executive Director
Michigan State Housing Development Authority
735 E. Michigan Avenue
Lansing, MI 48909

Dear Mr. Heidel,

Please accept this letter as evidence of Southwest Counseling Solutions' (SWCS) support of Alternative for Girls' Miller Grove Center affordable housing development (the project). This important unique project will create 45 units of new affordable housing, including 23 units of permanent supportive housing for Detroit's most vulnerable homeless residents.

As the lead service provider for the project, SWCS will not only partner with Alternatives for Girls (AFG) to deliver on-site case management, SWCS will also engage in technical assistance with AFG to build best-practice housing file compliance and housing stability skills in AFG staff. SWCS is an established nonprofit organization that has been providing permanent supportive housing (services and subsidy administration) for over twenty years. Furthermore, SWCS serves as the Housing Assessment and Resource Agency (HARA) for the Detroit Continuum of Care (CoC) and was awarded lead agency designation for the CoC's Coordinated Entry (CAM) initiative. AFG has been at the forefront of advising, shaping and guiding youth-focused programs and strategies in the CoC's campaign to end homelessness. We look forward to sharing our expertise in delivering supportive services in a permanent supportive housing setting.

Full Circle Communities, Inc., the project developer, will provide funding for supportive services for a minimum of 20 hours per week at the project. In addition, as a contracted Detroit Wayne Integrated Health Network service provider, SWCS bills for and receives Medicaid reimbursement for eligible services provided to eligible consumers.

SWCS fully supports the Alternatives for Girls' and Full Circle's Low Income Housing Tax Credit application that is being submitted for consideration to the Michigan State Housing Development Authority for the AFG Miller Grove Center affordable housing development.

Please feel free to contact me at (313) 481-7901 if you wish to further discuss this matter.

Sincerely,



Jamie Ebaugh
Executive Director, Interim

Exhibit 12.6 Medicaid Experience

Southwest Counseling Solutions – Medicaid Experience

Southwest Counseling Solutions has been a contracted Medicaid behavioral health provider under the Detroit Wayne Integrated Health Network since 2012. Total Medicaid billing for FY 20 is anticipated to be \$75,000 in support of 74 clients. This total reimbursement rate has been growing annually as the team and the number of clients/sessions has grown. The total is expected to double in FY19. The contract with DWIHN for FY21 has been renewed for the SWCS team members to provide and bill Medicaid for the following services and rates:

DWHIN Medicaid Contracted Services and Fee Schedule

Code	Description	Measure	Adult Rate	Children's Rate
90791	Psychiatric Evaluation	Encounter	165.00	220.00
90832	Psychotherapy - 30 minutes	Encounter	65.00	90.00
90834	Psychotherapy - 45 minutes	Encounter	125.00	150.00
90837	Psychotherapy - 60 minutes	Encounter	165.00	200.00
90839	Psychotherapy for crisis	30-74 minutes	105.00	120.00
90840	Psychotherapy for crisis add on to 90839	30 minutes	60.00	100.00
90846	Family Therapy without consumer	Encounter	115.00	125.00
90853	Group Therapy	Encounter	40.00	52.50
96101	Psychological testing	Hour	125.00	125.00
99201	Office/outpatient visit	10 minutes	55.00	55.00
99204	Office/outpatient visit	45 minutes	138.50	160.00
99205	Office/outpatient visit	60 minutes	185.00	190.00
99214	Office/outpatient visit	25 minutes	125.00	180.00
99205	Office/outpatient visit	40 minutes	150.00	195.00
H0031	Mental Health Assessment Non-physician	Encounter	140.00	195.00
H0032	Treatment Planning	Encounter	140.00	195.00
T1017	Targeted Case Management	Per 15 minutes	56.50	56.50

Southwest Housing Solutions Campbell Street PSH Healthcare Leverage Documentation Details

The following pages provide details to the healthcare leverage documentation being submitted for this new PSH project. Specifically, please find:

Southwest Counseling Solutions Integrated Healthcare Resources

Value: \$3,000/ client

Annual value: \$60,000

Total Annual Value all commitments: \$60,000

August 1, 2023

Keith Hernandez
Director, Office of Community Planning and Development
U.S. Department of Housing & Urban Development
477 Michigan Ave.
Detroit, MI 48226

Re: Letter of Commitment to Leveraging Healthcare Resources

Dear Mr. Hernandez:

Southwest Counseling Solutions is pleased to commit integrated healthcare resources in support of Southwest Housing Solutions' 5800 LDHA LP department, Campbell Street Apartments, that will be located at 5800 Michigan Avenue, Detroit MI 48210. As the lead agency, Southwest Counseling Solutions will provide onsite case management for a minimum of 20 hours per week, including:

- Development and implementation of Individualized Service Plan to meet housing, economic health, and other personal goals;
- Ongoing assistance with securing needed furniture, household goods, food, and clothing including direct access to food pantry and clothing closets;
- In-home visits to assess the condition of their unit and compliance with their lease;
- Employment assistance including help with resumes, cover letters, mock interviews, job searching, and connecting with employment specialists through partner agencies;
- Assistance in creating and managing a household budget;
- Connection to mental health and health care resources including substance abuse and crisis services when needed, and coordination of services with clients' mental health providers;
- Assistance with applying for and accessing medical services including Medicaid;
- Help with connecting to other mainstream benefits through MDHHS;
- Help with submitting applications to various Section 8 programs when appropriate;
- Help with applying for Social Security benefits through SOAR advocates; and
- Transportation to and from critical appointments via case managers, public transportation assistance, and through a daytime shuttle

The cost of providing these services equates to \$3,000 per client or \$60,000 annually.

It is with much enthusiasm that Southwest Counseling supports Southwest Housing Solutions in this endeavor.



Timothy S. Thorland
Executive Director | Southwest Housing Solutions
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