

GLHRN CoC Grant Application
(One project per application)

FUNDING 2018 HUD NOFA
CoC Program interim rule at 24 CFR 578

GRANT PERIOD 2019-20

Application due to matt.stevenson@lansingmi.gov by 12 noon Friday, August 17, 2018

Application organization must have tax-exempt status under 501(c)(3) of the IRS

Date of Application: 8/16/2018

PART I: Program Information

Renewal Reallocation Project Non-DV Bonus Project DV Bonus Project
Consolidation Transition Expansion

Organization: Advent House Ministries, Inc.

Contact Person: Susan Cancro Title: Executive Director

Telephone: 517-485-4722 Email: secancro@adventhouse.com

Project Grant Name: Fresh Start RRH Minimum # Units (see table): 5

Renewal only: Previous Year Award Amount: \$ 60,036 Amount Requesting: \$ 60,036

Circle the Program Component for Which You Are Requesting Funds:

*Permanent Supportive Housing * Transitional Housing * **Rapid Rehousing** * Joint TH-RRH
* DV-RRH * DV-Joint TH-RRH * DV-Coordinated Entry * HMIS * Coordinated Entry

A. Are other funds leveraged with the requested funds?

Yes: X No: If yes, please identify the amounts and source for all leveraged funds.

Amount \$ 4269 Source: Advent House Ministries admin and supportive svcs. costs

Amount \$ 2405 Source: Advent House Ministries cost of utilities for office/meeting space

Amount \$ 8335 Source: Northwestminster donated use of office/meeting space

B. This grant requires a 25% cash or in-kind match. Please describe in detail:

a) type (cash or in-kind); b) Source of match; c) Amount, and how it will be documented.

In-kind match will include the allocated value of office and meeting space donated by Northwestminster Presbyterian Church, in which Advent House Ministries is housed, documented with a Memorandum of Understanding. In-kind match will also include the allocated value of any admin and supportive services not covered with grant funds, as well as use of utilities paid by Advent

House Ministries for the office and meeting space. In-kind match will be documented with a Memorandum of Understanding.

C. Does/Will the agency follow the Orders of Priority as defined in CPD-16-11 (See Exhibit A of this application)? Yes: X No: ____

D. How many households will be housed during the funding year? 5

Part II: Narrative

Please be concise. Use bullets where possible.

1. Describe the **target population** for the Project. Specifically identify who the project will serve. i.e. individuals; families; chronic; Special populations. What is the **average acuity** level?

If the Project has admission preferences for different sub-populations, please explain.

The Fresh Start Rapid Re-housing (RRH) Program targets clients who fall between a VI-SPDAT score range of 4-7 for individuals, and 4-8 for families. Although a higher SPDAT score can indicate a necessity for enrollment into a PSH program, AHM understands that research suggests anyone can benefit from RRH. AHM works in cooperation with the CEA to ensure that Housing First options are available to any household that meets the minimum HUD regulated eligibility criteria for RRH and may include households that meet the criteria for PSH when PSH units are not available.

AHM Fresh Start Program will prioritize special populations, including victims of domestic violence, young adult heads of household, and veterans.

2. Provide examples of how the **Project outcomes** will contribute to improving the CoC's system-wide performance, as measured by HUD's system performance measures below:
 - Reducing the length of time people are homeless:
 - o RRH operates with the understanding that housing is the solution to homelessness, and thus is designed to be a quick intervention for clients to become housed within 30 days or less. By utilizing a housing first approach, we reduce the wait time for housing by first prioritizing housing placement before working to address the factors that originally led to their homelessness.
 - o After a referral from the CEA, clients are contacted and met with to develop their unique and individual housing plan. Everyone is supplied with landlord resources and active assistance in locating viable permanent housing, as well as an assessment of other housing-related needs to facilitate effective reduction of time in shelter or on the street.
 - o AHM works to identify every client's potential tenant screening barriers and housing retention barriers. This information is added to a service plan that is developed to assist in the housing process.
 - o Advent House represents Ingham County in the tri-county PATH outreach initiative. This puts us on the front line of addressing street homelessness and assists us with working side by side w/ the CEA, which is beneficial in accessing housing services including our and other PSH programs.
 - Increasing discharges to permanent housing:
 - o The progressive case management and assistance that every client receives employs client-centered and strength-based approaches. The ultimate end goal for each client is achieving housing stability through their unique and individualized service plans. This results in a successful discharge to PH.
 - o Prior to discharging, case managers and clients work together to make connections for a warm handoff to mainstream community resources. This assists the client throughout their temporary enrollment in the RRH program in ensuring a successful transition to PH.
 - o Advent House programs work closely with CoC partners to ensure clients have access to all possible permanent voucher options, including project based subsidies and HCV opportunities offered through area HCV administrators.

- Preventing returns to homelessness (reducing recidivism):
 - o Through an intensive step-down approach to the progressive case management all clients receive, clients can self-identify and build upon strengths to address barriers to stable housing. By setting and achieving goals, clients learn how to better advocate for themselves and sustain their housing.
- Increasing client income:
 - o All clients participate in creating a service plan to help guide the progressive case management that they receive. Financial stability is a key factor in that service plan to ensure they can meet their permanent housing needs once the limited program funded financial assistance is done.
 - o AHM understands that in a RRH program referrals to employment or income building resources are essential. In addition to familiarity with local employment resources, AHM has experience from past and current programs with successful employment resource utilization. If employment is not an option, referrals to a SOAR specialist, Disability Appeals Advocates, or the VOA Ability Law Clinic may be appropriate.

3. Using Exhibit B-Describe the Project’s implementation of the **Housing First** approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients as it pertains to substance use, income, criminal records (with exceptions for restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, actual or perceived sexual orientation, gender identity. Include descriptions of program policies and procedures to address situations that may lead to termination. How will the project assist clients in finding decent housing?

1) Eligibility Criteria:

Eligibility will be solely determined by what is defined as appropriate under minimum HUD guidelines for RRH enrollment. Clients will not have preconditions or barriers to entry based on things like sobriety, criminal history, or service participation requirements.

2) Process for Accepting New Clients:

After receiving a referral from the CEA, the program supervisor will review to ensure the client/household meets the minimum eligibility criteria. As soon as eligibility is confirmed, a case manager reaches out to the client to set up the initial meeting to enroll and develop their housing plan.

3) Process and Criteria for Exiting Clients:

In RRH, exit planning begins at entry. The client and case manager work together to create an exit plan that moves toward housing stability and is reviewed continuously throughout enrollment. In the event of a compliance concern, case managers will make every effort possible to address the matter with a focus on promoting stability skill-building and avoiding program discharge..

4. Explain how the **needs assessment** process ensures that participants are directed to appropriate services. How are participants connected to **mainstream resources**? Are there **MOUs or letters of commitment**? (These must be dated between May 1, 2018 and September 18, 2018.) Include collaborations with other programs or agencies. For renewals, how successful have these collaborations been?

(See Mainstream Resources definition in glossary)

Advent House works together with CEA staff to ensure all RRH referrals meet the minimum program eligibility criteria. Attention is paid to the SPDAT score of the referral which has a likely correlation between vulnerability and need. Typically an appropriate RRH referral would fall between the SPDAT scores of 4-7 for individuals, and 4-8 for families, but an understanding that anyone could benefit from RRH will allow for the referral of other qualified households..

Once enrolled, clients can receive the following services: (1) an individualized housing identification plan, (2) financial assistance for rent and move-in costs, and (3) linking/referrals to appropriate community supports to stay housed.

Advent House regularly collaborates with the following: the Department of Health and Human Services, the Financial Empowerment Center, family and parenting resources, the Volunteers of America Medical and Dental Clinics, Community Mental Health, Mid-Michigan Recovery Services, Michigan Rehabilitation Services, Sparrow Health Systems, Child & Family Charities, local Veterans Affairs resources, local Domestic Violence resources, as well as other area resources. These partnerships have been vital to the success of our program participants.

5. How will clients be assisted in maximizing their ability to live independently? What **criteria** are used to evaluate participants' readiness to "graduate" or **transition** from the project to other permanent housing?

An important part of successful progressive case management is the individualized evaluation of which skills and tools are necessary for long-term housing stability. Whether it is learning housekeeping tips, receiving budgeting assistance, or addressing mental health concerns, Advent House Ministries utilizes harm reduction and trauma-informed-care models to best assist clients.

Advent House Ministries creates a service plan for all program participants, with the end goal being a discharge to PH. Case managers continually review progress, and keep the exit date flexible to support movement towards stability.

6. CoC policies require that participants be **referred from the Coordinated Entry Agency** (CEA). What is your estimate of the % of referrals you accept from the CEA? Please explain how you track/verify this information.

The RRH Fresh Start Program receives 100% of its referrals from the CEA. In the coming grant year Fresh Start will continue our collaboration with the CEA and area agencies, as described above, to ensure that we are reaching out to the most at-risk among those who are in shelter. This program will remain in regular contact with Coordinated Entry Agency staff both by phone and email for individual client needs; Coordinated Entry Agency staff is on-site at Advent House Ministries, Inc. on a weekly basis, as Advent House Ministries is a contact location for Coordinated Entry Agency in the community at large.

7. How will the project **engage those with the most severe needs or vulnerabilities, disabilities or limited English proficiency** per the GLHRN CoC/HUD prioritization policy? Describe any Outreach efforts. Reaching participants throughout the County that may not otherwise have known of the Project?

At present eligible clients are referred to AHM RRH entry by the CEA. Anyone who meets the minimum HUD RRH program criteria is eligible, and AHM is committed to serving those most vulnerable in our community. Occasionally staff will receive a call or a walk-in

self-referral. Staff makes time to assess the need, and refers back to the CEA as appropriate.

Accommodations are met whenever necessary, as client needs vary depending on disability severity. In instances where English proficiency is an issue, translator services are engaged to ensure all clients are able to receive the same level of care.

8. Are there any **outstanding Civil Rights matters** or financial obligations to the federal government? Yes _____ No X Please explain your experience in managing federal grants. (50 words or less)

Advent House Ministries, Inc. has been managing federal grants for Housing and Supportive Services programs for over 20 years and consistently has met or exceeded grant management and outcome expectations.

9. Who is the agency contact person knowledgeable about **Fair Housing** and HUD priorities? Name: Susan Cancro or Maureen Nagy Contact # 517-485-4722

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ONLY Renewal Projects, complete questions 10-12

10. Are the agency **reports turned in on time** (%)? Is the agency **HMIS data error free** (%)? Are the agency monthly Financial Status Reports correct (%)?

All reports are turned in on time and our HMIS data has had few errors.

11. **Project cost-effectiveness** – what was the average cost per person or family served in your project? (Take the cost to run the project including match divided by the actual number of households served per project year).

The average cost per person is projected to be \$5003, based on our projections for the grant in the present grant year regarding program enrollment and the total cost of the program, including total administrative funding.

12. Attach the agency's response letter to **any findings or concerns** identified by the City during the **last monitoring/site visit** of the agency. Please provide any CAP (Corrective Action Plan) requested by the City or CoC if applicable.

See attached.

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ONLY Reallocation, New Bonus and DV Bonus Projects, complete questions 13-17

13. Attach (one page or less) the general Objectives/Mission of the Organization and the Organization's **experience in providing the services** for which funding is being requested, including populations served.

14. Describe the plan to assist clients with **barriers to housing** (poor rental history, criminal history, bad credit, etc.) to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.
15. Describe how the **project design** will fit the needs of project participants: 1) to help maintain housing; 2) to meet other client needs that contribute to instability and homelessness; 3) to **establish performance measures** for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.
16. Describe a plan for **rapid implementation of the project** documenting how and when the project will be ready to house the first project participant. Provide a detailed schedule of proposed activities for 30 days, 60 days, 120 days, and 180 days, if applicable, after grant award.
17. My agency is **willing to be trained** in processes and programs used by the CoC to manage and administer the HUD grant including but not limited to Homeless Management Information System (HMIS), the Coordinated Entry Agency (CEA) and the assessment tool (SPDAT). Agree: _____ Disagree: _____

DV-Bonus applicants only (18 – 20):

18. Do you have a **client-level database** that is capable of meeting HUD's Annual Performance Reporting requirements? (see document on GLHRN website for clarification)
Yes _____ No _____
19. What are the **issues facing DV survivors in accessing local CoC** permanent housing assistance programs? Support your response with local data.
20. How do you **address/improve safety for the DV populations** you serve?

For further information, please see the HUD Notice of Funding Availability at:
<https://www.hudexchange.info/resource/5719/fy-2018-coc-program-nofa/>

Part III: Budget

Budget may also be submitted in an Excel Spreadsheet – contact HRCS for document.

	HUD CoC Expenses					
	PH: PSH	PH:RRH	TH	SSO	HMIS	
Rental Assistance		\$43284				
Leasing						
Supportive Services*		\$12733				
Operating Costs						
HMIS						
Total Admin		\$4019				
Sub Total		\$60036				
Cash Match (all line items except Leasing)						
In-Kind Match (all line items except for Leasing)		\$15009				
Grand Total		\$75045				
Shaded areas not eligible for funding in designated categories. Match should total 25%						

	*Supportive Service breakdown
Salaries	11828.00
Fringe Benefits	905.00
Contractual services	
Travel	
Supplies/materials	
Utilities	
Repairs/Maintenance	
Financial assistance to clients	
Total	12733.00

Program Income*	
Source	Amount
In-kind costs for AHM admin and supportive services	4269.00
In-kind use of AHM utilities for office/meeting space	2405.00
In-kind use of NWPC building for office/meeting space	8335.00
Total	15009.00

*Program Income is funds generated by project activities such as participant contributions toward their rent.

HUD Priorities

Strategic Resource Allocation – maximize use of mainstream resources and develop partnerships.
Ending homelessness for all persons.
Creating a systemic response to homelessness.
Using a Housing First approach.

GLHRN Priorities

Prioritize Permanent Housing including PSH and Rapid Rehousing
Prevention of Homeless through intervention
Supportive Services with targeted case management and wrap around services to lead to self-stability
Shelter services
Essential Services for vulnerable sub populations
Prioritize the chronically homeless