

ADDENDUM #1

MI-503 St. Clair Shores/ Warren/Macomb County CoC Macomb County Continuum of Care (CoC)

FY2019 Request For Proposal for Renewal Project Applicants

**HMIS Renewal Project, PH-PSH Renewal Projects, PH-RRH Renewal
Projects, and TH-Youth Renewal Projects**

The Macomb Homeless Coalition (MHC), on behalf of the Macomb County Continuum of Care (“Macomb CoC”) is issuing an addendum to the FY 2019 Request for Proposal for Renewal Project Applicants (“Renewal RFP”). The list below summarizes the content of changes and additions to the Renewal RFP that are included in Addendum #1:

1. Due Date
2. Data Source
3. Severity of Needs and Vulnerabilities Considerations
4. Project Specific Scoring Sheet

Due Date

The due date for submission of renewal applications is now July 15, 2019 at 4pm.

Data Sources

Agencies should use the most recent APR submitted through SAGE when responding to questions in the Scoring Card and Renewal RFP for performance data that is needed from an APR.

Severity of Needs and Vulnerabilities Considerations

Severity of Needs and Vulnerabilities will be considered when reviewing applications. The following measures will be used to assess how well a project is serving those greatest in need. Applicants need to complete calculations for *a.* and *b.* Please include all data used to perform the calculations (and what source the data is pulled from) for both *a.* and *b.*

- a. Percentage of households that are chronically homeless
- b. Percentage of adults that entered program with low or zero income
- c. The only project of its kind in the CoC's geographic area serving a special homeless population/subpopulation

Scoring Card

The following changes have been made to the Scoring Card:

- • **Mainstream Resources & employment**
 - #1 (A, B, C, D, E) - PSH includes Stayers and Leavers
- • **Housing Performance – Project Specific**
 - Removed PH Retention
 - Added PSH exits
- • **Exits**
 - Clients that were deceased can be removed
- • **Utilization Rates**
 - Utilization rates should be calculated by taking an average of the quarterly utilization rates listed in the APR. For TH-Youth programs, utilization rates should be based on beds. For RRH and PSH programs, utilization rates should be based on units.
- • **Attachments**
 - Added: Copy of most recent APR submitted through SAGE
 - Added: Copy of the grant submission through e-snaps for the FY 2018 competition
 - Added: Copy of correspondence with HUD requesting significant changes to the grant (if applicable) If an applicant has made a change to a project that did not require approval by HUD, a brief explanation of the change should be provided by the applicant.
 - Exhibit A Signature Page (Attached)

Each applicant is filling out its own score card. Please refer to the beginning of the scoring card for more detail on the information that needs to be provided. Include where you pulled the data (have this highlighted) in the appropriate section of the scoring card. Applicants are also asked to write down the data that they are using to inform the calculations for scoring.

MHC, the Macomb CoC Board, and the Ranking Committee want to hear from you! Agencies have the opportunity to provide additional information for a better understanding of performance by your agency for specific scoring criteria. This information will help to inform the development of next year, scoring s criteria and metrics. Responses will also help the CoC to identify program areas and resources that need strengthening or expansion. Please comment on areas of strong performance for you program as well as those needing improvement.. Feedback on resources that the CoC could provide to better assist your agency on achieving stronger results is also requested. Please provide this information on a separate sheet of paper. Responses to the questions in this paragraph are optional.

Provide information on what your agency is planning to provide in the next one to three years to improve outcomes and resources available to clients. Responses to this question are aoptional.

Renewal Project Scoring Criteria:

1. Program Performance
2. Financial Performance
3. HMIS Compliance and Data Quality
4. CoC Participation
5. Consumer Participation
6. Attachments

Renewal Project Scoring Overview

Scoring Criteria	Points
Program Performance (CE Client #'s)	55
Financial Performance	15
HMIS Compliance and Data Quality	20
CoC Participation	8
Consumer Participation	8
Attachments	5
Total Points Possible	111

Threshold: All Renewal Projects must score at least 72 points (which is 65%) to be eligible for renewed funding.

FY2019 HUD COC PROJECT SCORING SHEET
MACOMB COUNTY (MI-503) CONTINUUM OF CARE – Renewal Projects

Renewal projects will be scored based upon the following components, for a total of 111 possible points. Each applicant is filling out its own score card. Include where you pulled the data (have this highlighted) in the appropriate section of the scoring card. Applicants are also asked to write down the data that they are using to inform the calculations for scoring.

Project Name:		Reviewer:		
		Points Possible		Scoring
PROGRAM PERFORMANCE		Total Possible Points: 55		
#1	Mainstream Resources & Employment: Applies to PSH, RRH, and TH.	Total Possible Points:	15	
A	Leavers with Any Cash Income – Percentage of adult leavers who left the program with one or more sources of cash income. PSH includes Leavers and Stayers.	60 -100% - 40-59% - <40% -	3 1.5 0	
B	Leavers with Any Non-Cash Benefits – Percentage of adult leavers who left the program with one or more sources of non-cash income. PSH includes Leavers and Stayers.	80-100% - 60-79% - <60% -	2 1 0	
C	Leavers with Earned Income (Employment) – Percentage of adult leavers who exited with employment (earned income). PSH includes Leavers and Stayers.	20-100% - 10-19% - <10% -	3 1.5 0	
D	Leavers with Increase in Non-Employment Cash Income – Percentage of adult leavers who exited with an increase in non-employment cash income. PSH includes Leavers and Stayers.	25-100% - 10-24% - <10% -	2 1 0	
E	Leavers with Increase in Earned Income – Percentage of adult leavers who exited with an increase in earned income. PSH includes Leavers and Stayers.	10-100% - 5-9% - <5% -	3 1.5 0	
F	Leavers and Stayers Increase in Total Cash Income – Percentage of adult leavers and stayers with an increase in any income (earned or other).	20-100% - 10-19% - <9% -	2 1 0	
Housing Performance – Project Specific			40	
A	Rapid Rehousing (RRH) Exits to permanent Housing – Measure: Percentage of participants who exit the program to a permanent housing destination. Clients who were deceased can be removed from calculation.	85-100% - 80-84% - 75-79% - 70-74% - 65-69% - < 65% -	30 25 20 15 10 0	
B	Utilization Rates – Measure: Overall average project utilization rates as given in the APR for Grant's FY. (Units)	90-100% - 75-89% - < 75%	10 5 0	
A	Transitional Housing (TH) – Exits to Permanent Housing	85-100% - 80-84% - 75-79% -	30 25 20	

	Clients who were deceased can be removed from calculation.	70-74% - 65-69% - < 65% -	15 10 0	
B.	Occupancy Rates Measure: Overall average project occupancy rates as given in the APR for Grant's FY. (Beds)	90-100% - 75-89% - < 75%	10 5 0	
A	Permanent Supportive Housing (PSH) Exits to permanent Housing – Measure: Percentage of participants who exit the program to a permanent housing destination. Clients who were deceased can be removed from calculation.	51-100% 41-50% 31-40% 21-30% 10-20% <10%	30 25 20 15 10 0	
B	Utilization Rates – Measure: Overall average project utilization rates as given in the APR for Grant's FY. (Units)	90-100% - 75-89% - < 75%	10 5 0	
#2	Financial Performance- Percentage of expenditures for the most recently completed grant term. Financial performance will be scored based on the extent to which each project has expended its annual budgeted HUD grant during its most recently completed project year. Any organization found to have less than 95% of their grant expended for projects that do not have a rental assistance line or 90% for projects that include a rental assistance budget line, will be required to provide an explanation of the situation and why some funds were recaptured. Scoring and points will be based on the following scales:	Total Possible Points:	15	
A	Projects that do not have a rental assistance budget line:	95-100% - 90-94% - <90% -	15 8 0	
B	Projects that do have a rental assistance budget line:	90-100% - 80-89% - <80% -	15 8 0	
#3	HMIS Compliance and Data Quality	Total Possible Points:	20	
A	Attendance at the Agency Admin Meetings	100% attendance - missed two meeting - missed three meetings - missed four or more meetings-	5 4 3 0	
B	UDE Completion for subject projects	90-100% completed- 50-89% completed- <50% completed-	6 3 0	
C	Clients exiting to known destination (Percentage the program reports clients exiting to all destinations, except null destinations.)	80% of clients- 70% of clients- 60% of clients- 50% of clients- Less than 50%-	6 5 4 3 0	
D	On time Submission of all required information for Housing Inventory Count (HIC).	Completed Incomplete	3 0	
#4	Other Criteria: CoC Participation	Total Possible Points:	8	
A	CoC Coordinated Entry Participation -95% of entries to project from CE referrals.	Yes- No-	5 0	
B	Participation in the PIT Count	Yes – No -	3 0	

#5	Other Criteria: Consumer Participation	Total Possible Points:	8	
A	Participation of a homeless or formerly homeless consumer on the board of directors or other equivalent policymaking entity	Had consumer participation for 75% of meeting per year. (e.g 12 meetings, must attend 9)	5	
B	If not compliant with above, describe how the recipient and/sub recipient will become compliant with this regulation – include timeline	Yes - No -	3 0	
#6	Attachments – check all that provided and note if not required – 5 points if all are provided and subtract a point for each missing.	Total Possible Points:	5	
	Current HUD Grant Agreements by project			
	Environmental Review Form			
	Equal Access Rule Form			
	Current copy of DUNS registration			
	Current SAMS registration			
	Current ELOCCS draw printout			
	Lead Based Paint Disclosure			
	Copy of most recent HUD Monitoring notification and report			
	Current Audit/Financial Review from private Accounting Firm			
	Most recent tax return			
	IRS 501 C 3 notification			
	Articles of Incorporation			
	Exhibit A Signature Page (Attached)			
	Copy of correspondence with HUD requesting significant changes to the grant (if applicable)			
	Copy of the most recent APR from SAGE			
	Copy of the grant submission through e-snaps for the FY 2018 competition			
	Provide documentation proving participant of homeless/formerly homeless person of the Agency's Board of Directors. If documentation not available, provide a requested waiver of this requirement as submitted to HUD. Also provide HUD's approval of waiver request.			
		Total Points Possible:	111	

Threshold: All Renewal Projects must score at least 72 points (which is 65%) to be eligible for renewed funding.

Exhibit A

Acknowledgements and Signature Page

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 Interim Rule 24 CFR Part 578.
2. The funded project will participate in the Coordinated Entry System.
3. The organization will enter required project and client data into the Homeless Management Information System (HMIS) in accordance with the HMIS Data Standards and HMIS Policies and Procedures, and other data systems as required by the Macomb County Continuum of Care for the management of client data for the Coordinated Entry System.
4. The organization will complete the attached Environmental Review Flowchart to determine the level of review needed for your particular project.
5. If awarded CoC funds by the U.S. Department of Housing and Urban Development, this project will comply with HUD's Equal Access Rule. The rule can be accessed at <https://www.hudexchange.info/resources/documents/Equal-Access-Final-Rule-2016.pdf>
6. The organization will complete a Lead Based Paint Disclosure. An example is attached

Name of Project Submitted: _____

Date: _____

Organization: _____

Signature of Executive Director: _____

Name Printed: _____