# Eastern PA CoC FY2024 New Project Preliminary Application (DV Bonus)

## Instructions

### ****Eastern PA Continuum of Care, CoC PA-509********2024 Preliminary Application for DV Bonus****

### ****Instructions:****

### Please complete all required questions within this survey to be considered for funding for new DV Bonus projects within the FY2024 Eastern PA Continuum of Care CoC Application.

### *****NOTE: Only questions that apply to your selected project type will be displayed.*****

### BUDGET: Please note that you will be required to submit a proposed budget as part of this preliminary application. Toward the end of this survey there will be a place for you to upload the proposed budget. Please use the Excel budget template provided with the RFP and provided below.

### You may click “Save and Continue” in the upper right-hand corner at any time to save your responses and return to complete at a later time- a link will be emailed to you to return to your responses. *****HOWEVER, we highly recommend that you work on a hard copy of your responses first prior to entering your responses in Alchemer -- in case of a technical issue we do not want you to lose your work*****. A link to a hard copy of the application can be found in the RFP.

### Upon submission, a copy of your responses will be emailed to you for your records.

###

## Preliminary Application

### ****Pre-Application Questions****

#### Did you attend or watch recording of the 2-part CoC New Project Training series in April 2024? <https://pennsylvaniacoc.org/resources/coc-new-project-training-sessions-april-2024-easternwestern-pa-cocs>\*

( ) Yes

( ) No

#### Did your organization participate in (optional) new project technical assistance with DMA (CoC consultant)?\*

( ) Yes

( ) No

### ****Applicant Information****

### 1. Agency Name\*

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### 2. Contact Person\*

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### 3. Phone Number\*

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### 4. Email Address\*

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#### ****5. Counties your organization currently serves:****\*

[ ] Adams

[ ] Bedford

[ ] Blair

[ ] Bradford

[ ] Cambria

[ ] Carbon

[ ] Centre

[ ] Clinton

[ ] Columbia

[ ] Cumberland

[ ] Franklin

[ ] Fulton

[ ] Huntingdon

[ ] Juniata

[ ] Lebanon

[ ] Lehigh

[ ] Lycoming

[ ] Mifflin

[ ] Monroe

[ ] Montour

[ ] Northampton

[ ] Northumberland

[ ] Perry

[ ] Pike

[ ] Schuylkill

[ ] Somerset

[ ] Snyder

[ ] Sullivan

[ ] Susquehanna

[ ] Tioga

[ ] Union

[ ] Wayne

[ ] Wyoming

[ ] All of the above

[ ] None of the above

#### ****6. What type of project are you applying for?****\*

( ) Rapid Re-Housing (RRH)

( ) Transitional Housing/ Rapid Re-Housing Joint Component (TH-RRH)

( ) Supportive Services Only - Coordinated Entry (SSO-CE)

#### ****7. Are you seeking an expansion of an existing CoC grant?****Only existing CoC grantees are eligible to apply for an expansion of an existing project.

( ) Yes - Insert 6-digit pin and name of existing grant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

( ) No

#### ****8. Does the geography of the proposed project cover:****\*

( ) Single County

( ) Multiple Counties

( ) RHAB

( ) Entire CoC

#### ****9. Specifically, which county/ies do you intend to cover?****

[ ] Adams

[ ] Bedford

[ ] Blair

[ ] Bradford

[ ] Cambria

[ ] Carbon

[ ] Centre

[ ] Clinton

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[ ] Cumberland

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[ ] Wayne

[ ] Wyoming

[ ] All of the above

[ ] None of the above

### ****Organizational Capacity****

#### ****10. Will this project have a subrecipient(s)? If so, please specify the identified subrecipient(s).****If the project will have subrecipient(s), please ensure that you complete the “Applicant Experience” questions below with information both for your organization (recipient) AND the proposed subrecipients.\*

( ) Yes - please write in name of subrecipient(s). If not yet identified, write in "Not yet identified": \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

( ) No

### ****NOTE: If your project will have a subrecipient(s), please ensure that you include information about the subrecipient(s) experience in the questions below related to organizational capacity.****

#### ****11. Is your organization a Victim Services Provider (VSP)?****HUD’s definition of a VSP [can be found here](https://www.hudexchange.info/faqs/programs/continuum-of-care-coc-program/program-requirements/coordinated-entry/how-does-hud-define-victim-service-provider/).\*

( ) Yes - our organization is a VSP

( ) No - but we will have a VSP as a formal subrecipient

( ) No - neither our organization nor an identified subrecipient are a VSP

### ****11a. If no, please provide the following information:****

### Please identify the formal VSP partner who will work with your organization on this project.

### Please describe how the formal partnership will be set up/how the VSP organization will support this project.

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### ****12. Provide your organization’s experience administering other federal, state, local and/or private sector grants. Be specific and explain what the funding was used for, grant management requirements, etc.****2,000 character limit\*

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### ****13. Provide a description of the program management and financial accounting system that will be used to administer the grant.**** Response must include the accounting system used, your organization's system of checks and balances, and overall structure of how your organization will provide fiscal oversight to this grant.2,000 character limit(this question corresponds to esnaps Screen 3b, question 3)\*

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### ****14. Provide your organization’s experience regarding compliance with public funding sources:****For example: Do you invoice in a timely manner? Do you have any grants with 100% drawdowns? Are you on time with reporting requirements?2,000 character limit(this question corresponds to esnaps Screen 3b, question 1)\*

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#### ****15. Does your organization have any unresolved monitoring or audit findings for any grants from HUD, the CoC, and/or DCED (including ESG)?****\*

( ) Yes

( ) No

### ****15a. If yes, please explain:****\*

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### ****16. If you intend to serve multiple counties, please describe your organization's experience and capacity to implement a multi-county or regional project.**** If not intending to serve multiple counties, please mark as n/a.\*

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#### ****17. What is your current relationship with the Eastern PA CoC?****  Please check any of the following ways you participate in the CoC: \*

[ ] Refer clients you serve to the CoC’s Coordinated Entry System

[ ] Attend RHAB meetings

[ ] Attend CoC meetings (twice per year)

[ ] Participate on a Committee/Sub-Committee. Which:: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Participate in the planning of the annual point-in-time count

[ ] Provide data for the annual point-in-time count

[ ] Other. Please describe:: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### ****18. Please describe the following:****

### ****Your organization's experience serving and improving outcomes for communities that have historically been marginalized (e.g. people of color, LGBTQ+, people that do not speak English as their primary or first language)****

### ****Your organization's experience delivering culturally responsive services for participants from diverse backgrounds and experiences.****

### ****How the project design and delivery of services are designed to promote racial equity****

### Please respond to all parts of the question (include numbering that corresponds with numbering above).\*

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**RRH AND TH-RRH ONLY**

### ****19. Describe your organization's experience providing housing- emergency-based, transitional, or permanent, to individuals and families fleeing domestic violence.****\*

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**RRH AND TH-RRH ONLY**

### ****20. Provide your organizations' experience in using a Housing First Model/implementing Housing First principles specifically with DV survivors.****For more information on Housing First, see:<https://www.usich.gov/solutions/housing/housing-first/>Domestic Violence Housing First Toolkit - <https://safehousingpartnerships.org/node/344>   NOTE: Your response should go beyond repeating the definition of Housing First. Instead, the CoC wants to better understand HOW your organization implements Housing First, with specific examples, including examples of how this is implemented with DV survivors. If your organization has not implemented Housing First in the past, please explain how you will work to do so for this project.\*

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### ****21. Please describe:********a) your organization's experience in partnering with persons with lived experience (of homelessness and/or DV) around project design and delivery, and********b) how you plan to incorporate persons with lived experience into the proposed project design and delivery (e.g. what role will persons with lived experience have in designing the project and evaluating the effectiveness of the project)****Please limit your response to 2,500 characters. \*

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**SSO-CE ONLY**

### ****Coordinated Entry Projects****

**SSO-CE ONLY**

### ****22. Please describe your involvement and participation in the Eastern PA CoC's Coordinated Entry System.****If no involvement or participation, please write n/a\*

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**SSO-CE ONLY**

### ****23. Please describe:****

### ****how the Eastern PA CoC's Coordinated Entry System is currently inadequate to address the needs of survivors of domestic violence, dating violence, sexual assault, or stalking;****

### ****how you specifically plan to utilize the funding; and****

### ****how the proposed project addresses inadequacies identified.****

### Please limit your response to 2,500 characters.\*

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**RRH AND TH-RRH ONLY**

### ****RRH and TH-RRH Projects****

### ****24. Name of the proposed project (if known):****

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**RRH AND TH-RRH ONLY**

### ****25. Provide a general description of your proposed project.  This should include a clear and concise description of the scope of the project and should be consistent with the information that you have provided in other parts of this application. The following information should be included in your description:****

### Scope of project.  Please clearly state the following:

### the project type;

### the household type(s) to be served;

### any target subpopulation(s) to be served;

### the number of beds, units, people and households to be served both annually AND at a given point in time.

### How/why the type of housing proposed, including the number and configuration of units, will fit the needs of the project participants.

### Project plan for addressing the identified housing and supportive service needs, including any agencies that you plan to partner/coordinate with to provide additional expertise.  Community partners should be referenced, by name, along with a description of their role in the success of the project and the households served (e.g., employment, transportation, child care)

### Projected project outcomes (outcomes should focus on housing stability, increase in income, connection to mainstream resources and benefits, connection to healthcare, etc.)

### How the CoC Program funding will be used.

### This should include staffing to be provided through the project (for ex., 1 case manager at 40 hours/week, 1 housing locator at 20 hours/week, etc.) and the activities of those staff positions.

### 3,000 character limit (NOTE: HUD's esnaps application limits this question to 3,000 characters, so applicants must address all items above within 3,000 characters)Please respond to all parts of the question (include numbering that corresponds with numbering above).(This question corresponds to esnaps screen 3B question 1)\*

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**RRH AND TH-RRH ONLY**

### ****26. Please describe how this project meets a specific need in the proposed geographical area. Please include data to support the need for this project.****Note: Please review and reference data presented in the 2023 Gaps Analysis and 2023 Point in Time Count data (links in introduction above).\*

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**RRH AND TH-RRH ONLY**

### ****27. Based on experience, describe how your organization has accomplished the following:****

### ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;

### prioritized survivors (as in the process used, e.g. Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.)

### determined which supportive services survivors needed;

### connected survivors to supportive services, including mainstream benefits, health resources, and employment (including specific examples); and

### moved clients from assisted housing to housing they could sustain- address housing stability after the housing subsidy ends.

### (please limit your response to 2,500 Characters)\*

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**RRH AND TH-RRH ONLY**

### ****28. Please describe how you will support participants with housing search and location.****Example:

### What supports will your project provide to households to identify units in the community?

### Does your organization have existing relationships with landlords? If so, describe. If not, how will you recruit landlords and build landlord relationships?

### \*

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**RRH AND TH-RRH ONLY**

### ****29. Please describe:****

### ****how your organization has supported the safety and confidentiality of DV survivors experiencing homelessness****. Examples may include

### taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;

### making determinations and placements into safe housing;

### keeping information and locations confidential;

### training staff on safety and confidentially policies and practices; and

### taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality.

### ****how your organization has evaluated its ability to ensure the safety of DV survivors served in your programs, including any areas identified for improvement.****

### Please limit your response to 5,000 characters.\*

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### ****30. Please describe:****

### ****your organization's experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors;****

### ****how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:****

### prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;

### 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;

### providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;

### placing emphasis on the participant’s strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;

### centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;

### delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and

### offering support for parenting, e.g., parenting classes, childcare.

### Please limit your response to 5,000 characters\*

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**RRH AND TH-RRH ONLY**

### ****31. Provide examples in the field below of how the new project will:****

### prioritize placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;

### 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;

### provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of  trauma;

### emphasize program participants’ strengths–for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor- defined goals and aspirations;

### 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;

### provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and

### offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

### Please limit to your response to 5,000 characters.

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#### ****32. Please indicate which of the following requirements you commit to follow:****\*

[ ] Use a Housing First approach (see HUD Housing First Assessment Tool for more information on Housing First; linked in instructions above)

[ ] Comply with all CoC policies and HUD regulations and notices. This includes compliance with Fair Housing; Prohibition against involuntary family separation; designate a staff person to ensure children are engaged with educational programming (for projects that serve families); HUD’s Equal Access to Housing Rule and Equal Access in Accordance with Gender Identity Final Rule; and any other terms and conditions within the NOFA.

[ ] Participate in the Eastern PA Coordinated Entry System

[ ] Follow the CoC’s written standards for providing assistance, including prioritization for program enrollment from the Coordinated Entry By Name List and minimum case management requirements (linked in the instructions above)

[ ] Provide ongoing case management for all participants, following the guidance as outlined in the Written Standards. A minimum of monthly case management meetings are required as part of the Rapid Re-Housing program. (RRH AND TH-RRH ONLY)

[ ] Enter data into HMIS comparable database

[ ] Participate in and attend meetings of the RHAB and CoC

[ ] Provide program participants with assistance securing Mainstream Benefits and health insurance (RRH AND TH-RRH ONLY)

**RRH AND TH-RRH ONLY**

### ****Housing/Healthcare Leveraging****

**RRH AND TH-RRH ONLY**

#### 33. HUD is providing CoCs with additional points for submitting Rapid Re-Housing (or RRH component of TH-RRH) and/or Permanent Supportive Housing project applications that utilize non-CoC resources to cover housing and healthcare costs.  Specifically, to receive points for leveraging housing costs in the CoC’s new project scoring process:

#### RRH projects (or RRH component of TH-RRH) must provide housing subsidies or subsidized housing units to serve at least 25% of the participants in the project.

#### The CoC is also interested in knowing if projects will be providing housing subsidies or subsidized housing units, but for less than 25% of the units

#### Please note that any project that is proposing to bring in housing subsidies or subsidized housing units must provide a formal MOU/letter from the partner agency. This will be required when submitting your application to HUD if you are selected for funding (is not required yet).

#### Will your RRH or TH-RRH project  provide housing subsidies or subsidized housing units to serve at least 25% of the participants in the project? \*

( ) Yes - at least 25%

( ) Yes - less than 25%

( ) No

### 33a. If yes, please describe how this will be structured and how the housing subsidies or subsidized housing units will be provided (e.g. who is your housing partner, what housing resources will be leveraged, etc.)?\*

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**RRH AND TH-RRH ONLY**

#### 34. HUD is providing CoCs with additional points for submitting Rapid Re-Housing (or RRH component of TH-RRH) and/or Permanent Supportive Housing applications that that utilize non-CoC resources to cover housing and healthcare related costs.  Specifically, to receive points for leveraging healthcare costs in the CoC’s new project scoring process, applicants must demonstrate that they are housing healthcare resources that are direct contributions from a public or private health insurance provider to the project, or provision of health care services by a private or public organization tailored to the program participants of the project. Note: Eligibility for the project must be based on HUD CoC Program fair housing requirements and cannot be restricted by the health care service provider. As such, the CoC is interested in partnering with organizations that can leverage 25% or more of the project’s healthcare/ service needs through community partnerships. The CoC is also interested in knowing if projects will be providing leveraged healthcare/service needs, but for less than 25% of the services.Please note that any project that is proposing to bring in healthcare leveraging must provide a formal MOU/letter from the partner agency. This will be required when submitting your application to HUD if you are selected for funding (is not required yet).****Will your project leverage 25% or more of the project's healthcare/service needs through community partnerships?****\*

( ) Yes - at least 25%

( ) Yes - less than 25%

( ) No

### 34a. If yes, please describe how this will be structured and how the project's healthcare/service needs will be met through community partnerships (e.g. who will your community partner be, what healthcare resources will be leveraged, etc.)?\*

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### ****Budget****

#### ****35. Please upload a copy of your proposed budget****, using the Excel template provided (linked in intro above).Click "Browse" button to upload the document from your computer. Please upload the document in Excel format. For a list and description of eligible costs, please refer to the [HUD CoC Virtual Binders](https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-eligible-activities/coc-eligible-activities-overview/) and/or [Continuum of Care regulations at 24 CFR Part 578, Subpart D – Program Components & Eligible Costs.](https://www.law.cornell.edu/cfr/text/24/part-578/subpart-D)

\_\_\_\_\_\_\_\_1

\_\_\_\_\_\_\_\_2

### ****Please type the name and title of the responsible party for this application below that will serve as your digital signature.****

### Name of Responsible Party for this Application\*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Title for Responsible Party for this Application\*

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### Today's Date\*

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## Thank You!

### Thank you for submitting your preliminary application for Eastern PA CoC FY24 RFP for New DV Bonus Projects. You will receive an automated email with a copy of your responses for your records.