CRHC Emergency Solutions Grant (ESG) Application

**FUNDING** City of Lansing & MSHDA ESG

**GRANT PERIOD** 2021-22

**PART I: Program Information**

Date of Application: \_\_\_\_\_\_\_\_\_ Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you received City or MSHDA ESG funds in the past? Yes: \_\_\_ No: \_\_\_\_

Amount Requesting: City: $\_\_\_\_\_\_\_\_\_\_ MSHDA: $\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A glossary of terms can be found at the end of the application.

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**Project / Program Name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Check the eligible program component for which you are requesting funds:

**Rapid Rehousing**: City\_\_\_\_\_\_ MSHDA\_\_\_\_\_\_ **Prevention**: City\_\_\_\_\_\_ MSHDA\_\_\_\_\_\_

**Emergency Shelter**: City\_\_\_\_\_\_ MSHDA\_\_\_\_\_\_ **Street** **Outreach**: City\_\_\_\_\_\_ MSHDA\_\_\_\_\_\_

1. Does this project focus on and have a special capacity to serve a HUD-specified Special Population (CH, severely mentally ill, chronic substance abuse, veterans, those with HIV/AIDs, or unaccompanied youth under 18)? Yes: \_\_\_ **(3 points)** No: \_\_\_\_\_ **(0 points)**

If YES, which special population and what makes the program uniquely equipped to serve the population? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Does your organization have tax-exempt status under 501(c) (3) of the Internal Revenue Code?

Yes: \_\_\_ No: \_\_\_

1. Will these funds be used as match for other grants? Yes: \_\_\_ **(0 points)** No: \_\_\_\_ **(7 points)**

If yes, please identify the grants matched: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are other funds leveraged with the requested funds?

Yes, at 100% to 199%: \_\_\_ **(5 points)** Yes, at 200%+:\_\_\_ **(10 points)** No: \_\_\_ **(0 points)**

If yes, please identify the amounts and source for leveraged funds.

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

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1. What is your bed capacity? (shelter only)

0 to 20:\_\_\_\_**(1 point)** 21 to 49:\_\_\_\_\_\_ **(3 points)** 50+:\_\_\_\_\_\_\_ **(7 points)**

1. Estimate the number of clients to be served during the grant term. **(No Point Value)**

Report each program’s anticipated numbers separately.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Programs Serving Individual Adults and Youth** | **Programs Serving Families** | |
| **Number of Individuals** | **Total Number of Households** | **Total Number of persons in families (including children)** |
| **Street Outreach** | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Emergency Shelter** | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Re-Housing** | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Prevention** | Click here to enter text. | Click here to enter text. | Click here to enter text. |

1. **Previously funded Programs**: What is your “Positive Housing Rate” (getting housed) for your program in the past six months? \_\_\_\_\_\_\_% **(<20% = 0 points, 21-30% = 3 points, >31% = 5 points)**

In the previous 12 months? \_\_\_\_\_\_\_% **(<20% = 0 points, 21-30% = 3 points, >31% = 5 points)**

1. Did this program have a CAP in the past year, per CRHC’s Grant Monitoring Policy?

\_\_\_\_ Yes (**-10 points**) \_\_\_\_ No

**Part II: Narrative**

1. Discuss the Organization’s experience in providing the services for which funding is being requested. (limit 250 words) **(0-3 points)**

1. Provide data or other evidence of your effectiveness in serving **ONE** of the homeless populations listed below for the program in this application. (limit 250 words) **Effectiveness is defined as getting people housed. (0-5 points)**

[ ] Individual/family facing homelessness within 14 days; (prevention)

[ ] Individual/family that are literally homeless; (shelter or outreach)

[ ] Individual/family fleeing or attempting to flee DV. (shelter or outreach)

1. Provide a brief statement of need of the target population served by your program. (limit 100 words)
2. **Shelter applicants**: Describe your shelter diversion practices and the effectiveness in helping households avoid shelter when safe alternatives are available. **(0-10 points)**
3. **Outreach:** Describe your efforts to locate, identify, and build relationships with people in unsheltered homeless situations and how they are assisted to engage with community resources. **(0-10 points)**
4. **Prevention and Rapid Rehousing applicants**: Describe how households are prioritized for financial assistance. How does the project ensure those receiving assistance do not return to homelessness (RRH) or become homeless (prevention)? **(0-10 points)**
5. Provide the program services/goals/objectives/measurable outcomes for this funding, as it relates to HUD and CRHC priorities. (limit 1000 words) **(0-20 points)**
6. Please explain how this program engages with or participates in the Coordinated Entry Agency process? CEA referral or access point? (limit 250 words). **(0-5 points)**
7. List any innovative element for the program in the past year. **(0-5 points)**
8. Are there any changes planned for the program operations between now and September 30, 2022? Yes: \_\_\_ No: \_\_\_ If yes, briefly explain.
9. What will the impact on your program be if you do not receive the requested funding amount? (limit 50 words)

**Part III: Budget**

**(SEE EXCEL PAGE FOR ESG BUDGET TEMPLATE)**

**(0-10 pts for accurate, complete budget)**

**Other Sources of Funds**

**Fiscal Year 2021-2022**

List all sources of funds that support the total projected cost of the project. List all sources of funds for the total agency operation. List cash contributions only for Total Project and Total Agency amounts. *The Total Project Amount “total” on this page must agree with the Estimated Cost of Project “total” that appears on previous page.*

|  |  |  |
| --- | --- | --- |
| **Source** | **Total Project Amount** | **Total Agency Amount** |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |
| **6.** |  |  |
| **7.** |  |  |
| **8.** |  |  |
| **9.** |  |  |
| **10.** |  |  |
| **11.** |  |  |
| **12.** |  |  |
| **TOTALS:** | **$ 0.00** | **$ 0.00** |

**By signing this application, I agree to have consistent agency representation at CRHC meetings, follow the CRHC policies and by-laws and HUD regulations for the grant, and abide by fiduciary policies and procedures. I certify the statements contained in the APPLICATION herein are true, complete, and accurate to the best of my knowledge.**

**Authorized Representative:**

**Print:**

**Signature of Authorized Official Date \_\_\_\_\_\_\_\_\_\_\_\_**

**This application is due by 5pm on April 20th, 2021**

**Please submit it to Meaghan Redd at** [**glhrncoordinator@gmail.com**](mailto:glhrncoordinator@gmail.com)

**Glossary:**

CoC – the Continuum of Care established by HUD in 1995 as “the group that takes on coordination of homeless services and homelessness prevention activities across a specified geographic area.” The Capital Region Housing Collaborative (formerly the GLHRN) is the CoC for the Lansing/East Lansing/Ingham County geographic area, identified by HUD as the MI-508 CoC. (Established in the CoC Program Interim rule, 24 CFR 578. Always search for latest edition.)

DV: Domestic Violence

CEA or HARA: Coordinated Entry Agency or Housing Assessment and Resource Agency, is the coordinated assessment system for homeless or at-risk persons within the CoC and is currently administered by Holy Cross Services. (FY19-20) See eligible services and activities below.

Leveraged funds: A financial commitment toward the costs of a project from a source other than the granting organization

Funds used as match: Using ESG funds as match for another grant that requires an amount of match funding from other sources

**The following excerpts are from HUD ESG regulations** **(24 CFR 576 Homeless Emergency Assistance and Rapid Transition to Housing: Emergency Solutions Consolidated Plan Conforming Amendments):**

ESG funds may be used to provide services for homeless youth, victim services, and services for people living with HIV/AIDS, so long as the costs of providing these services are eligible under paragraphs (a)(1) through (a)(5) of this section.

\*a 1-Engagement 2-Case management 3-Emergency Health Services 4- Emergency Mental

Health Services 5- Transportation

Engagement: The costs of activities to locate, identify, and build relationships with unsheltered homeless people and engage them for the purpose of providing immediate support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs. These activities consist of making an initial assessment of needs and eligibility; providing crisis counseling; addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries; and actively connecting and providing information and referrals to programs targeted to homeless people and mainstream social services and housing programs, including emergency shelter, transitional housing, community-based services, permanent supportive housing, and rapid re-housing programs. Eligible costs include the cell phone costs of outreach workers during the performance of these activities.

Case Management: The cost of assessing housing and service needs, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant. Eligible services and activities - Using the **centralized or coordinated assessment system** as required under § 576.400(d); conducting the initial evaluation required under § 576.401(a), including verifying and documenting eligibility; counseling; developing, securing and coordinating services; obtaining Federal, State, and local benefits; monitoring and evaluating program participant progress; providing information and referrals to other providers; and developing an individualized housing and service plan, including planning a path to permanent housing stability.

Emergency Health Services: Eligible costs are for the direct outpatient treatment of medical conditions and are provided by licensed medical professionals operating in community-based settings, including streets, parks, and other places where unsheltered homeless people are living.

(ii) ESG funds may be used only for these services to the extent that other appropriate health services are inaccessible or unavailable within the area.

(iii) Eligible treatment consists of assessing a program participant’s health problems and developing a treatment plan; assisting program participants to understand their health needs; providing directly or assisting program participants to obtain appropriate emergency medical treatment; and providing medication and follow-up services.

Emergency Mental Health Services: Eligible costs are the direct outpatient treatment by licensed professionals of mental health conditions operating in community-based settings, including streets, parks, and other places where unsheltered people are living. ESG funds may be used only for these services to the extent that other appropriate health services are inaccessible or unavailable within the area.

Transportation: Eligible costs of travel by outreach workers, social workers, medical professionals, or other service providers’ takes place during the provision of eligible services under this section. The costs of transporting unsheltered people to emergency shelters or other service facilities are also eligible. These costs include the following:

(i) The cost of a program participant’s travel on public transportation;

(ii) If service workers use their own vehicles, mileage allowance for service workers to visit program participants

**Please see the following websites for Regulations, HUD Guidances and Grant Guidelines:**

[https://files.hudexchange.info/resources/documents/HomelessAssistanceActAmendedbyHEARTH.pdf](https://urldefense.proofpoint.com/v2/url?u=https-3A__files.hudexchange.info_resources_documents_HomelessAssistanceActAmendedbyHEARTH.pdf&d=DwMFaQ&c=L1a8adzPg4Qe0TEcZkiHr5CWp6Nopedi-9Tg5S5Mi-Q&r=MVVQnvcDQ9JozLmZ9of50C9AWd0vzAgP-E3jOmckJhQ&m=Je7zUvb3hxyJoiGJtJnaYSr6cjRPVdxM6bE2iEw5dPU&s=QU5dbSKHjJQOAduMbYQVNywmEsj21Mj_n70dKtGY4TU&e=)

[https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/](https://urldefense.proofpoint.com/v2/url?u=https-3A__www.hudexchange.info_resource_4847_hearth-2Ddefining-2Dchronically-2Dhomeless-2Dfinal-2Drule_&d=DwMFaQ&c=L1a8adzPg4Qe0TEcZkiHr5CWp6Nopedi-9Tg5S5Mi-Q&r=MVVQnvcDQ9JozLmZ9of50C9AWd0vzAgP-E3jOmckJhQ&m=Je7zUvb3hxyJoiGJtJnaYSr6cjRPVdxM6bE2iEw5dPU&s=TIWJgEHWlRKczg30aIuvyt4_0hTngLbI2t_9DO9Xzpw&e=)

[https://www.hudexchange.info/resource/1927/hearth-esg-program-and-consolidated-plan-conforming-amendments/](https://urldefense.proofpoint.com/v2/url?u=https-3A__www.hudexchange.info_resource_1927_hearth-2Desg-2Dprogram-2Dand-2Dconsolidated-2Dplan-2Dconforming-2Damendments_&d=DwMFaQ&c=L1a8adzPg4Qe0TEcZkiHr5CWp6Nopedi-9Tg5S5Mi-Q&r=MVVQnvcDQ9JozLmZ9of50C9AWd0vzAgP-E3jOmckJhQ&m=Je7zUvb3hxyJoiGJtJnaYSr6cjRPVdxM6bE2iEw5dPU&s=SJz4QOGv70NXIOi6e28uMfO1upfJFazqDV1cjixCsBY&e=)

[https://www.hudexchange.info/resource/1928/hearth-defining-homeless-final-rule/](https://urldefense.proofpoint.com/v2/url?u=https-3A__www.hudexchange.info_resource_1928_hearth-2Ddefining-2Dhomeless-2Dfinal-2Drule_&d=DwMFaQ&c=L1a8adzPg4Qe0TEcZkiHr5CWp6Nopedi-9Tg5S5Mi-Q&r=MVVQnvcDQ9JozLmZ9of50C9AWd0vzAgP-E3jOmckJhQ&m=Je7zUvb3hxyJoiGJtJnaYSr6cjRPVdxM6bE2iEw5dPU&s=ehuOuFR3OUmKUui0NKdVwgLvRD15luXFqMTTFMIWV-g&e=)

**For additional information contact Katrina Urista or Toni Young at (517) 483-4477.**