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**2018 COC PROGRAM COMPETITION**

**NEW/First Time Renewal**

 **PROJECT APPLICATION**

* *All new projects must demonstrate minimum project eligibility, capacity, timeliness, and performance standards to be considered for funding.*
* *HMIS Participation is mandatory.*
	+ *For victim service providers, an HMIS comparable database must be used for all persons served for each grant and should be able to generate an Annual Performance Report.*

Check One:

***Bonus***

☐ Permanent Supportive Housing

☐ Rapid Re-Housing

☐ Supportive Services Only for Coordinated Entry

☐ Expansion of an Existing Program

***DV Bonus***

☒ Rapid Re-Housing

☐ Coordinated Entry Dedicated to DV

☐ Expansion of an Existing Program

☐ Joint TH and PH-RRH project

|  |
| --- |
| **Agency Profile** |
| Legal Name of Agency | Center for Women in Transition |
| Project Name | Ottawa DV Bonus |
| Contact Person | Teresa Schraudt |
| Title | Grants and Statistics Coordinator |
| Address | 411 Butternut Drive, Holland, MI 49424 |
| E-Mail | teresas@cwitmi.org |
| Phone | 616-494-1752 |

Authorized Representative:

I hereby certify that the information contained in this proposal is true and accurate. Any falsification of information will render the application void, and the application will not be accepted. This application has been reviewed and authorized for submission by the agency’s board of directors as of the date indicated.

|  |  |
| --- | --- |
| Name: Beth Larsen | Title: Executive Director |
| Date of Executive Director Authorization: | 8/3/2018 |
| Date of Anticipated ED Authorization: | 8/3/2018 |

**Project Description**

1. Past experience with project type

☒ > 3 years ☐ 1-3 years ☐ None

1. Provide a description that addresses the entire scope of the proposed project.

With this project, Center for Women in Transition will expand its current menu of housing services for domestic survivors and their children, addressing a major gap in services and support in our community. This project will meet the immediate housing needs of individuals who meet Category 4 of HUD's definition of homelessness: An individual who is fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening situation related to violence; has no other residence; and lacks the resources or support networks to obtain other permanent housing. Following a Housing First approach, eligibility requirements will be minimal. The intent will be to focus on those hardest to serve--screening in, rather than screening out, individuals with multiple barriers to housing, including lack of income and access to resources and support. Full rental assistance will be available for six months. Participants will sign their own leases and the agency will pay monthly rent directly to landlords and management companies based on Fair Market Guidelines and Rent Reasonableness. Successful exits to permanent housing will be the primary end goal, with voluntary supportive services available to assist with ongoing safety planning, emotional support, and advocacy based on each survivor's self-identified goals. Because the agency will not operate the units, participants will be able to "transition in place," a key aspect of best practices in Rapid Re-Housing program models. Voluntary supportive services/advocacy will be offered for 6-12 months or longer based on individual need.

1. Does your project participate in a CoC Coordinated entry process?

 ☒ Yes ☐No

If no, please explain.

Click here to enter text.

1. Does your project have a specific population focus? ☒Yes ☐No

If yes, please identify. (Select all that apply)

|  |  |
| --- | --- |
| Chronic Homeless |  ☐ |
| Veterans |  ☐ |
| Youth |  ☐ |
| Domestic Violence |  ☒ |

**Housing First**

*Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements.*

1. Will the project quickly move participants into permanent housing (within 30 days of project acceptance)? ☒ Yes ☐No

If no, please explain.

 Click here to enter text.

1. Will the project ensure that participants are not screened out based on the following items? Select all that apply. *By checking the first four boxes this project will be considered* ***low barrier.***

|  |  |
| --- | --- |
| Having little or no income | ☒ |
| Active history of substance abuse | ☒ |
| Having a criminal record with exceptions for state=mandated restrictions. | ☒ |
| History of domestic violence (e.g. lack of a protective order, period of separation from abuser, or law enforcement involvement. | ☒ |
| None of the above | ☐ |

1. Will the project ensure that participants are not terminated from the program for the following reasons? Select all that apply.

|  |  |
| --- | --- |
| Failure to participate in supportive services | ☒ |
| Failure to make progress on a service plan | ☒ |
| Loss of income or failure to improve income | ☒ |
| Being a victim of domestic violence | ☒ |
| Any other activity not covered in a lease agreement typically found in Ottawa County | ☒ |
| None of the above | ☐ |

1. Will the project follow Housing First? ☒Yes ☐No

If no, please explain.

 Click here to enter text.

**Supportive Service for Participants**

1. Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families? ☒ Yes ☐No

If no, please explain.

 Click here to enter text.

1. Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate?

☒ Yes ☐No ☐ N/A

If no, please explain.

Click here to enter text.

1. For all supportive services available to participants, indicate who will provide them, how they will be accessed and how often they will be provided.

**Provider**: Enter one of the following:

* “Applicant” to indicate that the applicant will provide the service;
* “Sub-recipient” to indicate a provider that is a sub-recipient of CoC funds;
* “Partner” to indicate that an organization that is not the recipient or subrecipient of CoC Program funds but with whom a formal agreement or memorandum of understanding (MOU) has been signed will provide the service; or
* “Non-Partner” to indicate that a specific organization with whom no formal agreement has been established regularly provides the service to program participants.

**Frequency**: Select the most common interval of time for which the service is accessible to program participants. If two frequencies are equally common, choose the interval with the highest frequency.

* Daily
* Weekly
* Monthly
* Annually
* As needed

|  |  |  |  |
| --- | --- | --- | --- |
| **Supportive Services** |  | **Provider** | **Frequency** |
| Assessment of Service Needs |  | Applicant | As Needed |
| Assistance with Moving Costs |  | Applicant | As Needed |
| Case Management |  | Applicant | As Needed |
| Child Care |  | Applicant | As Needed |
| Education Services |  | Non-Partner | As Needed |
| Employment Assistance or Job Training |  | Applicant | As Needed |
| Food |  | Applicant | As Needed |
| Housing Search/Counseling Services |  | Non-Partner | As Needed |
| Legal Services |  | Applicant | As Needed |
| Life Skills Training |  | Applicant | As Needed |
| Mental Health Services |  | Non-Partner | As Needed |
| Outpatient Health Services |  | Non-Partner | As Needed |
| Outreach Services |  | Applicant | As Needed |
| Substance Abuse Treatment Services |  | Non-Partner | As Needed |
| Transportation |  | Applicant | As Needed |
| Utility Deposits |  | Applicant | As Needed |

1. Please describe how the supportive services proposed will be able to fit the desires and needs of the target population.

Services are empowerment-based and trauma-informed. Advocates use motivational interviewing techniques and principles of harm reduction in service delivery. Services are guided by each client’s self-identified goals.

1. Please identify whether the project includes the following activities:
2. Transportation assistance to clients to attend mainstream benefit appointments, employment training or jobs? ☒ Yes ☐ No
3. At least annual follow-ups with participants to ensure mainstream benefits are received and renewed? ☒ Yes ☐No

**Housing Type**

1. Total Units: 3

Total Beds: 8

Total Dedicated Chronic Beds: 0

**Project Participants**

1. Please complete the tables below with the household characteristics. In each non-shaded field list the number of households or persons served at maximum capacity. The numbers should reflect a single point in time at maximum capacity and NOT the number served over the course of a year or grant term.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Households**  | **HH with at least 1 adult and 1 child** | **Adult households w/o children** | **Households with only children** | **Total** |
| **Total Number of Households** | 2 | 1 | 0 | 3 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **Persons in HH w/ at least 1 adult and 1 child** | **Adult persons in HH w/o children** | **Persons in HH’s with only children** | **Total** |
| Adults over age 24 | 1 | 1 |  | 2 |
| Adults ages 18-24 | 1 | 0 | 1 |
| Accompanied children under 18 | 5 |  | 0 | 5 |
| Unaccompanied children under age 18 |  | 0 | 0 |
| Total Persons | 7 | 1 | 0 | 8 |

**Performance Measure**

**Measure 1 – Employment and Income Growth for Homeless Persons in CoC Program-funded Projects**

Choose only ONE Income Measure

1. Please provide three strategies you will use to assist participants in obtaining employment and increasing income.

1. Advocates will assess program participants’ employment history and identify any barriers to employment. 2. Advocates will help program participants budget and set goals related to employment and increasing income; progress toward goals will be reviewed on an ongoing basis. 3. Advocates will establish relationships with local service providers like Michigan Works! and assist participants with resumes, job applications, and advocacy and referrals to address needs such as child care, transportation, and clothing.

|  |  |
| --- | --- |
| Metrics | Total income during the reporting period  |
| **Income Measure** | Persons age 18 and older who will maintain or increase their total income (from all sources) by the of the end of the operating year or program exit |
| **Target %** | Enter the target percent | 67% |

**OR**

|  |  |
| --- | --- |
| **Metrics** | Earned income during the reporting period  |
| **Income Measure** | Persons age 18 through 61 who will maintain or increase their earned income as of the end of the operating year or program exit. |
| **Target %** | Enter the target percent | NA |

**Measure 2.A – Successful Placement in Permanent Housing (Transitional Housing and Rapid – ReHousing)**

1. Please provide three strategies you will use to assist participants in exiting to permanent housing

1. Advocates will assist with exploring options for permanent housing during the early stages of participation in the program. The Service Plan can be used to help participants self-identity goals for long term safety and stability. 2. Advocates will provide assistance with budgeting and referrals in an effort to help participants work toward securing permanent housing at program exit. 3. Advocates will advocate on behalf of participants to gain access to mainstream resources and eliminate barriers to permanent housing.

|  |  |
| --- | --- |
| **Metrics** | Exit to or retention of permanent housing |
| **Income Measure** | Persons who will remain in permanent housing as of the end of the operating year or exit to permanent housing (subsidized or unsubsidized) during the operating year. |
| **Target %** | Enter the target percent | 67% |

**Measure 2.B – Successful Retention of Permanent Housing (Permanent Supportive Housing)**

1. Please provide three strategies you will use to assist participants in retaining or exiting to permanent housing

Not Applicable

|  |  |
| --- | --- |
| **Metrics** | Exit to or retention of permanent housing |
| **Income Measure** | Persons who will remain in permanent housing as of the end of the operating year or exit to permanent housing (subsidized or unsubsidized) during the operating year. |
| **Target %** | Enter the target percent | NA |

|  |  |
| --- | --- |
| **Metrics** | Length of stay in permanent housing |
| **Income Measure** | The percent of participants who will remain housed in permanent housing for at least 6 months..  |
| **Target %** | Enter the target percent | NA |

**Project Budget**

1. Total Units requested 3
2. Rental Assistance

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activity** |  | **Requested Funds** | **Other Funding** | **Total Project Costs** | **% of Total Budget** |
| Acquisition | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| New Construction | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Rehabilitation | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Leasing | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Rental Assistance | 32,772 | 8,193 | 40,965 | 61 |
| Supportive Services | 18,164 | 4,541 | 22,705 | 34 |
| Operating Costs | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| HMIS | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Project Administration (limited to 7%) | 2,681 | 670 | 3,351 | 5 |
|  |  |
| **Total Project Cost** | 53,617 | 13,404 | 67,021 | 100 |

1. Supportive Services Budget

|  |  |  |  |
| --- | --- | --- | --- |
| **Eligible Costs** |  | **Quantity and Description** | **Annual Assistance Requested** |
| Assessment of service needs | Click here to enter text. | Click here to enter text. |
| Assistance with moving costs | $750 per family X 6 families | 4,500 |
| Case management | Click here to enter text. | Click here to enter text. |
| Child Care | $350 average per child X 10 children | 3,500 |
| Employment Assistance | 4 instances @ $251 each | 1,004 |
| Food | $300 average per family X 6 families | 1,800 |
| Housing Counseling | Click here to enter text. | Click here to enter text. |
| Legal Services | Click here to enter text. | Click here to enter text. |
| Life Skills | Click here to enter text. | Click here to enter text. |
| Mental Health Services | Click here to enter text. | Click here to enter text. |
| Outpatient Health Services | 4 instances X $250 each | 1,000 |
| Outreach Services |  | Click here to enter text. | Choose an item. |
| Substance Abuse Treatment Services | Click here to enter text. | Choose an item. |
| Transportation | Car repairs, bus tokens, gas cards, vehicle insurance, etc. $860 average per family X 6 families | 5,160 |
| Utility Deposits | $200 average per family X 6 families | 1,200 |

**Sources of Leverage**

1. Leverage Detail

|  |  |  |  |
| --- | --- | --- | --- |
| Type | Contributor | Date of Commitment | Value of Commitment |
| Cash | MI Dept of Health & Human Services: Transitional Housing | 8/11/2017 | 41,979 |
| Cash | Greater Ottawa County United Way | 5/19/2017 | 2,040 |
| Cash | Agency funds: contributions & fundraising | 10/1/2018 | 4,816 |
| Inkind | Agency funds: donated household supplies, clothing, furniture, etc. | 10/1/2018 | 4,105 |
| Inkind | Ottawa County Dept of Health & Human Services | 7/2/2018 | 48,780 |