



DeKalb County  
G E O R G I A

# DeKalb Community Development Department

## FY 2023

### Continuum of Care Program Competition

This program is funded by the  
United States Department of Housing and Urban Development (HUD)

### 2023 DeKalb Pre-Application for Renewal Projects

Release Date: May 19, 2023

NOFO Pre-Application Information Meeting: May 19, 2023 - 1:00 pm.

Deadline for Electronic Submission

June 19, 2023 @ 5:00 p.m.

No applications will be accepted after the deadline.

**Michael Thurmond, CEO**

**BOARD OF COMMISSIONERS**

Robert Patrick, District 1; Jeff Rader, District 2;

Larry Johnson, District 3; Steve Bradshaw, District 4; Mereda Johnson, District 5;

Ted Terry, District 6; Lorraine Cochran Johnson, Super District 7

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DeKalb County  
GEORGIA

HUD Continuum of Care Program Competition

2023 DeKalb Pre-Application for Renewal CoC Projects

Project Type: PSH  S+C  RRH  RRH-DV  Joint TH + RRH

A. Applicant Information – 25 points

1. Applicant (Agency Name) \_\_\_\_\_

2. Project Information

a. Project Name as Shown on GIW	
b. Current Project Grant #	
c. Grant Amount	
c. Start and End Date of Current CoC Award	<input type="text"/> To <input type="text"/>
d. Are you requesting a change in funding level for the 2023 cycle	<input type="checkbox"/> Yes, due to unused funding <input type="checkbox"/> No <input type="checkbox"/> Yes, due to expansion <input type="checkbox"/> No <i>Note: If applying for an expansion a new project application may also be required</i>
e. Are you requesting to transition to another project type for the 2023 cycle?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> <li><i>Note: To be eligible to receive a transition grant, the renewal project applicant must have the consent of the DeKalb CoC Collaborative Applicant.</i></li> </ul>	

3. Please provide a clear and concise project description of the renewal project as currently operated. The description should include the project type, target population(s) served, and outcomes achieved to date (i.e. # currently served, housed, etc.). Include information on housing barriers faced by target population, particularly persons of different races and ethnicities, and (d) what steps have or will be taken to address or mitigate the identified barriers.
4. (a) Did you expend all funds allocated in the FY2021 CoC Competition award? Yes  No   
 If not, please explain. (b) Were any funds recaptured by HUD from the most recently expired grant term related to this renewal project? Yes  No   
 If yes, indicate the amount of recaptured funds? \_\_\_\_\_ Please explain.  
 (c) Do you expect to expend all funds allocated in the 2022 CoC Competition Award? Yes  No   
 (d) What amount of funds are available for reallocation in the FY23 Competition \$ \_\_\_\_\_  
 Would outcomes and level of service be affected with adjusted funding level? Please explain if applicable.
5. In the chart below, please indicate (a) the total grant award for each CoC Competition Year and (b) the amount of funds expended at the expiration of each grant period. Please attach copies of your program grant's ELOCCS for each year (**Exhibit E**).

NOFO Competition Year	Amount Awarded	Amount Expended	% Expended
FY2021			
FY2020			
FY2019			

6. (a) What was the date of your most recent HUD monitoring visit? \_\_\_\_\_. If applicable, please attach a copy of your most recent monitoring report, along with any responses, and corrective action documentation, if applicable. (**Exhibit F**).  
 (b) Please attach most recent (1) HUD Grant Agreement, (2) Amendments and (3) Technical Submission which fully describe your current project (**Exhibit H**)
7. Does the applicant have open (unresolved) monitoring findings or concerns from any governmental or foundation funder?  Yes  No  
 If yes, list findings or concerns and remediation activities.

Finding/Concern	Remediation Activities	Date Remediation Completed	Date Accepted by HUD/Funder

8. List the names of representatives from your organization who participated in CoC activities as shown below:

a. Attended CoC Meetings

Representative Name	Date of CoC Meeting

b. Participated in the CoC's 2023 Point in Time Count  Yes  No

Representative Name	January 26, 2023

c. Participated in the CoC's 2023 HIC Count  Yes  No

Date(s) HIC Data Submitted to CoC

d. Served on a CoC Board or Committee (provide the reps name and the name of the Committee)

Representative Name	CoC Board/Committee/Workgroup

e. Participated in other CoC activities (provide the name of the representative and the date of the activity including Case Managers Meetings, Trainings, etc.)

Representative Name	CoC Activity	Date Attended

9. If your organization was not represented in the above CoC activities, please explain why?

10. (a) Describe how your organization participates in the DeKalb CoC Coordinated Entry System? Answer may include referrals, enrollment, etc. (b) are there any barriers to CE participation?

11. All applicants must submit a copy of the most recent audit your agency has received, including the management letter (**Exhibit C**). If the letter identifies any findings or concerns, provide any copies of any subsequent correspondence and/or explain agency plan of action to address these items. If your agency does not have an audit, please provide the most recent financial statement.
12. If the audit in **Exhibit C** is older than 12 months, provide an explanation of delays in audit and date when pending current audit is expected to be issued.
13. Has your agency been required to repay Federal Funds within the last three years?  
 Yes     No    If yes, please explain.
14. Does the agency have any current outstanding federal debt?    No  Yes   
 If yes, please explain.

## B. Project Information - 25 Points

### 1. Project Type - Include information based on the most recent APR

Check Type Housing	Housing Type	Check Pop Served	Population Served	Check all subpop that apply	Subpopulations	% of clients served in each category
	Permanent Supportive Housing		Individuals		Chronic Homeless	
	Facility Based		Households with Children		DV Survivors	
	Scattered Site		Unaccompanied Youth		Trafficking Victims	
	Rapid Rehousing		Veterans		Substance Abuse	
	Joint Transitional Housing/Rapid Rehousing				Mentally Ill	
					HIV/Aids	
					Households with Children	
					Veterans	
					Unaccompanied Youth	
					Other – Specify	

4. Is your project dedicated to serving the chronically homeless? Yes  No

In accordance with HUD Prioritization standards for PSH, does the project serve non-chronic homeless populations? Yes  No

5. Indicate whether any of the following approaches apply to your project

Housing First/Low Barrier Approach	Answer		Comments
	Yes	No	
a. Does the project accept all clients regardless of current substance use or history of use?			
b. Does the project accept clients who are diagnosed with or show symptoms of mental illness			
c. Does the project accept clients regardless of criminal history?			
d. Does the project accept clients regardless of income or financial resources?			
e. Does the project use a harm-reduction model for drugs and/or alcohol use/treatment			

7. Indicate whether any of the following apply to your project

Will the project terminate clients from housing under the following circumstances?	Answer	
	Yes	No
f. Failure to participate in supportive services?		
g. Failure to make progress on a service plan?		
h. Loss of income or failure to gain/increase income?		
i. Being a victim of domestic violence?		
j. Any other activity not typically covered in a lease agreement?		

7. Describe Agency methods used to monitor/ensure Housing First compliance.

### C. System Performance & Service Capacity – 25 Points

1. Please select a project type and complete the charts below showing housing stability achieved through exits to permanent housing, increased income and coordination with mainstream benefits. These same objective performance measures are also utilized as a metric that correlates to improved safety for survivors of domestic violence. **Please provide an explanation if there are significant changes between the previous and most recent APR submitted to HUD or data generated from a comparable database.**

System Performance - Housing Stability	Metric	Number reflected in the previous APR Submitted to HUD	Number reflected in the most recent APR Submitted to HUD	% Change	Comment/Explanation	
	<b>COMPLETE THE Q1-CHART BELOW BASED ON PROJECT TYPE OF RENEWAL PROJECT</b>					
	<b>Q1 - Transitional Housing</b>					
	# of Clients Contracted to Serve					
	a. # clients served in Transitional Housing					
	b. # served that exited Transitional Housing					
	c. How many exited to Permanent Housing					
	Percentage of Successful Exits (Calculate: c divided by a)					
	<b>Q1 - Permanent Supportive Housing</b>					
	# of Clients Contracted to Serve					
a. # clients served in Permanent Supportive Housing						
b. How many exited (Leavers)						
c. How many exited to other Permanent Housing						
d. How many remained (Stayers)						
Percentage of Successful PSH Exits/Retention (Calculate: # Exited to PH plus # Remains divided by Total Exits for the Period)						

<b>Q1 - Rapid Rehousing/ RRH-DV</b>						
Metric	Number reflected in the previous APR Submitted to HUD	Number reflected in the most recent APR Submitted to HUD	% Change	Comment/Explanation		
# of Clients Contracted to Serve						
a. # clients served in Rapid Re-Housing or RRH-DV						
b. How many exited						
c. How many exited to Permanent Housing						
d. Percentage of Successful Exits (Calculate c/a)						
<b>Increased Income</b>	Metric	Number reflected in the previous APR Submitted to HUD	Number reflected in the most recent APR Submitted to HUD	% Change	Comment/Explanation	
	<b>All Project Types: Transitional Housing, Permanent Supportive Housing and Rapid ReHousing/RRH-DV</b>					
	Of those who exited, # of participants that increased their income from employment from entry date to program exit date					
	Of those who exited, # of participants that increased their income from sources other than employment from entry date to program exit date					
	Of those who exited the program, # with zero income from any source					
<b>Mainstream</b>	# of participants that obtained noncash program benefits from program entry date to exit date. (SNAPS, TANF, Insurance, etc.)					





**2. Bed/Unit Inventory and Utilization**

- a. # Beds Dedicated to Chronically Homeless (HIC) \_\_\_\_\_  
# Beds Dedicated to Youth \_\_\_\_\_  
# Bed Dedicated to Veterans \_\_\_\_\_
- b. Total Number of Units/Beds under Contract (HIC): \_\_\_\_\_
- c. Total Number of Units being utilized on January 26, 2023 (Point in Time Count Night)
- d. If utilization rate is below 80%, please explain.

## Certification

All information in this application is true and correct. The governing body of the applicant has duly authorized this document and the applicant will comply with the following:

- The applicant acknowledges that this pre-application is submitted as part of the local CoC NOFO Competition for FY23. All applications will be reviewed, rated and ranked using objective scoring criteria. Additional information may be requested pending HUD release of the FY2023 CoC NOFO Competition Announcement.
- The applicant agrees to participate fully in the DeKalb CoC coordinated entry system.
- The applicant agrees to participate fully with this community's Homeless Management Information System (HMIS) (ClientTrack).
- The applicant agrees to comply with all Administrative, National and Department Policy Requirements and Terms for HUD Financial Assistance Awards

Please Print or Type

**Name:** \_\_\_\_\_  
**Title:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

Original Signature of Authorized Representative:

\_\_\_\_\_

\_\_\_\_\_  
Date

**DeKalb County Homeless Collaborative Continuum of Care  
2023 Renewal Project Application Objective Review and Rating Criteria**

**Applicant Name/Renewal Project # :** \_\_\_\_\_ **Reviewer** \_\_\_\_\_  
**Score** \_\_\_\_\_

DATA SOURCE	MEASURE	SCORING	POINT RANGE
<b>Section A</b> App Q3	Clear and concise description of scope of renewal project  ...Project Type ...Target Population and Outcomes Achieved ...Barriers and Strategies to address	Yes No	2 0 1 1 1
App Q5 eLOCCS Grant Detail; Q Spending Rpt	Expenditure of Funds by the Expiration of Current Grant Period (FY 2021) (Scoring: expend 100% of funds – receive 5 points, 80% of funds, receive 3 points; 70% = 2 points, 50% or less = 0)	100% 80% 70% 50% or less	5 points 3 points 2 points 0 points
App Q5  eLOCCS Grant Detail 2020	<b>Unexpended</b> Funds in the Previous Grant Years (2020)  (Scoring: Unexpended funds represent 20% or less of total award = 5 points 70% = 2 points, 50% or less = 0)	20% or less 30% 40% 50% or more	5 points 3 points 2 points 0 points
App Q7	Agency has open monitoring findings or concerns	No Yes	2 points 0 points
App Q8	Agency representation/attendance at CoC Meetings in the past year	3 meetings 2 meetings 1 meeting 0 meetings	4 points 3 points 2 points 1 point
App Q8c	Participated in CoC’s 2023 HIC count (Response includes representative and submission date)	Yes No	1 point 0 points
App Q8d	Served on a CoC committee in the past year (e.g., CoC Board, Committees, Subcommittees, Workgroups, etc.)	Yes No	1 point 0 points
App Q8e	Participated in other CoC activities (e.g., Case Managers Meetings, Training, Homeless Initiatives)	Yes No	1 point 0 points
App Q10	Project participated in coordinated entry in compliance with the CoCs Coordinated Entry policies and procedures;	Yes No	1 point 0 points
<b>Section A: Applicant Information</b>		<b>Total Points Section A (max 25 points)</b>	

<b>Section B</b> App Q1	Subpopulations Served (Max 13 points)	CH DV Substance Abuse Mentally Ill HIV/Aids HH/Children Veterans Youth	2 points 2 points 1 point 1 point 2 points 2 points 1 point 2 point
App Q4	Project is 100% dedicated to serving the chronically homeless, is Dedicated Plus or prioritizes the chronically homeless (if yes to either question award full points)	Yes No	2 points 0 points
App Q5 App Q7	Project is using Housing First principles including no preconditions or barriers to entry except as required by regulation or funding source, and the provision of necessary supports to maintain housing and prevent a return to homelessness, which may include participant requirements.	Yes No	1 points 0 points
App Q5a	Project accepts all clients regardless of substance abuse / use	Yes No	1 point 0 points
App Q5b	Project accepts clients who are diagnosed with / show symptoms of mental illness	Yes No	1 point 0 points
App Q5c	Project accepts clients regardless of criminal history	Yes No	1 point 0 points
App Q5d	Project accepts clients regardless of income or financial resources	Yes No	1 point 0 points
App Q5e	Project uses evidence based/harm-reduction model for drugs and/or alcohol use	Yes No	1 point 0 points
App Q7	Project monitors to ensure Housing First compliance	Yes No	4 points 0 points
<b>Section B – Project Information</b>		<b>Total Points Section B (max 25 points)</b>	

<b>Section C</b> <b>App Q1 TH</b> (TH, and Jt TH/RRH)  <b>Rate Q1c</b>	Transitional Housing (TH or Joint TH-RRH) Successful exits to permanent housing	80 to 100% 60 to 79% 50 to 59% <50%	10 points 8 points 5 points 0 points
<b>App Q1 PSH</b>  <b>Rate Q1d and Q2B.</b> Enter the Highest Score for either A or B for a maximum PSH score of 10 pts.	A. Permanent Supportive Housing (PSH) Successful Retention in Permanent Supportive Housing (Divide total number retained by total number served to calculate %) Enter % _____	80 to 100% 60 to 79% 50 to 59% <50%	10 points 8 points 5 points 0 points
	B. Permanent Supportive Housing (PSH) Successful Exits to Other Permanent Housing (Divide total number exited to other permanent housing by total number exited to calculate%) Enter % _____	80 to 100% 60 to 79% 50 to 59% <50%	10 points 8 points 5 points 0 points
<b>App Q1 RRH and RRH -DV</b> <b>Rate Q1c</b>	Rapid Rehousing Successful Exits to Permanent Housing	80 to 100% 60 to 79% 50 to 59% <50%	10 points 8 points 5 points 0 points
<b>Section C: System Performance and Service Capacity</b>		<b>Total Points Section C (max 30 pts)</b>	
<b>SUBTOTAL – PRE- APPLICATION SECTIONS A, B AND C</b> <b>Maximum 80 points</b>			

<b>Quantitative APR Performance Review</b> <b>(Do not Complete – To be Completed by the Collaborative Applicant)</b> <b>NOFO APR HMIS Data Score Card: Data Source – SAGE APR CSV v5.1</b>			
APR DQ Sections 1, 2 and 6	<b>Data Quality (Accuracy, Completeness, Timeliness)</b> % of client data with missing elements and/or entries reflecting “don’t know or refused”	0-5% 6-20% >20%	5 points 2 points 0 points
App Q1 (Housing Inventory Count – HIC)	<b>Bed Utilization</b> Bed/Unit Utilization Rate**	90 to 100% 80 to 89% 60 to 79% <60%	5 points 3 points 1 point 0 points
APR Q19a1	<b>Increased Earned Income</b> Stayers with increased earned income	Yes No	5 points 0 points
APR Q19a1	<b>Increased Other Income</b> Stayers with increased other income	>20% 10-20% 1-9% 0%	5 points 3 points 1 point 0 points
APR Q19a2	<b>Increased Earned Income</b> Leavers with increased earned income	Yes No	5 points 0 points
APR Q19a2	<b>Increased Other Income</b> Leavers with increased other income	>21% 10-20% 1-9% 0%	5 points 3 points 1 point 0 points
APR Q20b	<b>Non-Cash Benefits Sources Leavers</b> % 1+ sources of non-cash benefits upon exit	75 to 100% 50 to 74% <50%	5 points 3 points 1 points
APR Q20b	<b>Non-Cash Benefits Sources Stayers</b> % 1+ sources of non-cash benefits upon exit	75 to 100% 50 to 74% <50%	5 points 3 points 1 point
APR Q22c	<b>Rapid Rehousing Projects Only</b> <b>Length of Time between Project Start Date and Housing Move in Date</b>	7 days or less 8 – 30 days 31 – 60 days 61 -90 days 91 – 180 days	5 points 3 points 2 points 1 point 0 points
Q23a	<b>Successful Exits</b> <b>Total percentage of persons exiting project to positive (permanent) housing destinations</b>	80-100% 60-79% 59-60% 50-59% < 49.99%	5 points 3 points 2 points 1 point 0 points
		<b>Total APR Maximum 50 Points</b>	

SAGE HMIS /ClientTrack	<b>Coordinated Entry Compliance</b> <b>% of total new project enrollments referred through CE</b>	80 – 100% 50 – 79% 50%>	25 points 15 points 7 points
		<b>Total CE Maximum 25 Points</b>	<b>25 Points</b>
<b>TOTAL – RENEWAL APPLICATION SECTIONS A, B AND C + APR/CE REVIEW</b>  <b>Maximum Score 150 points</b>			