

Homelessness-Related Projects Threshold Criteria Checklist

<p>Homelessness-related projects only</p> <p>If an applicant project or program plans to serve people experiencing homelessness, the portion of the project that serves that population must meet the threshold criteria set out in the FY 2020-2021 Funding Policies to be recognized as serving this population.</p> <p>Responses to the questions below must be reviewed and approved by staff in the Homeless Services division of the Commission to determine if the response meets threshold requirements prior to application submittal. Applicant must submit this Homelessness-related Project Threshold Criteria Checklist, with signature, at the time of application.</p>	
Applicant Name:	
Proposed Project/Program Name:	
<p>Overview of Proposed Program/Project (limit 150 words)</p> <p><i>Example Text: [Applicant Name] is seeking \$ _____ in Capital Projects funding for [describe eligible activity – e.g. site acquisition, predevelopment, environmental review, site improvements, down payment assistance, tenant based rental assistance] for [Program/Project Name], which has a total project cost of \$ _____. The project is anticipated to start [describe activity] on [insert date] and be completed by [insert date]. The project will provide [## anticipated units produced, facilities produced, housing rehabilitation loans made], serving approximately ## low- /very low- /extremely-low-income households.</i></p>	
Program/Project Manager (Primary Contact)	Name, title:
	Phone:
	Email:
<p>To meet the threshold criteria, the proposed project must significantly impact HEARTH system-wide performance measures. Please respond to the questions below to identify the program or project's performance measures:</p>	<p>Is the applicant/operator currently operating a similar project to that being proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If the answer above is yes, please answer the questions in the three sections below using your project's performance during the last fiscal year.</p> <p>IF the answer above is no, please enter projections for the proposed project in the three sections below.</p>

<p>Increasing exits from homelessness: Please enter the number of individuals anticipated to be served by the proposed project and your projections to achieve the following goals from the date of project completion on an annual basis:</p>	<p>Projected number of people experiencing homelessness to be served by the project annually: _____</p> <p>Number of unsheltered persons placed into temporary housing (shelter or transitional housing) _____</p> <p>Number of temporary housing participants exiting to permanent housing _____</p>
<p>Decrease the overall length of homeless episodes: Enter the number anticipated to achieve this goal from the date of project completion on an annual basis.</p>	<p>Enter the average number of days participants stay in your shelter or housing project _____</p> <p>Enter the average number of days chronically homeless participants stay in your shelter: _____</p>
<p><i>(For permanent housing projects only)</i> Minimize returns to homelessness from permanent housing by supporting retention of permanent housing: Enter the anticipated number who will achieve this goal from the date of project completion on an annual basis.</p>	<p>State the number of program participants who will exit your permanent housing project annually: _____</p> <p>State the number of program participants who will exit your program to another permanent housing destination: _____</p>
<p>To meet the threshold criteria, the project must adhere to the principles of Housing First and participate in Coordinated Entry. For homeless-dedicated units, 100% of referrals must come from Coordinated Entry.</p> <p>For information on Coordinated Entry, visit this website: http://sonomacounty.ca.gov/CDC/Coordinated-Entry-System/</p> <p>Please respond to the questions below to demonstrate how the project complies:</p>	
<p>If a homeless-serving housing project, will the units dedicated to serving people experiencing homelessness accept 100% of referrals from Coordinated Entry?</p> <p>The proposed project will provide Coordinated Entry (CE) access points.</p> <p>The proposed project is designed using the principles of Housing First and operates with lowered barriers to entry (e.g., no income or sobriety requirements)</p> <p>Please list the last two times that the applicant (or partner service provider, if applicable) completed the Housing First Self-Assessment and indicate your score:</p> <p>A link to the Self-Assessment Tool is here: https://www.hudexchange.info/resource/5294/housing-first-assessment-tool/</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date #1: _____ Score: _____</p> <p>Date #2: _____ Score: _____</p>

What are the applicant's plans for improvement in adhering to Housing First principles?	
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I have reviewed the above referenced project description and checklist and confirm that it meets the threshold criteria for homelessness-related projects applying for Commission funds for capital projects.

Chuck Mottern, Homeless Services Funding Coordinator

Date

Submit this form for review and approval by Chuck Mottern: chuck.mottern@sonoma-county.org, 707-565-7554