FY22 HUD COC PROGRAM COMPETITION
NEW PROJECT APPLICATION

APPLICANT PROFILE	
Legal Name of Applicant	Northwest Michigan Supportive Housing (NMSH)
Project Name	Rural Chronic
Project Start Date	September 1, 2023
Contact Person	Becca Binder
Title	Executive Director
Address	3588 Veterans Drive, Suite 1, Traverse City, MI 49686
Email	becca@nmshousing.org
Phone	231-929-1309

Check one:

☐ Rapid Re-Housing

☐ Joint Transitional Housing-Rapid Re-Housing

☒ Permanent Supportive Housing

☐ Supportive Services Only: Coordinated Entry (SSO: CE)

☐ Supportive Services Only (SSO)

☐ New Construction, Rehab or Acquisition

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 applicant's board of directors as of the date indicated.*

Name: Becca Binder	Title: Executive Director
Date of Applicant Authorization: 9/3/2022	

HUD SPECIAL NOFO NEW APPLICATION

ELIGIBILITY THRESHOLDS

Basic HUD Eligibility Thresholds must be satisfied before the CoC may consider a NEW project application for funding.

1. Please indicate by checking the boxes if the applicant has any of the following:

a. Outstanding obligation to HUD that is in arrears for which a payment schedule has not been agreed upon;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

b. Debarments and/or Suspensions – In accordance with 2 CFR 24, no award of federal funds may be made to debarred or suspended applicants, or those proposed to be debarred or suspended from doing business with the federal government;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

c. Unresolved monitoring findings or outstanding (agency or HUD) audit findings;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

d. Inadequate financial management or accounting practices within the past three years;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

e. Evidence of untimely expenditures on prior award;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

f. Major capacity issues that have significantly impacted the operation of a project and its performance within the past three years;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

g. Issues impacting the timeliness in reimbursing subrecipients for eligible costs;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

h. Served ineligible persons, expended funds on ineligible costs, or failed to expend funds within statutorily established timeframes within the past three years;
☐ Yes   ☒ No   If yes, please explain: Click here to enter text.

2. Does applicant have a financial management system that meets federal standards as described at 2 CFR 200.302? ;
☒ Yes   ☐ No   If yes, please describe: Click here to enter text.

3. Does the applicant employ or contract services of an accountant who is familiar with Generally Accepted Accounting Principles (GAAP)?
☒ Yes   ☐ No

4. Does the applicant obtain an annual audit by an independent certified public accountant?
☒ Yes   ☐ No

5. Has your organization been monitored by HUD in the past three (3) years? Yes
   If yes, include as attachments: Monitoring report from HUD, applicant's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.
   If no, reference most recent monitoring by an entity other than HUD for federal or state funding (ESG, CDBG, etc) and include as attachments: Monitoring report, applicant's response to any findings, documentation from the entity that finding or concern has been satisfied, and any other relevant documentation.

General Project Information

1a. Provide a narrative describing the identified need and scope of the project. Responses should detail the project type, goals of the project, and how households will be served within the project. (Answer must satisfy requirements in the NOFO for their project type.)

This project would provide critically needed PSH to 6 chronically homeless households throughout the Greater Grand Traverse region. Households would be identified through the CES prioritization process, be experiencing literal homelessness, and have a diagnosed mental illness. This project would serve clients using a Housing First approach and NMSH's long standing relationship with area landlords will allow rentals/housing to be secured using leasing dollars. Supportive services would be delivered using a client-centered approach, utilizing resources such as housing-based case management and OrgCode training and related-materials. Additionally, clients would be supported by staff who have been trained in harm reduction, trauma informed care, suicide prevention, and motivational interviewing. Furthermore, clients would receive services such as budget counseling, home maintenance, self-care, and life skills with a focus on retaining housing, increasing their independence, and graduating clients to some form of independent living, if possible.

Additionally, services to reach intended outcomes include warm transfers with clients and referring agencies, partnerships with local organizations to coordinate donations of household items, and linkages to community health programs (i.e., Community Connections, CMH ACT, Traverse Health Clinic) to ensure client stability and success in housing. When a household has reached a level of independence in which it no longer requires case management services, the project will collaborate with the MSHDA Moving Up program to graduate clients onto a Housing Choice Voucher, freeing up leasing and supportive service dollars. This maximizes project utilization and allows for the next household in need of PSH to be targeted, enrolled, housed, and supported. On average, NMSH aims to graduate around 7% of clients per year to allow fluidity within the program, ultimately opening program slots for incoming clients in need.

1b. Using the chart below, outline county or counties, or trust land or reservations to be served by the project and the number of households planned for service.

County/Tribal Nation	Planned Households
Grand Traverse County	6
Click or tap here to enter text.	Click here to enter text.
Click or tap here to enter text.	Click here to enter text.
Click or tap here to enter text.	Click here to enter text.
Click or tap here to enter text.	Click here to enter text.

*Attach additional forms as needed to list all areas.

** Projects intending to locate project based housing projects on trust land or reservations must have a formal resolution from the Tribe authorizing Continuum of Care funding activities in their jurisdiction.

1c. Why is this project necessary? Detail the identified need based on relevant data or process information, HUD guidance, or informed consultation. (*500 word limit*)

Retention rates within the community, including outcomes from NMSH's PSH programs, continue to exceed the proposed system performance measure benchmarks with PSH retention staying steady between 98%-99%. As of the most recent quarterly performance scorecard for NMSH's other chronic project, there was 100% retention and successful housing placement from PSH and zero returns to homelessness.

Currently there are only three scattered-site PSH projects in the five-county area however the 2021 Annual Homeless Count indicates a need for additional PSH for the 50+ chronically homeless individuals still experiencing homelessness. Ending homelessness in the region requires PSH leasing and supportive service dollars to care for our individuals and families requiring intense and frequent, on-going supports.

1d. Complete the chart with the number of units within each project type

	Project Type	Total Number
Units	PSH D+	6
Beds	PSH D+	6
Second only necessary for Joint TH/RRH Projects		
Units	Choose an item.	Click here to enter text.
Beds	Choose an item.	Click here to enter text.

2a. According to HUD System Performance Measures, it is necessary for households to increase employment and/or income while in housing. Describe how this project will contribute to the success of these measures within the Continuum of Care. *(500 word limit)*

NMSH is dedicated to ensuring clients receive the services they need to prevent a return to homelessness which include increasing their income and benefits and improving their overall health. Increased income, benefits, and improved health are not only measurements of successful program performance but a critical component to program participants reaching their greatest level of independence. NMSH's current program participants, with support of case management staff, have increased their income by 43% in the first three quarters of 2022. NMSH staff is trained in accessing state and federal benefits such as food stamps, social security/disability income, temporary assistance for needy families, women infants and children, and state disability assistance. NMSH staff also works with local workforce development agencies such as Michigan Works, Grand Traverse Industries, and Michigan Rehabilitation Services. These measurements will be tracked on a quarterly basis to ensure

continued improvement in accessing employment and/or income for participants at project entry, annual assessment, and/or project exit.

2b. How will this project reduce the length of time a household is homeless by rapidly securing and moving the household into housing? For project/site-based housing projects, describe the process of identifying and obtaining necessary documentation quickly. For scattered site/private rental market housing projects, describe the agencies outreach and relationship with landlords and experience in locating available housing. *(500 word limit)*

This project will serve clients using a Housing First approach and NMSH's long standing relationship with area landlords allow rentals/housing to be secured using rental assistance and leasing dollars. NMSH is the sole scattered-site permanent supportive housing provider in the five-county service area. In addition to owning 6 properties, totaling 28 units, and renting 38 units from 27 private landlords, NMSH has existing MOU's with six properties totaling 18 units. NMSH staff at all levels are trained in landlord recruitment and outreach efforts are continuous. Whether a private landlord is listing a rental unit or a new housing development is being built, NMSH staff is proactive in engaging landlords. NMSH has a high success rate of landlord retention and a selection of landlord advocates to share peer-to-peer experiences in working with the project. In regard to NMSH's Housing First efforts, staff participates collaboratively with the coordinated entry system and receives direct referrals through the prioritization process. Once a verification of homelessness is received from the referring agency NMSH can move forward with enrollment of a client. If a verification of disability is not available at time of referral, NMSH staff will work to obtain one within the allowed 60 days of entry into program. No alternative forms or documentation are needed upon entry into NMSH's projects. Rental units typically have been secured at time of referral, so clients move directly to lease signing and move-in, then begin working with housing-based case management staff.

3. Is the project dedicated to serve priority populations (Veterans, Chronically Homeless, Families, Youth, Domestic Violence Survivors)? Enter the number of units dedicated for each population at the point of project entry and at unit turnover (Dedicated Plus for chronically homeless only).

	Number of Units	
	Dedicated	Dedicated Plus
Veterans	Click here to enter text.	
Chronically Homeless	Click here to enter text.	6
Families	Click here to enter text.	
Youth	Click here to enter text.	
Domestic Violence	Click here to enter text.	

4. Does this project have any subrecipients? If so, please list (1) name of each subrecipient, (2) amount of funding allocated to each subrecipient, (3) geographic area of service, and (4) activities completed by each subrecipient. Attach additional forms as needed.

There are no subrecipients for this project.

5. Low Barrier

Which of the following will prohibit potential households from being accepted into this project?	
Having too little or not enough income	☐
Active substance use or history of substance abuse	☐
Having a criminal record (other than for state-mandated restrictions)	☐
Domestic violence (requiring survivor to take specific actions or demonstrate distance from assailant)	☐
None of the above	☒

Please briefly explain your response. This project will follow the Housing First model and supportive services are delivered using a client-centered approach, utilizing resources such as housing-based case management and OrgCode training and related-materials. Additionally, clients will be supported by staff who have been trained in harm reduction, trauma informed care, suicide prevention, and motivational interviewing.

6. Housing First

Which of the following criteria would be used to exit households from this project?	
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	☐
Failure to participate in any other activity not typically covered in a lease agreement	☐
None of the above	☒

Please briefly explain your response. This project recognizes the challenges of the population served and ensures that services are not dependent on success. A service plan is ever changing so that it meets the true and accurate needs of the client and adapts to ensure that a return to homelessness in prevented.

7. All recipients of HUD CoC Program funding are required to participate in the CoC Coordinated Entry System. How does the project plan to take 100% of all referrals through the Coordinated Entry System if housing? Or work with connecting all participants to CE if an SSO? *(500 word limit)*

NMSH is committed to ending homelessness in the community by making it rare, brief, and one-time. In doing so, all NMSH projects are also committed to receiving 100% of referrals from the Coordinated Entry System and prioritize referrals for chronically homeless individuals and families. NMSH staff communicates with the prioritization group when there is an opening- or upcoming opening- in NMSH's program and may begin receiving referrals at that time. NMSH will work with the CES if a referral cannot be received through NMSH and understands clients request for anonymity.

8. How will this project adapt prioritization of households for this project to align with the Continuum of Care Prioritization policy? Are there any anticipated areas where the project would not be able to follow the CoC Prioritization policy? If an SSO applicant, how will you prioritize those accepted into the project? (*500 word limit*)

This project will receive all referrals from the Coordinated Entry System which is aligned with the CoC prioritization policy. In 2016, all NMSH projects adapted prioritization of households based on acuity, chronicity, and prioritized subpopulations. NMSH projects are present for bi-weekly by-name prioritization meetings in which chronically homeless individuals and families are referred to the project. NMSH and CoC partners have prioritized permanent supportive housing and chronically homeless, so all efforts made on a collaborative level ensure project participants are housed with a sense of urgency to reduce length of time homeless and ultimately preventing a return to homelessness.

9. Describe the process in place to ensure that the project, if awarded by HUD, is fully expended by the end of the project year and that drawdowns from the electronic Line of Credit Control System (eLOCCS) are completed on a quarterly basis. *(500 word limit)*

If the project is awarded by HUD, then NMSH will immediately begin securing rental units and working with the prioritization group to identify referrals so that as soon as the project start begins NMSH can move clients into homes. NMSH's accounting team provides monthly invoices for all HUD grants to the Executive Director so drawdowns can be completely immediately. Historically, NMSH conducts eLOCCS drawdowns on all HUD grants on a monthly basis to ensure healthy financial practices and cash flow.

10. Will the project have a Continuous Quality Improvement plan or process in accordance with the CoC Data and Standards Committee? If yes, describe. *(500 word limit)*

NMSH was a key participant in creating the Continuous Quality Improvement plan with the CoC and has adapted the same process model for the organization. The primary focus of the plan is data quality, program capacity, and program performance. NMSH staff at all levels are participants in the CoC workgroups which are dedicated to pooling resources and expertise to ensure homelessness is rare, brief, and one-time. NMSH staff participates in the following workgroups and their subgroups: Housing and Resources, Data and Standards, Communication and Marketing, Steering Committee, and Executive Committee.

NMSH's projects focused heavily during the last 12 months on improving program outcomes. Staff met with the HMIS System Administrator to clean up outstanding data quality issues and implement new strategies to ensure clean data quality as well as setting up a process to reach the baseline goals in line with HUD's system performance measures. Areas of improvement were made in data completeness, APR timeliness, project entry and exit timeliness, and active eROI's. Additionally, a large emphasis was placed on increasing income and benefit growth for program participants. NMSH's projects made continuous improvements as demonstrated in the quarterly performance scorecards and ranked in the top 3 in all COC programing. To reach these goals NMSH Agency Administrators implemented standing weekly meetings with the HMIS System Administrator to focus on areas of improvement related to data quality and program performance. Since the data quality and performance outcomes have improved the administrators now meet monthly or on an as needed basis to address areas of concern or discuss

ways to improve program outcomes. With true and accurate data, NMSH can make informed decisions on the needs of the organization. This data ultimately supports the need for greater scattered-site PSH services in the community and an expansion of NMSH's program capacity.

11. Describe the agency's orientation and ongoing training for project staff. (*500 word limit*)

NMSH has a detailed orientation process and opportunities for ongoing training. NMSH has an Operations Manual which includes the evidence-based practices for permanent supportive housing. It's the "how-to" for what NMSH does. Even though the steps, methods, and documents are captured in the manual, it represents only the current evolution of the work. It is our belief that every aspect of what we do can be improved, and it is our intent to support continuous improvement as a service provider to our clients, as an organization in partnership with others in the community, and as an employer. The manual is but one tool that captures our work, and it refers to other resources which are listed below. It also links to documents and forms that support every step of the work. As steps are improved, documents and forms will change, and the manual will change.

In addition to the Operations Manual, all new hires are provided training documents (which include New Hire Paperwork [including a welcome letter and history of organization], Personnel Policies, NMSH Confidentiality and Code of Ethics, Payment Request Forms/Mileage Requests, Commonly Used Acronym List, Case Manager Policy and Procedures, SPDAT Org Code Information, HMIS Set Up [ServicePoint/ HMIS New User Training Guide and Sample HMIS User Policy], NMSH Grants, and NMSH Owned Properties and Landlord Properties). Orientation includes reporting requirements, recertifications, reviews of MOU's, Coordinated Entry Referral process, Homeless Response System, project enrollment, conditions regarding evictions, program terminations, and re-entry.

Orientation and on-going trainings include, but are not limited to, Core Components of Housing-Based Case Management, Warm Transfer Process, Coordinated Entry Prioritization, Racial Equity, Implicit Bias, Trauma-Informed Care, and Motivational Interviewing.

12. How will this project ensure alignment in practices with the Policy Priorities listed under II.A. (pg. 6) in the HUD Special NOFO? *(500 word limit)*

Greater Grand Traverse was identified by Michigan State Housing Development Authority (MSHDA) and Michigan Department of Health and Human Services (MDHHS) for its lack of affordable housing. This housing vacuum has created a significant obstacle to improving and maintaining health and wellness for its citizens. Those experiencing chronic homelessness are at the greatest risk among this population. NMSH partnered with MSHDA and MDHHS to identify the chronically homeless individuals and families who are over utilizing the emergency room services and have high hospital admissions. This program provided an opportunity to offer housing and support services from a housing first approach to this population with the goal to reduce unsheltered homelessness, unnecessary medical services, and improve their overall health. Individuals who are homeless are predisposed to poor health outcomes resulting from living conditions, trauma, food insecurity, and instability. The intended outcome was to reduce the overall cost to the community for those who are chronically homeless and unnecessarily utilizing emergency services. High costs for people experiencing homelessness fall primarily on our

emergency departments, jails, and psychiatric facilities. The intention of this program was to work with clients to increase their stabilization in housing and decrease the excessive- and therefore- high costs of emergency services. The people with lived experience provided assistance to service providers to identify gaps in the system and focus on areas that system performance could be improved.

13. How will this project ensure participants are able to secure and maintain medical insurance? *(500 word limit)*

If awarded the grant by HUD, 100% of the participants in this project will have medical insurance as that is a priority of NMSH's program. Typically, within the first 3-6 months from enrollment clients have access to medical insurance. All NMSH's programs prioritize access to healthcare and medical insurance and utilize annual assessments to ensure insurance in maintained.

14. How will this project prevent participants from eviction while in the project? If participants are evicted or must leave the housing unit to avoid eviction, how will the project ensure participants are not terminated from the project? *(500 word limit)*

This project works diligently to ensure that participants are not evicted from any housing unit by working as a liaison between landlords and participants to resolve any issues leading to eviction. Case managers maintain close relationships with landlords so that preventative measures are taken to avoid reaching a point of eviction. NMSH staff requests that case managers be contacted if there is an issue with lease violations, guest issues, misuse of rental unit, and/or neglect to maintain housing unit appropriately resulting in any health and safety hazards. Conditions that are considered prior to eviction are the participants connection to alternative supports such as mental health, physical health & social services. Case managers intervene and attempt to resolve any issues and if a resolve cannot be made, NMSH staff works with the landlords to request additional time to relocate the tenant to a unit without having to return to homelessness. Alternatively, in situations in which the tenant is required to vacate the unit, but the new unit is not available yet, NMSH has used community funds to secure a hotel room until the new unit is available. Under the current NMSH leadership, there have been zero client evictions since 2017.

15. Is the applicant (or potential subrecipients) a member of the NWCEH workgroups or Steering Committee? Yes

Section III: Equity Factors

16. Detail the amount and type of diversity within agency management and leadership positions. *(500 word limit)*

NMSH management and leadership is made up of people with diverse age, gender, educational background, and professional qualifications. Executive staff also encourages employment of people with lived experience, people of color, and people who identify with the LGBTQ+ population.

17. Detail the amount and type of diversity within agency Board of Directors. *(500 word limit)*

NMSH Board of Directors is made up of a group of people with diverse age, gender, educational background, and professional qualifications. The Board also prioritizes representation from people with lived experience including the LGBTQ+ population.

18. Explain how the applicant will invite and incorporate feedback from project participants. *(500 word limit)*

NMSH incorporates client-based surveys into their programming to ensure project participants can provide input and feedback regarding service delivery. Whether the feedback be received on a regular basis or at project exit, NMSH values client feedback a5
5nd uses this information gathered to make necessary changes. Additionally, a handful of program participants have been approached for participation on the People with Lived Experience and Expertise of Homelessness Advisory Group of the Northwest Michigan Coalition to End Homelessness.

19. Explain how the applicant will view data disaggregated by race, ethnicity, and gender. *(500 word limit)*

NMSH is an active participant in the Northwest Michigan Coalition to End Homelessness Data and Standards Committee where Coalition wide data disaggregated by race, ethnicity, and gender is viewed. Core demographics and quantitative data is analyzed to create an equitable development plan to guide the racial equity initiative. This ensures that the initiative is data-driven, relevant to our community served, and ultimately impactful. NMSH has adapted the same standards for internal operations and the HMIS Agency Administrator is responsible for completing data pulls so that the executive leadership and board can review the information and make data-driven decisions surrounding projects based on this data.

20. Explain how the applicant will review data and outcomes using an equity lens. *(500 word limit)*

NMSH is an active participant in the Northwest Michigan Coalition to End Homelessness Data and Standards Committee where program specific and Coalition wide data disaggregated by race, ethnicity, and gender is viewed. Core demographics and quantitative data is analyzed to create an equitable development plan to guide the racial equity initiative. This ensures that the initiative is data-driven, relevant to our community served, and ultimately impactful. NMSH has adapted the same standards for internal operations and the HMIS Agency Administrator is responsible for completing data pulls so that the executive leadership and board can review the information and make data-driven decisions surrounding projects based on this data.

21. Explain how the applicant has made specific changes to projects in order to advance equity. *(500 word limit)*

NMSH staff is committed to identifying and reducing racial and ethnic disparities within its service delivery and agency culture. Last year staff attended the NAEH offered Racial Equity Learning Series which was helpful in learning how to address disparities, specifically during COVID-19, in communities. NMSH staff also attended the CSH led Racial Trauma: Perspectives and Practices for Understanding and Healing training. NMSH staff completed the Racial Equity Applied Learning Series hosted by C4 Innovations and engaging in dialogue to effect change within NMSH's project delivery and the homeless

response system. NMSH is learning how C4 uses the collected quantitative and qualitative data from five SPARC communities to address barriers to exiting homelessness and remaining housed. NMSH is committed to ensuring equitable economic mobility, housing, criminal justice, behavioral health, and family stabilization and participating in discussions with staff, executive leadership, NMSH Board of Directors, and project participants with lived experience to reach this goal.

Project Design (Required for Rural Set Aside)

22. Does this project utilize housing subsidies or subsidized housing units not funded through the CoC or ESG Programs? If yes, will the subsidies provide at least 50% of the project's total units (for PSH) or serve at least 50% of the project's participants (for RRH)? Provide the numbers of units/participants anticipated in your answer.

NMSH owns Woodmere Ridge Apartments which are 11 units subsidized through the local PHA and four of NMSH owned properties, totaling 9 units, have tenants utilizing MSHDA Housing Choice Vouchers. As participants move into this project, NMSH will continue to utilize partnerships with MSHDA or the local PHA. Additionally, NMSH has three new set-aside partnerships with developments being built in the community which total 6 units.

23. Is this project coordinating with a healthcare provider for supportive services? If yes, what % of the total amount requested for the project will be matched by the healthcare provider services? Provide the amounts committed in your answer and attach a formal written agreement from the healthcare provider(s).

NMSH coordinates with Northern Lakes Community Mental Health for psychiatric services, targeted case management service, injection medication, crisis intervention, treatment plan development, assertive community treatment and integrated health services. 100% of the total amount requested for this project will be match by the healthcare providers services.

Applicant Experience

24. Describe the experience of the applicant (and potential subrecipients) in working with the proposed target population and in performing the activities proposed in the application. Provide concrete examples to illustrate the experience and expertise in a) working with and addressing the housing and supportive service needs of the target population; and, b) developing and implementing relevant projects and/or services. *(500 word limit)*

Northwest Michigan Supportive Housing has been providing permanent supportive housing services since 1988 and has been a HUD grantee for 15+ years. NMSH is the sole permanent supportive housing provider in the five-county service area and committed to participating in the Coordinated Entry process and well as the Housing First model. NMSH demonstrates positive outcomes from its projects and prioritizes improving healthcare, increasing income, and decreasing the likelihood of returning to

homelessness for all project participants. Due to NMSH's positive outcomes, it was chosen in 2018 to participate in a pilot program with the Michigan State Housing Development Authority(MSHDA) in which it collaborated with emergency services and the homeless response system to target high utilizers of emergency systems, place them in permanent supportive housing, connect them with healthcare providers, and ultimately track reduction in emergency service usage and appropriate use of the Where for Care model. NMSH is evidence-based in its practices and has ongoing relationships with OrgCode Consulting, Corporation for Supportive Housing, and National Alliance to End Homelessness to provide a high functioning permanent supportive housing program.

25. Describe the experience of the applicant (and potential subrecipients) in effectively utilizing federal funds. Provide concrete examples to illustrate this experience and expertise in a) managing basic organization operations including financial accounting systems; and, b) identifying and securing matching funds from a variety of sources. (*500 word limit*)

NMSH has been a HUD grantee for 15+ years and is therefore highly experienced in completing federal applications, implementing, and executing grants with varying operating dates, completing reporting requirements on all federal funds received, completing the consolidation process for federal grants, and communicating with the HUD representatives on all levels. NMSH manages the financial accounting system for HUD grant receivables and completes eLOCCS drawdowns on a monthly basis. NMSH has an MOU with a local healthcare provider which provides matching funds for grants and is also established to utilize tenant paid rent or community contribution funds as match.

26. Will all participating households served in this project be recorded in the Homeless Management Information System (HMIS) or a comparable database used by Domestic Violence service providers, in accordance with the NWCEH's Data Quality Standards?

Yes   If no, explain: Click here to enter text.

27. Describe the plan for rapid implementation of the project, documenting how the project will be ready to begin housing the first household. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award. *(500 word limit)*

If the project is awarded by HUD, then NMSH will immediately begin securing rental units and working with the prioritization group to identify referrals so that as soon as the project start begins NMSH can move clients into homes. NMSH's accounting team provides monthly invoices for all HUD grants to the Executive Director so drawdowns can be completely immediately. Historically, NMSH conducts eLOCCS drawdowns on all HUD grants on a monthly basis to ensure healthy financial practices and cash flow. Within the first 60 days after grant award, NMSH aims to have at least 50% of the project participants housed, with the remaining 50% being housed by the 120-day mark. The goal is to have all project participants housed by the first 180 days and to continue working on their housing stabilization needs.

Organizational Capacity

29. Describe the key staff positions and qualifications of individuals who will carry out the project. *(500 word limit)*

Housing-based case manager positions will execute the following essential functions:

1. Provide strengths based, client-centered housing-focused case management to individuals and families exiting homelessness and entering Permanent Supportive Housing through NMSH. The housing support services are conducted in-home and may include development of a crisis plan, a guest policy, budgeting, linkage, and referral to other applicable community resources and supports, as well as housing related goal development. The Housing Based Case Manager will utilize the model of housing-based case management and best practices as outlined by Org Code. The Housing Based Case Manager will adhere to a housing first model of housing and supportive services.

2. Create a strengths-based housing plan to assist the tenant in maintaining Permanent Supportive Housing placement. The Housing Based Case Manager will assist tenants in creating goals and setting up a network of resources that will help them to maintain permanent housing. Resources may include but are not limited to: DHHS, Community Mental Health services, Michigan Works!, NMCAA Financial Management services, domestic violence counseling, and/or addiction treatment services.

3. Network with area partners involved in efforts to end homelessness through the Ray Harris Group and the Coordinated Entry System. The Housing Based Case Manager will be expected to attend the Ray Harris Group to discuss program eligibility for potential clients, provide information regarding NMSH openings, as well as to assist in the bridging of future tenants between Rapid Rehousing Programs and Permanent Supportive Housing.

4. Complete a Service Prioritization Decision Assistance Tool (SPDAT) for all enrolled clients and use it in developing a housing plan and retaining permanent housing.

5. Attend NWCEH local work groups as required in addition to attending weekly case reviews and other meetings as requested by NMSH.

6. Complete a Homeless Management Information System (HMIS) profile and maintain clients' information into the system. Complete information live as you meet and work with their clients.

7. Maintain appropriate working relationships with existing landlords in order to foster the tenant/landlord relationships as well as to serve as an advocate for clients.

8. Maintain 95% data quality standards on all HMIS data entry.

9. Maintain 100% file completeness on all enrolled client files. The Housing Based Case Manager will maintain all paperless files in HMIS and will be required to abide by file review policies and procedures.

10. Complete any and all required program documentation and certifications annually with all enrolled NMSH tenants. In addition, the Housing Based Case Manager will assist tenants in completing income re-determinations as needed.

11. Performs other related duties as required and/or assigned.

1. A commitment to the NMSH philosophy and mission.
2. Ability to maintain confidentiality.
3. Ability to interact positively with co-workers and clients in a non-judgmental, tactful, and courteous manner.
4. Ability to suggest innovative approaches in completing job responsibilities.
5. Ability to work openly and cooperatively as a team member.
6. Ability to perform physical tasks to carry out specific job duties.
7. Ability to effectively communicate (written and verbal) with clients, staff, and management.
8. Ability to carry out all required functions to meet annual program goals.

Qualifications:
Bachelor's degree in relevant field and/or 5 years case management experience.

31. Will the applicant work to have a person or persons who have experienced homelessness hired as staff for this project? Do persons with lived expertise work in other agency projects? *(500 word limit)*

 The applicant will work to have a person or persons with lived experience hired for this project. NMSH prioritizes people with lived experience and the expertise that they bring to working with people who have experienced homelessness. Currently the organization does not have any staff who have experienced homelessness; however, two recent past employees were people with lived experience as well as a person with lived experience currently serving on the board of directors.

32. Describe the applicant's financial management system, including financial reporting, record keeping, accounting systems, payment procedures, procurement processes, and audit requirements. *(500 word limit)*

It is the responsibility of the Board of Directors to formulate financial policies and review operations and activities on a monthly basis. Specifically, the Treasurer of the Board and the Finance Committee of which the Treasurer is the Chair. This responsibility is shared through delegation with NMSH's Executive Director, Administrator and Financial Advisor. NMSH hires an independent accounting firm to perform a yearly audit. All financial functions are performed with the Executive Director's pre-approval, the Financial Advisors oversight, and are in line with the generally accepted accounting principles (GAAP).

33. Proposed project start date (must be on a first of the month) (between June 2023 and October 2023):

September 1, 2023

| | PROJECT BUDGET | | | | | |

Complete the chart below for all funds associated with this project.

If this project has subrecipients, include an additional sheet to show how these funds are allocated among subrecipients.

Activity	HUD Requested Funds		Other Funding		Total Project Cost
Leasing	$62,136.00				$62,136.00
Rental Assistance		+		=	
Supportive Services	18,000.00				$18,000.00
Operating Costs	$5,790.00				$5,790.00

HMIS				
Project Administration (up to 10%)	$8,948.00			$8,948.00
Total Project Cost	$94,874.00			$94,874.00

Rural Set Aside Project- Additional Eligible Costs Detail

	HUD Requested Funds	Other Funding
Rent/Utility Assistance		
Motel/Shelter		
Home Repairs		
Capacity Building		
Food and Clothing		
Federal Inventory		

Appendix A

Except for leasing, match resources must equal to at least 25% of the total requested HUD funding, including project and administrative costs. Please note, Cash and In-Kind Match must qualify as eligible program expenses under the CoC interim rule.

Identify all match using the chart below. Only those dollars or non-cash contributions (in-kind) that directly support the project should be listed. This may include federal, state, or local government funds, private funds, grants, and/or other sources, including donations. Worksheet should reflect information in eSnaps application.

Match must be at least 25% of total funding requested. Documentation of match must be provided with the application.

Resource	Cash or In Kind	Committed or Planned/Pending	Available (MM/YY)	Amount/Value	% of HUD Project Award
CMH MOU	**In Kind**	**Committed**	01/23	$8,185.00	25%
	Cash/Kind	C/PP	MM/YY		%
	Cash/Kind	C/PP	MM/YY		%
	Cash/Kind	C/PP	MM/YY		%
	Cash/Kind	C/PP	MM/YY		%
	Cash/Kind	C/PP	MM/YY		%
	Cash/Kind	C/PP	MM/YY		%
	Cash/Kind	C/PP	MM/YY		%.
			Total match	$8,185.00	25%

Attach additional forms as necessary

Appendix B

Attachments listed below are required but unscored. Failure to include any documentation that is required may result in disqualification of the application. *Please number all attachments in accordance with the list below.*

All projects must include as attachments (please number each attachment as follows):

☒ #1: Proof of 501(c)3 status from the IRS

☒ #2: Financial statements, including cash flow statement

☒ #3: Non-profit Corporation Update (2013) or equivalent

☒ #4: UEI number and Standard Form 424 (SF-424)

☒ #5: Active registration in SAM

☒ #6: Most recent audit by an independent certified public accountant

☒ #7: Monitoring report by HUD or other federal or state funding entity, including any responses if there were findings noted in the report

☒ #8: Documentation of all match

☐ #9 Project Application in e-Snaps – will send once available

Appendix C

HUD General Section Certificates

The applicant certifies to the Northwest Michigan Coalition to End Homelessness (GGTA CoC) that it and its principals are in compliance with the following requirements as indicated by checking the box.

☒ *Fair Housing and Equal Opportunity*. See CFR 578.93 for specific requirements related to Fair Housing and Equal Opportunity.

☒ *Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity.* See the Federal Register dated February 1, 2012, Docket No. FR 5359-F-02 and Section V.C.1.f. of the FY 2017 General Section.

☒ *Debarment and Suspension*. See Section III.C.4.c. of the FY 2015 General Section. Additionally, it is the responsibility of the recipient to ensure that all subrecipients are not debarred or suspended. (24 CFR 578.23((3)(c)(4)(v).d. Delinquent Federal Debts. See Section V.B.3. of the FY 2017 General Section.

☒ *Compliance with Fair Housing and Civil Rights*. See Section V.C.1.a. of the FY 2017 General Section.

☒ *Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP).* See Section V.C.1.d. of the FY 2017 General Section.

☒ *Economic Opportunities for Low- and Very Low-income Persons (Section 3).* See Section V.C.1.c. of the FY 2017 General Section.

☒ *Conducting Business in Accordance with Core Values and Ethical Standards/Code of Conduct*. See Section V.C.15. of the FY 2017 General Section.

☒ *Prohibition Against Lobbying Activities*. See Section V.C.15. of the FY 2017 General Section.

☒ *HUD Habitability Standards inspections* on all units, at a minimum.

☒ *Participation in HUD-Sponsored Program Evaluation*. See Section V.C.5. of the FY 2017 General Section.

☒ *Environmental Requirements.* Notwithstanding provisions at 24 CFR 578.31 and 24 CFR 578.99(a) of the CoC Program interim rule, and in accordance with Section 100261(3) of MAP-21 (Pub. L. 112-141, 126 Stat. 405), activities under this NOFA are subject to environmental review by a responsible entity under HUD regulations at 24 CFR part 58.

☒ *Drug-Free Workplace.* See Section VI.B.9. of the FY 2015 General Section. n. Safeguarding Resident/Client Files. See Section V.C.11 of the FY 2017 General Section.

☒ *Compliance with the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 209-282) (Transparency Act), as amended*. See Section V.C.13. of the FY 2017 General Section.

☒ *Lead-Based Paint Requirements*. For housing constructed before 1978 (with certain statutory and regulatory exceptions), CoC Program recipients must comply with the requirements of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801, et seq.), as amended by the Residential Lead-Based

☒ *Paint Hazard Reduction Act of 1992* (42 U.S.C. 4851, et seq.); and implementing regulations of HUD, at 24 CFR part 35; the Environmental Protection Agency (EPA) at 40 CFR part 745, or State/Tribal lead rules implemented under EPA authorization; and the Occupational Safety and Health Administration at 29 CFR 1926.62 and 29 CFR 1910.1025.

☒ *Violence Against Women Reauthorization Act of 2013: Implementation in HUD Housing Programs* (24 CFR Parts 5, 91, 92, 93, 200, 247, 547, 576, 880, 882, 883, 884, 886, 891, 905, 960, 966, 982, and 983).

☒ Attestation that all attachments as required by HUD are uploaded in *e-snaps.* See Notice of Funding Availability for the 2018 Continuum of Care Program Competition FR-6200-N-25.

This list is not exhaustive of all HUD requirements. Applicants are encouraged to review the 2018 General Section, found at: https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps to ensure eligibility.

Applicant: Northwest Michigan Supportive Housing

Acknowledged By: Becca Binder

Title: Executive Director

Date: 9/3/2022