

2022-2023 Emergency Solutions Grant (ESG) Application



CHECKLIST OF REQUIRED DOCUMENTS

Documentation of active SAM registration with current agency information

Documentation the organization's Code of Conduct complies with 2 CFR part 200 and is on file with HUD. www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conduct If not, attach Code of Conduct.

PDF HMIS Generated APR (July 1, 2020-June 30, 2021) - renewing projects only

NEW PROJECTS ONLY

Documentation of 501(c)(3) status from US Internal Revenue Services

Organizational Chart

Current list of Board of Directors

Most recent Fiscal Year Audit, if applicable

Minutes from the past two board meetings



Agency:	DUNS Numbers:
Project Name:	
Agency Contact Person:	
Email Address:	Phone:
Agency Address:	
Brief Project Description (ONE paragrap	
1. Brief Froject Bescription (ONE paragrap	The contract harractive, if awaracay.
2. Proposed Activities: (Select ALL that app	oly)
Street Outreach	Prevention/TBRA/Services
Emergency Shelter	Rapid re-housing/TBRA/Services
3. Please identify the primary beneficiaries	s of your ESG program (Select ALL that apply)
Chronically Homeless	Elderly
Unaccompanied Youth	Veterans
Victims of Domestic Violence	Persons exiting jail/prison
Persons with HIV/AIDS	Persons with severe mental illness
4. Total to be served	
Indicate the number of unduplic	ated adults (18+) to be served
·	cated children (<18) to be served
Indicate the number of househo	lds to be served



5.	Describe your organization's mission and how homeless programs fit within that mission.
6.	Provide evidence of the need for the services proposed. Include as much data as possible to support your application, including HMIS data. Describe how this project will meet the priority needs of the homeless individuals or those at risk of homelessness in Oklahoma City.
7.	Describe how your agency will ensure that program participants are assisted in obtaining services including access to mainstream resources, education, employment, youth programs, etc.



8.	What percentage of your program discharges in the last calendar year were involuntary?
9.	Provide examples and reasons for discharge. NEW PROJECTS : please describe your agencies discharge policy including examples of situations that would result in program termination.
10.	Describe how your agency will involve individuals with lived experience in the operating of the ESG funded project. Include if your agency has a person with lived experience on the Board of Directors. Describe any program changes that have been made as a result of participant feedback.



11. Describe your agency's process for ensuring project-level and agency-wide data quality in HMIS, or if a victim service provider, the comparable database. Identify which staff person(s) is responsible for monitoring data quality at your agency.
12. How does the agency use data and reporting to inform agency decision making?



13. Project Performance – Using your FY20-21 CAPER data complete the table below (**NEW/FIRST YEAR PROJECTS**) On a separate document include a narrative response on how your project will address housing stability and increasing the non-cash benefits of your consumers)

a. Housing	Enter the Percentage from the Total Column on	
Stability	Q23c.	
	1. Enter the number of persons who had any	
	source of non-cash benefit at start in Q20a.	
	2. Enter the number of persons who had any	
	source of non-cash benefit at latest annual	
	assessment in Q20a.	
b. Increase Non-	3. Enter the number of persons who had any	
Cash Benefits	source of non-cash benefit at exit in Q20a.	
	4. Add lines 2 + 3 together and then subtract line	
	1.	
	5. Enter the "Number of Persons Served" from	
	line 1 of Q5a.	
	6. Divide Line 4 by Line 5 and covert to percentage	
	1. Is the "Number of Persons Served" from line 1 of	
	Q5a consistent with the number proposed in the	
	application?	
c. Number	If not, please explain	
Served		
301 400		



14. Housing First/Low Barrier

	Yes	No
Does the project require a background screening prior to project entry?		
Does the project prohibit persons with certain criminal convictions		
from entering the project?		
Does the project require participants to be clean and sober prior to		
project entry or during project stay?		
Does the project require participants to take alcohol/drug tests?		
Does a positive alcohol/drug test result in termination from the		
project or require participant to participate in substance abuse		
treatment and/or detox to resume project services?		
Does the project require participants to have a mental health		
evaluation prior to project entry?		
Does the project require project participants who demonstrate		
mental health symptoms to participate in mental health services		
and/or medication compliance as a condition of participation?		
Does the project require participants to have an income at time of		
project entry?		
Does the project require participants to obtain income as a condition		
of remaining in the project?		
Does the project require participants to participate in supportive		
services as a condition of continued services?		
Does the project require participants to be "progressing" in their		
goals to remain in the project?		
Does the project exclude or refuse project entry based on race, color,		
religion, national origin, disability, sex, sexual orientation, gender		
identity and/or gender expression?		
Does the project include any requirements, outside of those typically		
found in a lease agreement or in "community living" conduct rules?		
Do project participants have to travel to the agency's office(s) to		
receive the majority of their services, including case management,		
after they are housed?		
Does the project prohibit any member of a household, based on age,		
gender, biological relationship and/or marital status, from residing		
together at the project?		
Enter the Total # of "Yes" and "No" responses		



15. HMIS Data Quality - Using your FY20-21 CAPER data complete the table below (**NEW/FIRST YEAR PROJECTS**) On a separate document include a narrative response on how your project will meet the data standards of the CoC)

Identifiable Information Data Quality	Enter "Overall Sco	ore" from Q6a.		
	Enter Values from "Q6e – Data Quality: Timeliness"			
		Project Entry	Project Exit	Total
	0 Days			
	1-3 Days			
Timeliness Data	4-6 Days			
Quality	7-10 Days			
	11+ Days			
	Total Number of E	ntries		
	Add Totals from "0 Days" and "1-3" Days and Divide by the Total Number of Entries to determine the % of entries entered within 72 hours.			

17. Financial and Monitoring (**NEW/FIRST YEAR PROJECTS**) On a separate document include a narrative response on how your project will expend funds, include your agency's plan for providing services on a reimbursement basis.)

In the projects most recently ended grant year, what percentage of funds were expended?	
Percentage of funds used for Supportive Services	
Did the project submit all reimbursement requests at least quarterly during the most recently ended grant term?	



Did the project provide documentation for the match required	
per ESG regulations?	
Did the project have any findings or concerns in the most recent	
monitoring?	
In the projects most recently ended grant year, what was the	
cost per person served?	

18. Collaboration

The agency is an active member of the Coalition to End Poverty and has consistent representation at CCMS, Veterans CCM, Family CCM or Youth CCM.

19. Proposed Project Budget

Туре	Description	Amount	Match (Y/N)	
Example				
Case Management	2 FTE	\$70,000	N	
Case Management				
Support Services				
Outreach Advocate				
Transportation/Travel				
Education Services				
Employment Assistance				
Shelter Operations				
Rental/Utility Assistance				
Other Eligible Expenses				
PROJECT TOTAL				