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YV Conference of Governments
Homeless and Housing Program
YVCOG HP RFP 2018-2020
4/9/2018 deadline

Yakima Neighborhood Health Services YNHS Extreme Winter Weather Hotel/Motel Vouchers

USD\$ 128,175.00 Requested

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Application Questions

PROJECT NARRATIVE

1. PROJECT SUMMARY: Provide a brief description of the proposed project. Describe how the project is aligned with the goals in the Yakima County 5-Year Plan.

The Yakima County 5-Year Plan can be found in the Library tab.

Yakima Neighborhood Health Services (YNHS) Extreme Winter Weather Hotel/Motel Voucher (EWW Voucher) program will serve families and individuals with special needs in Yakima, and individuals in the lower-Yakima Valley with hotel/motel vouchers as an alternative to communal shelter stay during the Extreme Winter Weather Season (November 15 through March 15). Special needs include: those needing ADA requirements, non-ambulatory, incontinent, and pet-accompanied. Following FEMA guidelines, YNHS will grant a three-day stay voucher for individuals and a seven-day stay voucher for families. Additional stays will be allowable. Participants will be screened by YNHS staff for additional needs and provided appropriate wrap-around services through other YNHS programs including: clothing, hygiene kits, HEN, supportive housing programs, medical and behavioral health support, etc. All information will be entered into the Clarity HMIS system.

The EWWV Voucher project will include units at Cosecha Court which was piloted two years ago, the first in the nation to turn seasonal farm worker housing into shelter for homeless families. With the support of Washington State Department of Commerce and the U.S. Department of Agriculture's Rural Development Program, Yakima Neighborhood Health Services' Sunnyside office is partnering with the Housing Authority to connect families with the new housing opportunity. The 6 units will be available for \$15 a day to rent each unit, or \$450 for 30 days, the same price farm workers pay for the units during the summer. Total, that means Neighborhood Health will be paying \$2,700 a month for its units.

In addition to serving families, hotel/motel vouchers are vital for members of the population who are deemed to not be successful in a congregate facility. Vulnerable population such as young adults, those with severe mental health issues or medical issues, and children are provided vouchers to assist in ensuring success and safety for all participants. Sanctions could result in serious consequences during extreme weather and the voucher provided a tailored alternative based on the need the participants.

The YNHS EWW Voucher program request is based on last year's actuals and includes \$41,560 annually for vouchers, \$13,500 to leverage Seasonal Farm Worker Housing at Cosecha Court, and \$5,440 for a .5 FTE Case Manager at ~4 hours a day X 136 days X Average to conduct intake, screening, transportation, case management, and transition. In addition to providing vouchers, this project also provides case management services which support housing stability and self-sufficiency. We anticipate most of these residents will need multiple contacts each week as they transition from the streets to individual units. Case Management also includes a complete assessment of functional status, and identification of support needs, both urgent and long term, prioritizing safety and basic needs first. Additional support includes health interventions (primary care, including mental health and chemical dependency), referrals, and Tenancy supports, providing guidance to residents on apartment maintenance, budgeting, community living, landlord relations, etc.

This project addresses the following barriers identified in the Yakima County's 5-Year Homeless Plan (5-Year Plan): 1) Emergency shelter for single men, men with children, couples, households with pets, and large families; and 2) Emergency Overnight shelter. Alignment with the Action Plan includes:

- Goal 3: Develop additional Shelter beds with access to services and maintain existing resources
 - o 3.1 Support existing shelter programs, including Cold Weather Emergency Shelter
 - o 3.2 Encourage increased utilization of existing shelter services when appropriate for individuals
 - o 3.7 Establish consistent emergency shelter options including interim emergency measures.
- Goal 10: Increase Capacity to add employment opportunities for self sufficiency
 - o 10.1 Create or increase systems to help homeless people get and secure income. Train case managers on SOAR.

2. TARGET POPULATION: Describe in detail the target population this project will serve. Include agency's experience working with this particular population and knowledge/understanding of this populations' unique service needs.

Please indicate how serving this population aligns with the 5-Year Plan.

EWW vouchers are for families and individuals with special needs who do not qualify or fit into traditional shelter settings. Priority is given to families with children. Last year, 266 in 125 households were served by this program, and many were turned away due to lack of capacity. While partner solutions serving single adults was extended to meet the need – the resources available to serve families and vulnerable adults is not enough to meet the increasing numbers of families without shelter. In 2017-18; Families in households as high as 6 participated last year.

Individuals with special needs include those needing ADA requirements, non-ambulatory, incontinent, and pet-accompanied. Also included are vulnerable populations such as young adults, those with severe mental health issues or medical issues, are provided vouchers to assist in ensuring success and safety for all participants.

This project addresses the following target populations identified in the Yakima County's 5-Year Homeless Plan (5-Year Plan):

- Chronically Homeless (including chemical dependency and mentally ill) –
 - o A person who is "chronically homeless" is an unaccompanied homeless individual with a disabling condition, who has either been continuously homeless for a year or more; or has had at least four episodes of homelessness in the past three years. In order to be considered chronically homeless, a person must have been sleeping in a place not meant for human habitation and/or in an emergency homeless shelter.
 - o A disabling condition is defined as a diagnosable substance use disorder, a serious mental illness, a developmental disability, a chronic physical illness, or a disability including the co-occurrence of two or more of the previously mentioned conditions. A disabling condition limits an individual's ability to work or perform one or more activities of daily living.
- Homeless Veterans
- Homeless Families with Children (including victims of Domestic Violence)
- Homeless Elderly over the age of 62

YNHS has extensive experience working with this particular population and had administered the EWW Voucher program for multiple years. Founded in 1975, YNHS began providing health services to the homeless in 2005 when Health Care for the Homeless funding was first received, and has grown to become the largest provider of homeless services in Yakima county. They currently provide outreach and basic needs assistance, medical respite care, and permanent supportive housing. YNHS is a community health center operating seven clinics located throughout the county. They provide integrated medical, dental, behavioral health and substance use services to the low-income residents of Yakima County. To ensure access for the homeless, YNHS operates a medical and dental clinic located at Triumph Treatment Services in the downtown area. YNHS also operates a clinic located at Comprehensive Healthcare, which serves the chronically mentally ill.

Yakima Neighborhood Health Services has staff trained in Trauma Informed Care as well as various staff trained to respond to behavioral and mental health needs as indicated. Nursing Case managers are also trained to provide services to those with disabilities and other identified special needs.

3. SERVICES/ACTIVITIES: Describe the services/activities proposed in a specific and detailed manner. Include a description of how the services/activities will be implemented and the frequency/duration of services.

Please indicate how the proposed services align with the 5-Year Plan.

Families or singles who may not be able to stay in a shelter setting can sign up for a hotel/motel voucher at the YNHS access points for Coordinated Entry. Eligibility requires that are literally homeless which is defined as living on the street, car, or inhabitable situation. Vouchers are issued if the participant is a family with children, or a special need (those needing ADA requirements, non-ambulatory, incontinent, and pet-accompanied) or high risk such as young adults, individuals with serious mental health issues or other circumstances that would not result in a successful stay in a traditional facility.

The rules and participation agreements will be reviewed and signed off as an acknowledgement of understanding by the participant. All participants will be screened by a behavioral health specialist or trained case manager as part of their initial assessment. All data will be entered in to the HMIS system immediately during intake to meet with 48-hour requirement for data entry by Commerce and the 24-hour requirement for data entry by YVCOG.

In addition to services provided by EWW Vouchers, YNHS has adopted the Screening, Brief Intervention, and Referral for Treatment (SBIRT) approach and screening to identify those with SUDs or CODs. If the SBIRT screening indicates drug use within the past year additional screening using the Drug Abuse Screening Test (DAST) will be administered. Those whose screening indicates little or no risky behavior will not be included in this program but will continue to receive all other services available to the homeless. With further engagement over time, if it appears that risky behavior is present, the client will be re-screened and may become eligible for the program at that time. Those whose scores indicate moderate risky behaviors will be referred to the behavioral health staff at YNHS to develop an appropriate treatment plan for brief intervention and treatment. Our staff includes masters trained behavioral health specialists, a psychiatric Nurse Practitioner, and a psychologist. Those persons with high scores will be referred to one of our partner organizations for further diagnostic assessment, development of a treatment plan, and more intensive, long term specialty treatment. Comprehensive Health Services will provide Detoxification services and Triumph Treatment Services will provide residential treatment of 90-days or less. Both will also provide more intensive integrated specialty mental health and substance use disorder outpatient services. Third party payors, including Medicaid, will be billed for these services by each agency. YNHS will reimburse at Medicaid rates for services provided to uninsured clients.

Extensions will be based program funding availability and need. Families with children are given priority and stays are based on need and vacancy availability. Upon screening our goal will be to enroll families and individuals to the coordinated entry active client list using the Vulnerability Index (VI) & Service Prioritization Decision Assistance Tool (VI-SPDAT). As an access point we will navigate them through the healthcare and housing systems with the goal of identifying permanent housing placement.

The frequency and duration of services are based on the individual's identified need. Specific services, align with the following goals in the 5-year plan:

- Goal 3: Develop additional Shelter beds with access to services and maintain existing resources
- 3.1 Support existing shelter programs, including Cold Weather Emergency Shelter
- 3.2 Encourage increased utilization of existing shelter services when appropriate for individuals
- 3.7 Establish consistent emergency shelter options including interim emergency measures.
- Goal 10: Increase Capacity to add employment opportunities for self sufficiency
- 10.1 Create or increase systems to help homeless people get and secure income. Train case managers on SOAR.

4. LOCATION: In what City or Cities will your project be located? Describe how the services will be available and accessible.

Is this location near a public transit line and/or will your services include client transportation, if necessary.

Hotels and Motels utilized previously for the vouchers were located in the Cities of Yakima and Sunnyside. Location is based on availability and vacancy. Screening for the vouchers is available at the Yakima Neighborhood Health Service (YNHS) Homeless Resource Center and through the work of outreach workers at various sites. Hotels and Motels are near transit lines and if necessary, staff will provide transportation to the site after intake occurs.

5. LINK TO NEED: Describe how the proposed services/activities, including the location, meet the needs of the target population and fill any gaps in services. How do the proposed services meet the need in the community without duplicating efforts?

Indicate whether the service delivery model to be used is best practice, and provide detailed information to support that the project design is: a) evidence based, or b) introduces an innovation that improves the services provided.

Homelessness, or the threat of homelessness, is a reality for many living in Yakima County. For the homeless, access to services is impacted by many factors not experienced by the general population. Besides lacking the cash to pay for housing, many lack the documents needed to apply for services and benefits such as a birth certificate, driver's license, a mailing address as evidenced by a utility bill, a phone number, etc. Many do not have a car and public transportation throughout the Valley is limited. Poor personal hygiene, bizarre behavior or a confused mental status can make mainstream businesses and agencies reluctant to serve the homeless. Daily harassment, disrespect, and public beratement can lead some homeless individuals to become isolated and shy away from contact with others. The stigma of homelessness also makes it extremely difficult for some individuals and families to seek assistance. Becoming homeless is a traumatic event and many are at a loss for how to cope. Depression is common as is alcohol and substance abuse.

The two models that have informed the design of the EWW Voucher program are Housing First and Trauma Informed Care in their design of services and activities. These are both evidence-based practices (more rigorously studied than best-practices) and are National models.

- Housing First – The National Alliance to End Homelessness defines Housing First as a homeless assistance approach that prioritizes providing people experiencing homelessness with permanent housing as quickly as possible – and then providing voluntary supportive services as needed. This approach prioritizes client choice in both housing selection and in-service participation. Specific Activities include:
 - o A focus on helping individuals and families access and sustain permanent rental housing as quickly as possible;
 - o A variety of services delivered to promote housing stability and individual well-being on an as-needed and entirely voluntary basis; and
 - o A standard lease agreement to housing – as opposed to mandated therapy or services compliance.
 - o While all Housing First programs share these elements, program models vary significantly depending upon the population served. For people who have experienced chronic homelessness, long-term services and support may be needed.
- Trauma Informed Care (TIC) – This Best Practice recognizes life progress at the smallest level, and builds on that progress to achieve greater successes in self-sufficiency and improved health. YNHS uses TIC as it's model for case management and outreach in their work with medically fragile patients, mental health clients, homeless clients, and clients in supportive housing. The Substance Abuse and Mental Health Services Administration (SAMHSA) has identified the Six Key Principles of Trauma Informed Care:
 - o Safety - Throughout the organization, staff and the people they serve feel physically and psychologically safe.
 - o Trustworthiness and transparency - Organizational operations and decisions are conducted with transparency and the goal of building and maintaining trust among staff, clients, and family members of those receiving services.
 - o Peer support and mutual self-help - These are integral to the organizational and service delivery approach and are understood as a key vehicle for building trust, establishing safety, and empowerment.
 - o Collaboration and mutuality - There is true partnering and leveling of power differences between staff and clients and among organizational staff from direct care staff to administrators. There is recognition that healing happens in relationships and in the meaningful sharing of power and decision-making. The organization recognizes that everyone has a role to play in a trauma-informed approach. One does not have to be a therapist to be therapeutic.
 - o Empowerment, voice, and choice - Throughout the organization and among the clients served, individuals' strengths are recognized, built on, and validated and new skills developed as necessary. The organization aims to strengthen the staff's, clients', and family members' experience of choice and recognize that every person's experience is unique and requires an individualized approach. This includes a belief in resilience and in the ability of individuals, organizations, and communities to heal and promote recovery from trauma. This builds on what clients, staff, and communities have to offer, rather than responding to perceived deficits.
 - o Cultural, historical, and gender issues - The organization actively moves past cultural stereotypes and biases (e.g., based on race, ethnicity, sexual orientation, age, geography), offers gender responsive services, leverages the healing value of traditional cultural connections, and recognizes and addresses historical trauma.

Last year, 266 in 125 households were served by this program, and many families were turned away due to lack of additional funding.

6. ACCESSABILITY: Describe in detail how the proposed project will be accessed by the targeted population.

How will this project coordinate with the Coordinated Entry System?

YNHS will continue to use the current outreach approaches being utilized in the form of Street Outreach program, Homeless Resource Center services, health care for the homeless services, and the no wrong door approach. This will be in addition to intake and assessment in order to identify service and housing needs and provide a link to the appropriate level of both as indicated. YNHS is also increasing outreach to private landlords.

The intended audience for this outreach is homeless individuals and families.

YNHS is an access point for coordinated entry, and as a result, works with all agencies who are participating in coordinated entry to identify the most vulnerable in the community in order to prioritize them for housing. A Coordinated Entry/Eligibility Specialist (CE/ES) assists homeless clients with applications for benefits including health insurance through Medicaid, Medicare, or the exchange, TANF, SSI/SSDI, TANF, SNAP, etc. Very often the homeless need assistance obtaining documents to qualify for insurance or benefits. The CE/ES assists with obtaining birth certificates, government issued IDs, marriage certificates, divorce decrees, a mailing address, or other necessary documents. YNHS has a grant from the United Way that pays the fees and postage costs for obtaining these documents.

Individuals have eligibility and risk determined through participation through the Coordinated Entry system which includes administration of the Vulnerability Index (VI-SPDAT) to prioritize services (highest need receives top priority). The following methods are utilized to determine and document eligibility based on their current circumstances:

- Street (Those who are permanently camping; do not have a home; those who state they live on the street or in their cars; those living in abandoned buildings or other structures not meant for human habitation)
 - o Signed and dated statements validating situation on letterhead from outreach workers and/or organizations that assisted the person in the recent past OR
 - o Written verification signed and dated on letterhead from referring social service organization or outreach worker providing information regarding where the person has been residing OR

- o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
- o Documentation already verified in Yakima County HMIS System.
- Literally Homeless (Continually Homeless 1 Year or 4 Episodes in 3 Years that add up to 1 year):
- o Verification signed and dated on shelter letterhead.
- o Shelter's bed-night roster.
- o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
- o Documentation already verified in Yakima County HMIS System.
- From Transitional Housing:
- o Written verification from Transitional Housing provider, showing date client entered transitional housing and verifying client was previously homeless.
- o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
- o Documentation already verified in Yakima County HMIS System.
- Institutions / Treatment Centers: (must have been homeless prior to being institutionalized):
- o Written, signed and dated verification on letterhead from institution's staff that participant is being discharged without housing and lacks resources to obtain housing.
- o Verification from Homeless Network member known by YNHS staff with first-hand knowledge of client situation.
- o Documentation already verified in Yakima County HMIS System.

7. HOUSING SEARCH AND STABILIZATION: For Rapid Rehousing/Rental Assistance Projects ONLY. Describe the agency's experience in working with area landlords and/or property managers and detail the project's planned liaison efforts.

Describe your agency's approach to maintaining strong relationships with landlords and providing tenants with knowledge of their responsibilities as a tenant.

This is not a Rapid Rehousing/Rental Assistance project.

8. COMPLEMENTARY SERVICES and COORDINATION: Describe other services, projects, and agencies that will provide services or resources to project participants that help meet needs and promote movement toward permanent housing.

Describe in detail any formal agreements or history of partnerships (i.e. education, employment, life skills, mental health, substance abuse) that your agency has with partnering agencies and UPLOAD signed MOU's/agreements in the Documents Tab.

YNHS collaborates with many agencies in most programs and projects including, but not limited to; Yakima Housing Authority, private landlords, etc. for housing needs. For support services, YNHS rely on the expertise of Triumph Treatment Services and the YWCA of Yakima for clients with Chemical Dependency and Domestic Violence issues. YNHS also collaborates with the workforce, housing, and transportation systems to make employment an essential component of their supportive housing programs and projects.

YNHS is an access point for coordinated entry, and as a result, works with all agencies who are participating in coordinated entry to identify the most vulnerable in the community in order to prioritize them for housing. Additionally, YNHS has been an early adopter of HMIS data and processes and continues to promote the shared enterprise of a county-wide HMIS database. Yakima County HMIS providers share one database so they can share and see what services homeless residents in Yakima County are receiving, and are able to coordinate services among the providers.

Letters of support from the Homeless Network of Yakima County, Rod's House, Union Gospel Mission, and Noah's Ark are attached.

9. PROJECT OUTPUTS: The overall goal of this RFP is to prioritize unsheltered, rapidly move households into permanent housing, and reduce the time spent homeless and on the streets or in shelters. The next FOUR (4) questions address projected output.

Will your project have measurable outputs?

- Yes
- No
- Other:

10. A) PERSONS SERVED: Indicate number of projected unduplicated persons and households to be assisted for a 12 month program period. Unduplicated means that each person/household served by the project is counted only once during the program period.

Disregard Total at the bottom.

Unduplicated Persons (7/1/18 - 6/30/19)

Unduplicated Households (7/1/18 - 6/30/19)

TOTAL

11. B) SERVICE UNITS: Identify and describe THREE (3) service units to be provided. (Examples: number of outreach contacts, emergency shelter bed nights, housing stability service hours, vouchers, etc.)

For each service unit, indicate total number of service units to be provided in a 12-month program period. Identify how you track and monitor clients and services provided; be specific.

During the 2017-18 program year, 111 households representing 196 individuals were served by the YNHS Hotel/Motel voucher program for a total of 3,780 bed nights for an average length of stay of 28 bed nights per person staying at Cosecha Court and 15 bed nights per person with a hotel/motel voucher.

Regarding how many bed nights served each night – this is difficult to measure as it is dependent on the presented need and includes such factors as: How many families are in need, family size, number of children, number of special needs population. A rough estimated based on last years' activity would be 131 bed nights each night for a program total of over 5,000 bed nights. Because of this, it is impossible to predict the number of units as it is dependent on household size.

All intake and assessment data is entered into HMIS system within 24 hours. HMIS is the primary tool for tracking and monitoring clients and services provided.

Utilization Rate below is 100% as vouchers are only given when individual presents a need.

12. C) EMERGENCY SHELTER & TRANSITIONAL HOUSING PROJECTS ONLY: How many units (or beds) are in your program and what percent of utilization do you anticipate:

Disregard Total at the bottom.

of Units

of Beds

% Utilization Rate

TOTAL

13. D) POTENTIAL BARRIERS: Describe any potential barriers to achieving the identified output(s) and the strategy for overcoming these barriers in order to meet the proposed performance targets.

The greatest challenge of the project is the explosion of homelessness in the Country, State, and County. In 2017, there was an increase of 28% of individuals experiencing homelessness in Yakima County according to the 2017 Annual Point in Time Count. The largest increase is for individuals who are literarily homeless, though temporarily sheltered, with individuals in Emergency Shelters and Transitional Housing showing a 54.3% increase. A majority of that increase is in the number of individuals staying in emergency shelters which includes Extreme Winter Weather Shelters and vouchers. This category alone showed an 82% increase from the previous year. Individuals who were unsheltered (sleeping in an abandoned building, vehicle, or outside) also increased by 23% from the previous year.

The greatest barrier to meeting the suggested performance target identified in question 16 – that 60% of clients exit to permanent housing is the lack of permanent housing options. 2017 Point in Time identified a 25% decrease in Permanent Supportive Housing (PSH) and current vacancy rate of fair market housing is less than 1%.

Our strategy for overcoming these barriers is expanding our capacity to serve for clients in order to address healthcare needs as soon as possible. Our strategy for address the last of permanent housing exit options is maintaining relationships with local landlords and working with the Homeless Network of Yakima County's Affordable Housing Committee to address the lack of affordable housing.

14. Please select your proposed project type for this application. Separate applications must be done for each project your agency will apply for.

Answer ONLY the questions below that pertain to your project type; type N/A in questions that do not pertain.

- Coordinated Entry Services
- Emergency Shelter (DV, Youth, 24-hour, overnight only)
- Winter Weather Hotel/Motel Vouchers
- Outreach Services
- Rapid Rehousing (RRH) / Rental Assistance (RA)
- HEN Rental Assistance
- TANF Rental Assistance
- Capital Improvement

15. COORDINATED ENTRY SERVICES: Describe your agency's process for completing the CE Intake Assessment and ensuring the client gets prioritized appropriately. Indicate number of estimated assessments your agency is likely

to complete per month.

Describe any potential barriers this project may encounter and the strategy for overcoming these barriers.

This is not a Coordinated Entry project.

16. EMERGENCY SHELTER: Emergency Shelter Projects have the following performance targets: at least 60% of clients exit to permanent housing and an average length of stay of 20 days. Describe your action plan to achieve these targets.

Describe any potential barriers to achieving the identified outcomes and the strategy for overcoming these barriers.

In 2017, the average length of stay for clients in the EWW Voucher program average length of stay of 28 bed nights per person staying at Cosecha Court (primarily families) and 15 bed nights per person with a hotel/motel voucher. – there are no barriers foreseen to meeting the performance target of 20 days other than identifying suitable housing to exits clients to. The greatest barrier to meeting the suggested performance target that 60% of clients exit to permanent housing is the lack of permanent housing options. 2017 Point in Time identified a 25% decrease in Permanent Supportive Housing (PSH) and current vacancy rate of fair market housing is less than 1%.

Our strategy for overcoming these barriers is expanding our capacity to serve for clients in order to address healthcare needs as soon as possible. Our strategy for address the last of permanent housing exit options is maintaining relationships with local landlords and working with the Homeless Network of Yakima County's Affordable Housing Committee to address the lack of affordable housing.

17. RAPID REHOUSING (RRH)/RENTAL ASSISTANCE (RA) - Describe your agency's process for assisting clients in obtaining necessary identification, disability, and homeless verification documentation to obtain housing assistance.

Describe any potential barriers this project may encounter and the strategy for overcoming these barriers.

This is not a Rapid Rehousing/Rental Assistance project

18. RRH: RRH projects have the performance targets of: at least 90% of clients exit to permanent housing, an average length of time from enrollment to move-in of 14 days or less, and less than 5% of clients returning to homelessness within 1 year.

Describe your action plan for meeting the identified outcomes and your strategy for overcoming any barriers to meeting the proposed performance targets.

This is not a Rapid Rehousing/Rental Assistance project

19. RA: TH or PSH: TH projects will only be considered for youth or DV clients. Performance targets for: TH - at least 80% exit to PH and average LOS less than 180 days. PSH - at least 90% retain or exit to PH.

Describe your action plan for meeting the identified outcomes and your strategy for overcoming any barriers to meeting the proposed performance targets. Describe your action plan for increasing or maintaining the total income of clients served.

This is not a Rapid Rehousing/Rental Assistance project

20. CAPITAL IMPROVEMENT: Please attach a copy of the signed Purchase Agreement, Lease Agreement, Zoning Approval and any other supporting documentation under the Documents tab.

Please give a "yes", "no", or "unknown" response for each question below.

Does your agency own the property or have a contract to purchase or lease the property?

Does the proposed use of project comply with city zoning codes and state regulations?

Will this project require relocating individuals and if so, does your agency intend to comply with the Uniform Relocation Act (URA)? (See Library Tab)

Does the proposed use of this project directly benefit homeless individuals?

Does this proposed project align with the goals outlined in the Yakima County 5-Year Plan? (see Library Tab)

TOTAL

21. CAPITAL IMPROVEMENT: Describe your proposed project in detail including timeline for completion, proposed deliverable, and how it aligns with the 5-year plan.

This is not a Capital Improvement project

22. OUTREACH SERVICES: Describe the anticipated outcomes of your project and what will be the proposed deliverables?

Describe your action plan for connecting your target population to a Coordinated Entry Access Point and prioritized for housing or other services.

This is not an Outreach project

AGENCY CAPACITY AND EXPERIENCE

23. AGENCY CAPACITY AND EXPERIENCE: Please provide a brief response to each question below.

Please give a "yes", "no", or "unknown" response for each question below

<input type="text"/>	Yes	Does your agency have experience providing homeless housing and/or services?
<input type="text"/>	Yes	Does your agency have experience managing and accounting for public funding?
<input type="text"/>	Yes	Have you had an audit in the last 24 months?
<input type="text"/>	No	Has your agency received any audit or monitoring findings in the last 3 years? If yes, upload audit in Documents Tab.
<input type="text"/>	No	Has your agency undergone organizational restructuring in the last 24 months?
<input type="text"/>	No	Has your agency experienced turnover in key management positions in the last 24 months pertinent to this project?
<input type="text"/>	Yes	Does your agency maintain policies for minimum qualifications for the staff members who will provide client services. If yes, please attach in Document Tab.
<input type="text"/>	Yes	Does your agency utilize policies, procedures, and best practices to promote fairness and opportunity for all people, particularly people of color and communities that are disproportionately represented among the homeless population?
<input type="text"/>	Yes	Does your agency assure access to underserved communities impacted by homelessness?
<input type="text"/>	Yes	Will your agency provide services to racial and ethnic minorities, immigrants and refugees, individuals with disabilities, LGBTQ, and people with limited English proficiency?
<input type="text"/>	Yes	Does your agency identify specific cultural based needs of populations and use that information to modify engagement and services?
<input type="text"/>	Yes	Does your agency conduct self-assessment of its fair and just practices and cultural competency including both internal and external input?
<input type="text"/>	Yes	Does your agency participate in HMIS currently?
<input type="text"/>	Yes	Does your agency currently participate in the Coordinated Entry System for Yakima?
<input type="text" value="0.00"/>	TOTAL	

24. AGENCY COMMUNITY PARTICIPATION/COLLABORATION: Upload any MOUs between partnering agencies in the Documents Tab.

Please give a "yes", "no", or "unknown" response for each question below

<input type="text"/>	Yes	Does your agency participate in local homeless planning committees?
<input type="text"/>	Yes	Is your agency collaborating with partner agencies? Please attach all MOU's.
<input type="text" value="0.00"/>	TOTAL	

Budget

CAPITAL IMPROVEMENT PROJECT BUDGET	This Request	Other Federal	Other State/Local	Private or Other	TOTAL
Design & Inspection					USD\$ 0.00
Project Manager/Consultants					USD\$ 0.00
Relocation Costs (if applicable)					USD\$ 0.00
Title Insurance					USD\$ 0.00
Environmental Review					USD\$ 0.00
Permits & Fees					USD\$ 0.00
Land Acquisition					USD\$ 0.00
Site Development & Landscape					USD\$ 0.00

Utilities					USD\$ 0.00
Other:					USD\$ 0.00
Total		USD\$ 0.00	USD\$ 0.00	USD\$ 0.00	USD\$ 0.00

ALL OTHER PROJECT TYPES BUDGET	TOTAL Project Cost	Request Amount	Other Revenue	In-Kind Contribution	Anticipated Donations
Personnel Costs (Direct - 100% to program)	USD\$ 10,800.00	USD\$ 10,800.00			
Admin (Indirect - expenses shared with organization)	USD\$ 7,255.00	USD\$ 7,255.00			
Facilities Costs (Rent/Mortgage)	USD\$ 0.00	USD\$ 0.00			
Operating Costs (Insurance, Utilities, Phone, Supplies, Mileage, etc.)					
Operating Equipment (max \$1,500)					
Program Expenses:					
Specific: Case Management					
Specific: Hotel/Motel Vouchers	USD\$ 83,120.00	USD\$ 83,120.00			
Specific: Coordinated Entry Access Point					
Specific: RRH/RA - (For-Profit Only)					
Specific: TANF RA - (For-Profit Only)					
Specific: HEN RA					
Specific: Outreach Services					
Specific: Emergency Shelter Services					
Cosecha Court	USD\$ 27,000.00	USD\$ 27,000.00			
Total	USD\$ 128,175.00	USD\$ 128,175.00	USD\$ 0.00	USD\$ 0.00	USD\$ 0.00

Budget Narrative

All costs were determined using the previous budget of actual costs to provide current services.

- Personnel Salaries / Wages: .5 FTE Case Manager at ~4 hours a day X 136 days X Average Hourly Rate of \$16 = \$4,352 plus benefits for a total of \$5,440 a year. Tasks include conducting intake, screening, transportation, case management, and transition.
- Administration Costs = Administration Rate of 6% = 3,627 a year Tasks include training, oversight, and program administration
- Hotel / Motel Vouchers = Estimated Need based on last years' experience 831 hotel/motel nights at an average of \$50.00 per night divided between upper and lower valley locations = \$41,560 a year.
- Cosecha Court–The 6 units will be available for \$15 a day to rent each unit, or \$450 for 30 days, the same price farm workers pay for the units during the summer. Total, that means Neighborhood Health will be paying \$2,700 a month for a total value of \$13,500 for the season.

Documents

Documents Requested *

Commitment letters for all leveraged funds/Letters of Support

Required? Attached Documents *



[YNHS - EWW Network](#)

[YNHS - EWW Noahs Ark](#)

[YNHS - EWW Rods House](#)

[YNHS - EWW UGM](#)

Verification and Signature (2018 RFP APPLICATION COVER SHEET)



[YNHS EWW - Verification](#)

[download template](#)

Project Map/Program Service Area		YNHS - EWW Map of Service Area
For Non-Profits: IRS Form 990	✓	YNHS - EWW - 990
For Non-Profits: Board Documentation (List of Board Members, Charter, ByLaws)	✓	YNHS - EWW Board of Directors
For Non-Profits: 501(c)3 Tax Exempt Letter	✓	YNHS - EWW - Tax ID Certification YNHS - EWW IRS tax exempt status
General Liability Insurance Certificate	✓	YNHS - EWW Liability
Agency's Audit Report for the most recent Fiscal Year	✓	YNHS - EWW Audit
Other relevant documentation		YNHS - EWW Rhonda Hauff Qualifications YNHS - EWW Annette Rodriguez Qualifications
Board Documentation (List of Board Members, Organizational Chart)	✓	YNHS - EWW Bylaws

* ZoomGrants™ is not responsible for the content of uploaded documents.

Application ID: 110591

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