Informational Workshop

2020 HOPWA Grant Application Process

Georgia® Department of
Community Affairs

Office of Homeless and Special Needs

Workshop Content

- Organizational Documents
  - Heather Smith/ Christy Walker
- Introduction to HSOnline
- HOPWA Application process
  - Dr. Harvinder K Makkar

Organizational Documents

February 2020 | Heather Smith

Objective

❑ The requirements for fully completing the HSOnline Organizational Information of the 2020 HOPWA Application.

Background

- **Why do we collect this information?**

Title 50. State Government

Chapter 20. Relations with Nonprofit Contractors

§50-20-1. Legislative intent

The General Assembly finds that the state has a right and a duty to monitor nonprofit organizations which contract with the state to ensure that their activities are in the public interest and to ensure that the public funds are used for proper purposes.

Background

❑ **Why do we collect this information?**

§ 50-20-3. Requirements from nonprofit contractors; audits; political activities

(a) Before entering into a financial agreement with a nonprofit organization, the head of the contracting state organization shall require the nonprofit organization to furnish financial and such other information as he or she may deem necessary to establish whether or not the nonprofit organization is financially viable and capable of providing services contemplated in the contract and that the agreement does not violate Chapter 10 of Title 45 related to conflicts of interest. Such information may include financial statements, Internal Revenue Service exempt status determination letters, Internal Revenue Service exempt organization information returns, and other related materials.

Background

- § 50-20-2. Definitions

(5) "Nonprofit organization" means any corporation, trust, association, cooperative, or other organization that is operated primarily for scientific, educational, service, charitable, or similar purposes in the public interest; is not organized primarily for profit; and uses its net proceeds to maintain, improve, or expand its operations. The term nonprofit organization includes nonprofit institutions of higher education and hospitals. For financial reporting purposes guidelines issued by the American Institute of Certified Public Accountants should be followed in determining nonprofit status.

Section 6: Organizations – Capacity Considerations

DCA is required by state law to perform due diligence around organizational capacity before making awards to nonprofit organizations. Funding decisions for non-profit agencies will be based, in part, on a review of the following:

- The complexity or nature of the request;

- Organizational structure, operating processes and capacity;

- The extent to which the organization operates under the authority of a diversified, involved, volunteer, community-based board of directors;

- Professional management;

- The consistency of the organization's identity or its mission to the provision of homeless or HIV (as applicable) services;

Section 6: Organizations – Capacity Considerations

- The extent to which the organization utilizes networks to avoid duplication of housing and services;
- Participation in appropriate provider groups and Continuums of Care;
- Sound operating procedures, accounting policy and controls;
- The presence and accuracy of financial management systems, accounts, funds, reports, tax returns, etc.;
- Unrestricted financial resources available to the agency; and
- Organizational and financial policy, controls, stability and capacity.

Organizational Documents Requested

Organizational Narrative

- Complete the narrative for questions

  1-5.

- Please read the questions carefully and answer all aspects of each question.

- This is your opportunity to provide brief but clear summaries about your organization and the work you do!

Organizational Narrative

Organizational Narrative

4525

Save | Cancel

1 Summarize the applicant agency's history, organizational background and experience in providing housing and/or service for persons experiencing homelessness. What is the mission of your organization? When was the mission adopted? (Limit to 5000 words or less)

2 Of your agency's total work, how much directly relates to persons specifically identified as "homeless?" Very briefly describe the work of your organization that is not directly related to persons experiencing homelessness (Limit to 5000 words or less)

Organizational Narrative Cont'd

3 Does your agency have a recent strategic plan that was approved by the Board of Directors? If yes, describe Board, staff and community involvement. Provide some examples of the primary features of this plan. (Limit to 5000 words or less

AAAAAAAAA

4 Describe agency's executive leadership, Board of Directors and program staff. Describe –
   •   How your governing authority (typically a board of directors) is representative of your community;
   •   Key responsibilities of your Board members (fundraising, governance, strategic planning, etc) and divisions of responsibility;
   •   The qualifications of your executive leadership;
   •   The qualifications and experience of program staff
Note that providing a simple list of directors and staff is insufficient to answer this question.

AAAAAAAAAA

Organizational Narrative Cont'd

5 Furnish the name and title of the person assigned to maintain the organization's financial records; include the address and telephone number if outside person or business is used.

AAAAAAAAA

Contact Information

Organizational and Contact Information

- ❑ Complete all fields

- ❑ DUNS (format xxx-xxx-xxx) and EIN (format xx-xxxxxxx) are different!

- ❑ Contact information should be complete as this information is used to contact the appropriate persons when disseminating information

- ❑ DV Agencies, please note information regarding street address/P.O. Box

Board Members

List of Board Members

Welcome

HSTester1@email.com | Save | Cancel | 4525

Enter the following Organizational Documentation:

Complete list of organization's current Board or governing members (officers identified). Information must include name, address, office held, term of office, compensation, profession, qualification, race, gender, ethnicity and homeless/formerly homeless status.

*Mr./Ms.		First Name		Last Name		Office Held		
*Term of Office		Compensation		Profession				
Qualification		Race		Gender	Ethnicity			
Street		City		Zip	Homeless / Formerly Homeless ○ YE	○ NO		
*Mr./Ms.		First Name		Last Name		Office Held		
*Term of Office		Compensation		Profession				
Qualification		Race		Gender	Ethnicity			
Street		City		Zip	Homeless / Formerly Homeless ○ YE	○ NO		

List of Board Members

❑ Complete each field –

*"Term of office" is not length of service but rather the stated term in the Articles of Incorporation or the organization's By-Laws for the Board Member

*"Qualification" may include advocacy or expertise related to the Board Member's profession or in the non-profit/homeless arena. An example might be an Educator that is/has been the liaison for homeless children/families in a school system

*"Ethnicity" for this purpose will be Hispanic or non-Hispanic

* Board member list will accept more than one board member

*"Homeless/Formerly Homeless" - see requirements on next slide

Homeless Participation on the Board of Directors or other equivalent policy making entity

- ❑ **§ 576.405 Homeless participation.**

- ❑ (a) Unless the recipient is a State, the recipient must provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the recipient, to the extent that the entity considers and makes policies and decisions regarding any facilities, services, or other assistance that receive funding under Emergency Solutions Grant (ESG).

- ❑ (b) If the recipient is unable to meet requirement under paragraph (a), it must instead develop and implement a plan to consult with homeless or formerly homeless individuals in considering and making policies and decisions regarding any facilities, services, or other assistance that receive funding under Emergency Solutions Grant (ESG). The plan must be included in the annual action plan required under 24 CFR 91.220.

- ❑ (c) To the maximum extent practicable, the recipient or sub-recipient must involve homeless individuals and families in constructing, renovating, maintaining, and operating facilities assisted under ESG, in providing services assisted under ESG, and in providing services for occupants of facilities assisted under ESG. This involvement may include employment or volunteer services.

Articles of Incorporation

❑ Original Articles of Incorporation as submitted to the Secretary of State's Office at the time of Incorporation (should be stamped by the SoS office with date).

❑ Articles of Incorporation may be "Re-Stated" if the organization has changed its name or some component of the Original Articles of Incorporation (should also be stamped by the SoS office with date).

❑ ONLY Articles of Incorporation should be uploaded to the category.

*Not applicable for units of local government, quasi-state organizations

Upload Page

Certificate of Incorporation

❑ This document is issued by the Secretary of State at the time of incorporation, certifying that an organization "has been duly incorporated under the laws of the State of Georgia on the effective date….by the filing of Articles of Incorporation in the office of the Secretary of State ….."

❑ ONLY Certificate of Incorporation should be uploaded to the category.

❑ This is also called "Certificate of Existence." You purchase thru Secretary of State website for a $10 fee. Please refer to this link https://ecorp.sos.ga.gov/

*Not applicable for units of local government, quasi-state organizations

*Not the same as the Annual Registration with the Secretary of State's office (we will confirm current status with the registration and no action is necessary by the applicant)

501(c)3 Determination Letter

❑This is a "threshold" determinant - without this **final determination** (with the exception below, local governments and quasi-state organizations) organizations will not be considered for funding.

****Not applicable for units of local government, quasi-state organizations**

Financial Procedures Manual

❑ At a minimum, this policy manual should include information regarding –

- ▪ Internal Controls/Financial Oversight
- ▪ Accounts Payable procedures
- ▪ Accounts Receivable procedures
- ▪ Procurement
- ▪ Basis of Accounting and Financial Statement preparation
- ▪ Budgeting
- ▪ Grants Management

Do NOT submit a Personnel Manual or Employee Handbook

Minutes of Last 3 Board Meetings

❑ Should be recent and in accordance with a schedule specified in the Articles of Incorporation or organization's By-Laws (monthly, quarterly, etc)

❑ Gives a snapshot of the participation of the Board Members as well as how business is conducted

❑ Three sets of minutes are required! *Meetings should have taken place in calendar year 2019 or early 2020.*

List of Organizational Staff

❑ Include list of current program staff, support staff (might include financial staff), as well as, the upward chain of management

❑ Must include both name and position

❑ Do NOT send an organizational chart

Staff Job Descriptions

- Must include Position Job Description

- Time Distribution Analysis – percentage of time spent in support of activities

- Level of Compensation

*Complete ONLY if requesting DCA funding to support staff positions

IRS Form 990

❑ All other non-profit organizations (as required) must submit Form 990 by the 15th day of the 5th month following the end of the fiscal year.

■ Example 1 – fiscal year end 12/31 – due May 15
■ Example 2 – fiscal year end 6/30 - due November 15
■ Example 3 – fiscal year end 9/30 – due February 15

For Part 1 submission purposes, using the above examples, Examples 2 and 3 Forms 990 for the period ending 6/30/18 and 9/30/18 should be available for upload. Form 990 for Example 1 may or may not be available as it is not due until May 15, 2019. If not available, Form 990 for the period ending 12/31/17 is appropriate for upload.

*Not applicable for local governments, certain religious organizations, quasi-state organizations

Required Financial Statements

(Read Georgia Code (O.C.G.A.), Title 50, Chapter 20)

❑ Organizations that expend greater than $100,000 in state funds must submit (independently) audited financial statements

Required Financial Statements

Organizations that expend less than $100,000 in state funds must (at a minimum) submit the following –

1. Statement of Financial Position
2. Statement of Activities (including an analysis of sources of revenue)
3. Statement of Cash Flows
4. Schedule of State Awards Expended
5. If annual financial statements are reported upon by a public accountant, the accountant's report must accompany them. If not, the annual financial statements must be accompanied by the statement of the president or person responsible for the nonprofit organization's financial statements:

   (A) Stating the president's or other person's belief as to whether the statements were prepared on the basis of generally accepted accounting principles and, if not, describing the basis of preparation; and

   (B) Describing any respects in which the statements were not prepared on a basis consistent with the statements prepared for the preceding year.

Organizational Documentation

- If you can't advance from the Registration to the confirmation page, it means that some fields still need to be entered.
- If you need to update the Registration after initial submission, you can do so via the Org Doc home page.
- ALL organizational documents <u>MUST</u> be completed in their entirety.

Document Orientation

- **Please ensure that uploaded documents are "oriented" properly, not upside-down, not sideways. View your upload and if not "oriented" properly, delete, and reload correctly.**

Thank You

- Thank you for your attention and participation!

Please visit our website at:

https://www.dca.ga.gov/safe-affordable-housing/homeless-special-needs-housing

for additional information on Homeless and Special Needs Housing.

Housing Solutions Online (HSO)

- All applications will be completed in HSOnline system.

- Users will be able to save work and log back in later to complete an application.

- It will be more important than ever to log out when session is complete.

- Multiple simultaneous users may create technical challenges.

Hints

- DO NOT wait until the last minute.
  - It can take up to 24 hours to receive your login and password via email.
  - Users will also receive a pop-up message with login and password.
- The system can become very slow when many applicants are logged on at the same time.
- Add HSOnline@dca.ga.gov to your address book so that the login email isn't flagged as spam.

More Hints

- Required documents are uploaded *individually*.

- This gives applicants another chance to verify they have all the correct documents uploaded before submitting.

- Certification of Consistency and Local Approval forms will be uploaded into the upload panel of HSOnline.

Housing Solutions Online (HSOnline) Application System

HSOnline 2020

Registration & Login

If your Organization has not yet Registered:

Click Here to Register

Application Timeline
Registration begins Friday, March 01, 2019 (8:00am)
Apply Online begins Friday, March 01, 2019 (8:00am)
Registration Deadline: Tuesday, March 26, 2019 (5:00pm)
Application Submission Deadline: Tuesday, April 02, 2019 (noon)

login: [_____]
password: [_____]

Sign In

Thank you for using Housing Solutions Online.

Registration

Georgia® Department of
Community Affairs

HOUSING SOLUTIONS ONLINE

6002

Registration

Registration will close at 5pm March 26, 2019
Please allow up until the next business day to receive your Login and Password
All applications and supporting materials will be due at noon on April 2, 2019

Agency (Legal Organization Name)*

9-Digit DUNS #   .   -   -   *Example: 123-456-789*

9-Digit EIN #   -   *Example: 12-3456789*

Application Contact Name

Application Contact Email

Application Contact Phone

Is this a domestic violence (DV) agency?   ○ YES   ○ NO

Are you applying to be funded for staff costs?   ○ YES   ○ NO

Has this agency ever received funding from DCA?   ○ YES   ○ NO

Is this agency a unit of local government or a public community service board?   ○ YES   ○ NO

Once you submit this registration, you will receive a Confirmation online with your login credentials. DCA needs to ensure that your online organizational file and contact information is complete. If your email and EIN# are already in DCA's organization contact database you will be able to login and begin the application process immediately. If we do not already have your email and EIN# on file you will need to notify us by email and allow 24 hours to update our database

Submit and Advance to Confirmation Page

Your registration must be completed by 5pm March 26, 2019

Your application must be completed by noon on April 2, 2019

(If the "Submit" button does not take you to the confirmation page, then you are missing information on your Registration. Please correct the form and try again.)

HSOnline@dca.ga.gov

Registration Confirmed

Georgia Department of

Community Affairs

HOUSING SOLUTIONS ONLINE

Submitted on 02/26/2018 08:07:31 AM

Registration Confirmed 5555

Applicants are able to request log-in information until ? pm on ?, April ?, 2018.
All applications and supporting materials will be due on ?, April ?, 2018 at Noon.

Account Name: Jimmy@email.com

Password: lprultmz

Copy your Account Name and Password in a secure location.

Click here to Complete Application.

Contact us: HSOnline@dca.ga.gov

All applications and supporting materials will be due on Tuesday, April 5, 2016 at Noon.

Agency (Legal Organization Name)*	ABC Agency
9-Digit DUNS #	666 - 555 - 444 *Example: 123-456-789*
9-Digit EIN #	55 - 5555554 *Example: 12-3456789*
Application Contact Name	Jimmy
Application Contact Email	Jimmy@email.com
Application Contact Phone	555-5555
Is this a domestic violence (DV) agency?	○ YES ● NO
Are you applying to be funded for staff costs?	● YES ○ NO
Has this agency ever received funding from DCA?	● YES ○ NO
Is this agency a unit of local government or a public community service board?	○ YES ● NO

Thank you for registering for Housing Solutions Online. Your Login and Password are listed above. You will use these credentials to log into Housing Solutions Online and complete your application. For security reasons it may take 24 hours to initialize login if your organization's contact information is not currently stored in the DCA Contacts database. After 24 hours you may contact support at:

All sections of the Application must be completed by, April ?, 2018.

USE THE PRINT FUNCTION ON YOUR BROWSER TO SAVE THIS CONFIRMATION AND
LOGIN CREDENTIALS AS A HARD COPY PRINT OUT FOR YOUR FILES

Applicant Home Page

Organizational Documents Requested

Applications Online

Application Summary Final Submission

Georgia Department of
Community Affairs
HOUSING SOLUTIONS ONLINE

ORG_ID   4519
NOI_ID   6369
dtester@email.com

2020 Application Summary

Welcome

Application Deadline : April 2, 2019 (noon)

Please review this Application Summary and verify that you have completed all applicable documents
Print a Copy of this Application Summary Page for Confirmation.

Applications Submitted Online	Date Submitted	
General Information	01/08/2020 12:50:54 PM	
Emergency Shelter 1	12/18/2019 09:31:31 AM	
Supportive Services	04/04/2019 03:22:44 PM	
Homeless Prevention	04/04/2019 03:23:14 PM	
Rapid Re-Housing	04/04/2019 03:24:07 PM	
Street Outreach	04/04/2019 03:24:46 PM	
Hotel - Motel Voucher	04/04/2019 03:25:02 PM	
HOPWA Application	04/04/2019 03:25:13 PM	
Emergency Shelter 2	04/04/2019 03:25:26 PM	$6,000
Emergency Shelter 3	04/04/2019 03:26:20 PM	$100

Organizational Documents	Date Submitted
Organizational Narrative	03/29/2019 08:03:04 AM
List of Board Members	01/22/2018 08:20:12 AM
Contact Information	01/22/2018 08:19:55 AM
Articles of Incorporation	3/4/2019 2:46:50 PM
Certificate of Incorporation	
501c3 Ruling	
Financial Procedures Manual	
Minutes of Last 3 Board Meetings	
List of Organizational Staff	
Staff Job Descriptions	
IRS Form 990	
Financial Audit and Management letter from recent Audit	

Total Number of Applications   **10**

Total Number of Organizational Docs   **4**

Please be sure you have uploaded all required Supplemental Documentation
For your protection, print a copy or make screen capture of this page for your Confirmation

Initial Here:

Final Submission

Final Submission Date
03/19/2019 02:14:22 PM

Application in PDF for Download

Georgia Department of
Community Affairs

HOUSING SOLUTIONS ONLINE

Applications in PDF for Download

Use this List to Confirm and Verify Submission of each Application Type

Applications Submitted Online	Date Submitted	Click on PDF to Review
General Information	01/08/2020 12:50:54 PM	
Emergency Shelter 1	12/18/2019 09:31:31 AM	
Supportive Services	04/04/2019 03:22:44 PM	**4519 Services Only App III**
Homeless Prevention	04/04/2019 03:23:14 PM	**4519/Prevention App IV**
Rapid Re-Housing	04/04/2019 03:24:07 PM	**4519 Rapid Rehousing App V**
Street Outreach	04/04/2019 03:24:46 PM	**4519 Outreach App VI**
Hotel - Motel Voucher	04/04/2019 03:25:02 PM	**4519 Hotel Voucher App VII**
HOPWA Application	04/04/2019 03:25:13 PM	**4519 HOPWA App X**
Emergency Shelter 2	04/04/2019 03:25:26 PM	
Emergency Shelter 3	04/04/2019 03:26:20 PM	

Total Number of Applications Submitted   **10**

Important Dates - Deadlines

- Housing Solutions Online (HSOnline) application system opens for registration <u>Tuesday</u>, **March 3, 2020**

- System registration <u>closes Tuesday</u>, **March 24 at 5:00 pm**

- All content is due by <u>Tuesday</u>, **April 7 at 12:00 pm**

- The link to HSOnline will be sent to the DCA list serve and posted on the DCA (HOPWA) website on <u>Tuesday, March 3, 2020</u>

- Paper submissions will **NOT** be accepted

Fair Housing and Affirmative Outreach

Georgia® Department of Community Affairs

February 2020

Dr. Harvinder Kaur Makkar, Special Needs Housing Coordinator

Fair Housing

- It is the policy of the Georgia Department of Community Affairs (DCA) to comply fully with all federal, state, and local nondiscrimination laws and to operate in accordance with the rules and regulations governing Fair Housing and Equal Opportunity in housing and employment. Specifically, DCA shall not on account of race, color, sex, religion, national origin, family status, disability or age deny any family or individual the opportunity to apply for or receive assistance under HUD's Program.

Affirmative Outreach

- …grantees must <u>make known</u> that use of the facilities, assistance, and services are <u>available to all on a nondiscriminatory basis</u>. If it is unlikely that the procedures that the grantee intends to use to make known the availability of the facilities, assistance, and services will reach persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for those facilities and services, grantee must establish additional procedures that <u>ensure that those persons are made aware of the facilities, assistance, and services</u>.

Language Barriers

- …<u>ensure effective communication</u> with persons with disabilities including, but not limited to, adopting procedures that will make available to interested persons information concerning the location of assistance, services, and facilities that are accessible to persons with disabilities. Consistent with Title VI and Executive Order 13166, grantees are also required to <u>take reasonable steps to ensure meaningful access to programs and activities for limited English proficiency (LEP) persons</u>.

2020 - 2021 HOPWA PROGRAM

February 2020

Dr. Harvinder Kaur Makkar, Special Needs Housing Coordinator

Housing Opportunities for Persons with AIDS (HOPWA)

- The Georgia Department of Community Affairs (DCA) seeks proposals from eligible service providers to provide HOPWA assistance to Persons living with HIV/AIDS (PLWHA) and persons in their family.

- Approximately $3 million dollars will be available.

- Funds will be available to provide HOPWA services in 125 counties under DCA HOPWA jurisdiction outside of City of Atlanta and Augusta-Richmond HOPWA jurisdiction.

HOPWA Service Areas & Awards

10/1/2019 to 9/30/2020

DCA HOPWA Award: $3,434,493

City of Atlanta EMSA awarded $23,000,301 from HUD for FFY 2019.

Augusta-Richmond awarded $1,055,049 from HUD for FFY 2019.

AID Athens, Inc.: $831,331

AID Atlanta: $60,800

CSRA Economic Opportunity Authority, Inc.: $103,409

East Augusta Community Development Corporation, Inc.: $22,000

Homeless Resource Network, Inc.: $220,000

HOPE Center: $300,000

Laurens County Board of Health: $221,200

Lowndes County Board of Health: $300,000

North GA Health District/Dalton 1-2: $260,000

Promise Land: $22,000

Union Mission, Inc.: $787,585

Ware County Board of Health (South-East Health District): $100,000

Georgia Department of Community Affairs

Eligible Funding Activities

- Facility-Based Housing (FBH) Assistance
  - FBH, GHFA PSH Support, Hotel/Motel Vouchers, Short-term/Transitional Housing
- Tenant-Based Rental Assistance (TBRA)
- Short-Term Rent, Mortgage and Utility (STRMU) Assistance
- Permanent Housing Placement (PHP)
- Supportive Services
- Housing Information and Referral Services
- Resource Identification
- Non-Housing Category – Administration
  - *Supportive Services only category without Housing will not be funded

Remember…..

- Participation in HMIS is required.

- Housing First model practice is strongly encouraged.

- Participation in Coordinated Entry System and local Continuum of Care is strongly encouraged.

- Participation in HUD 811 Permanent Supportive Housing as a Referring Agency is strongly encouraged.

- Leverage with other care services, including Ryan White Program, and funding is strongly encouraged.

FFY 2020 HOPWA Application

Application Deadlines

The application process will open on
Tuesday, March 3, 2020

Applicants may request log-in information until
Tuesday, March 24, 2020 at 5pm

Deadline for submitting HOPWA application is
Tuesday, April 7, 2020 at 12pm

Late applications will not be considered. No paper applications will be accepted.

Applications Online

FFY 2020 HOPWA Application

Georgia Department of Community Affairs
Office of Homeless and Special Needs
Housing Opportunities for Persons with AIDS (HOPWA)
FFY 2020 Request for Proposals

The HOPWA program was authorized by the National Affordable Housing Act of 1990 and revised under the Housing and Community Development Act of 1992, to provide states and localities with the resources and incentives to devise long-term comprehensive strategies for meeting the housing needs of low-income persons with Acquired Immunodeficiency Syndrome (AIDS) or related diseases and their families.

The Housing Opportunities for Persons with AIDS (HOPWA) program is funded by Congress through the U.S. Department of Housing and Urban Development (HUD) on an annual formula allocation process. The Georgia Department of Community Affairs (DCA) assumes the grant administration responsibilities as the State of Georgia HOPWA grantee. Funds are appropriated annually by Congress to the U.S. Department of Housing and Urban Development (HUD) for administration of this program. HOPWA funds are allocated to eligible states and Eligible Metropolitan Statistical Areas (EMSAs) based on number of people living with HIV/AIDS and other socio-economic factors as calculated by HOPWA Modernization formula. States and metropolitan areas coordinate use of HOPWA funds with their respective Consolidated Plans, a collaborative process, which establishes a unified vision for community development actions.

The Georgia Department of Community Affairs (DCA) seeks proposals from eligible service providers to provide assistance to consumers within the state of Georgia under the Housing Opportunities for Persons with AIDS Program (HOPWA). DCA has developed a single application process for the distribution of HUD HOPWA funds. Approximately $3 million dollars is expected to be available for HOPWA utilizing Federal funding resources. All HOPWA Grant awards are made through a competitive Request for Proposal process based on clients' needs, gaps in services, and ability of an agency to successfully implement the program.

All projects must comply with applicable federal, state, and local statutory requirements including but not limited to those set forth in Code in Federal Regulations 24 (CFR), Parts 50 and 574, as well as applicable administrative and accounting standards as set forth in Office of Management and Budget (OMB) Circulars, including A-87, A-102, A-122, and A-133.

HOPWA eligible metropolitan areas receive their HOPWA allocations directly from HUD and have specific guidelines and separate processes not included within the state's program. DCA's entitlement area serves 125 counties in Georgia that excludes the 29 county metropolitan Atlanta area and the 5 county metropolitan Augusta area. DCA will implement provisions to provide equity and stability of funding allocations across the 125 counties.

To determine funding, DCA will rely upon factors such as previous compliance, including capacity of the organization to carry out the proposed programs, past budget and performance history, current budgets, level of service provided, cost per person, and other considerations. Agencies applying for continued HOPWA funding must demonstrate the direct, positive impact their program has had on the availability of housing and support services.

We thank you for your interest in serving Georgians with special needs housing and for your interest in our programs. We look forward to your partnership with the Department of Community Affairs. Please direct questions regarding this process to Dr. Harvinder K Makkar at 470-382-3518 or email at harvinder.makkar@dca.ga.gov and John Shereikis at 470-747-9331 or email at john.shereikis@dca.ga.gov. For financial questions you may also contact Heather Smith at 404.679.0632 or email at heather.smith@dca.ga.gov.

Summary Page

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DCA expects Applicants to read and understand HOPWA Regulations before submitting this proposal.

Applicant Information	
Organization	
Contact Person	Dave Tester
Contact Phone	4444444
Contact Email	dtester@email.com

Project Information	
HMIS Project Name	
Street	
City	
Zip	
Number of Sites	
Currently Receives Funding	○ YES ○ NO
Suppress	○ YES ○ NO

FY 2019 HOPWA Request

Facility-Based Housing (FBH)*	
Tenant-Based Rental Assistance (TBRA)*	
Short-Term Rental, Mortgage and Utility (STRMU)*	
Permanent Housing Placement (PHP)*	
Supportive Services*	
Housing Information and Referral Services*	
Resource Identification*	
*Administration (Up to 7%)	
Total Request	

*Housing Staff Salary cost to be added with the type of Housing services

I affirm that the information provided within this application, to the best of my knowledge, is true and accurate, complete and has submitted according to the instructions and requirements. I affirm that I am duly authorized on behalf of the above organization to submit this application. I also understand that this application will be eliminated from the review process if any of the required information is omitted. I further certify that the funds requested herein will be utilized exclusively for "eligible beneficiaries" as described in the application guidelines.

Agency Certification

<Back **FFY 2020 HOPWA Application (page 3 of 18)** Next >

I certify that if funds are received for service operations as a result of this application,

1. At least one employee would complete the HOPWA Financial Management Online Training.
   Name of the staff completing/completed the training:

   Name of staff : [   ]   Date Training Completed: [   ]

2. The service will be operated for the benefit of eligible beneficiaries for the contract term, and that the level of service will not be less than that stated in this application at any time during the term of the contract.

3. All projects will be operated in full compliance with any and all local certifications, approvals, and operating permits, and that they will be operated in full compliance with all local codes and ordinances, including zoning, health, fire safety and housing codes or requirements.

4. The services will be operated in such a way as to maximize the opportunities for clients to participate in program delivery through employment, volunteer services, construction, renovation, maintenance or operation of the facility or program.

5. The organization will refrain from political activities including endorsement of any political candidate or party, use of machinery, equipment, postage, stationary, or personnel on behalf of any candidate or any question of public policy subject to referendum, or the display of political posters, stickers or other printed materials.

6. All programs will be operated in compliance with all laws and regulations governing the Federal or State programs under which the funds are made available.

7. The applicant organization is actively participating in local area provider networks, homeless housing and service coalitions, a local Consortia, Coordinated Entry System and Continuum of Care planning processes.

8. The applicant organization will not discriminate against a program beneficiary or prospective project beneficiary on the basis of religion or religious beliefs, age, gender, sexual orientation, race and ethnicity.

9. The agency will maintain 501©3 tax status as well as current registry with the Office of the Georgia Secretary of State.

10. All persons who receive HOPWA funded assistance shall be low income persons living with HIV/AIDS and their family members/care providers, or surviving family members.

11. I certify that I have reviewed the information contained in this application and all attachments, and that all information provided in them is true and accurate, to the best of my knowledge.

Authorized Staff: [   ]   **Date** [   ]

HOPWA Service Area by County

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HOPWA Service Area by County

DCA's entitlement area serves 125 counties in Georgia and excludes the 29 county metropolitan Atlanta area and the 4 county metropolitan Augusta area. If your proposal is to serve counties within the Atlanta or Augusta EMSAs, you must provide documentation from the EMSA's HOPWA Coordinator that funds are not available to support your HOPWA project for that county(ies) selected below. If you are proposing to serve consumers in multiple EMSAs, please list counties for the second EMSA in the comment section at the bottom of the page.

☐ Appling	☐ Clarke	☐ Glascock	☐ Lowndes	☐ Seminole	☐ Wayne
☐ Atkinson	☐ Clay	☐ Glynn	☐ Lumpkin	☐ Stephens	☐ Webster
☐ Bacon	☐ Clayton	☐ Gordon	☐ Macon	☐ Stewart	☐ Wheeler
☐ Baker	☐ Clinch	☐ Grady	☐ Madison	☐ Sumter	☐ White
☐ Baldwin	☐ Coffee	☐ Greene	☐ Marion	☐ Talbot	☐ Whitfield
☐ Banks	☐ Colquitt	☐ Habersham	☐ McIntosh	☐ Taliaferro	☐ Wilcox
☐ Ben Hill	☐ Cook	☐ Hall	☐ Miller	☐ Tattnall	☐ Wilkes
☐ Berrien	☐ Crawford	☐ Hancock	☐ Mitchell	☐ Taylor	☐ Wilkinson
☐ Bibb	☐ Crisp	☐ Harris	☐ Monroe	☐ Telfair	☐ Worth
☐ Bleckley	☐ Dade	☐ Hart	☐ Montgomery	☐ Terrell	
☐ Brantley	☐ Decatur	☐ Houston	☐ Murray	☐ Thomas	
☐ Brooks	☐ Dodge	☐ Irwin	☐ Muscogee	☐ Tift	
☐ Bryan	☐ Dooly	☐ Jackson	☐ Oconee	☐ Toombs	
☐ Bulloch	☐ Dougherty	☐ Jeff Davis	☐ Oglethorpe	☐ Towns	
☐ Burke	☐ Early	☐ Jefferson	☐ Peach	☐ Treutlen	
☐ Calhoun	☐ Echols	☐ Jenkins	☐ Pierce	☐ Troup	
☐ Camden	☐ Effingham	☐ Johnson	☐ Polk	☐ Turner	
☐ Candler	☐ Elbert	☐ Jones	☐ Pulaski	☐ Twiggs	
☐ Carroll	☐ Emanuel	☐ Lanier	☐ Putman	☐ Union	
☐ Catoosa	☐ Evans	☐ Laurens	☐ Quitman	☐ Upson	
☐ Charlton	☐ Fannin	☐ Lee	☐ Rabun	☐ Walker	
☐ Chatham	☐ Floyd	☐ Liberty	☐ Randolph	☐ Ware	
☐ Chattahoochee	☐ Franklin	☐ Lincoln	☐ Schley	☐ Warren	
☐ Chattooga	☐ Gilmer	☐ Long	☐ Screven	☐ Washington	

Comments: (2000 character limit)

Apps Online

Agency History and Experience

Agency History and Experience

1. What is the mission of your organization? (2000 character limit)

2. Describe your agency's ability to implement the program you propose in terms of the history, staffing, position in the community, and ability to identify and serve clients? (2000 character limit)

3. Use of Homeless Information System (HMIS) is required for the purposes of documentation of client data and reporting. Describe your capacity and experience of using HMIS data collection and reporting (2000 character limit)

Agency History and Experience

- What is the mission of your organization? (250 characters)

- Describe your agency's ability to implement the program you propose in terms of the history, staffing, position in the community, and ability to identify and serve clients? (2000 characters)

- Use of Homeless Management Information System (HMIS) is required for the purposes of documentation of client data and reporting. Describe your capacity and experience of using HMIS, data collection and data reporting.

Documentation of Need

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Documentation of Need

Applicant must be able to document the community need that the proposed project is expected to address. Applicant must also be able to provide agency level or community-level data to justify need for the service. If there are other available sources of funding for the proposed service, the applicant must be able to demonstrate why there is a need to fund this service.

1. Describe the needs in your community for housing and support services for those individuals who are low-income and living with HIV/AIDS and their families? (2000 character limit)

2. Describe how your proposed activity will meet an identified local need. Does the program target any sub-populations such as unaccompanied youth, veterans, chronically homeless, returning citizens, domestic violence victims/survivors or the transgender? (2000 character limit)

Apps Online

Documentation of Need

- Describe the needs in your community for housing and support services for those individuals who are low-income and living with HIV/AIDS and their families?

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Documentation of Need (continued)

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Documentation of Need (continued)

3. How will you do outreach to HOPWA beneficiaries including these sub-populations?
(2000 character limit)

4. What measures do you take to make activities accessible to non-English speaking populations?
(2000 character limit)

Documentation of Need (continued)

- How will you do outreach to HOPWA beneficiaries including these sub-populations?

- What measures do you take to make activities accessible to non-English speaking population?

Linkage to Care

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Linkage to Care

1. Please describe how you will determine if consumers are linked to medical care and how the project will assist consumers who are not in HIV medical care. (2000 character limit)

2. Explain your referral process to link consumers to other non-HIV services.
(2000 character limit)

Linkage to Care

- Please describe how you will determine if consumers are linked to medical care and how the project will assist consumers who are not in HIV medical care.

- Explain your referral process to link consumers to other non-HIV services.

Outcome, Objectives and Evaluation Method

Outcome Objectives and Evaluation Method

The Office of HIV/AIDS Housing (OHH) has established a set of values for implementing HOPWA Modernization. These values are:

1. No person should become homeless as the result of HOPWA Modernization;
2. All funds should be used to meet the needs of eligible households, with no funds recaptured from grants; and
3. Grantees should ensure their project designs meet the changing needs of the modern HIV epidemic, with the goal of positive health outcomes and reduced viral loads for HOPWA assisted households.

1. Describe your program proposed outcomes based on HOPWA Modernization values. Outcomes must be specific, measurable, attainable, relevant and time bound. (2000 character limit)

2. Describe the indicators the organization will use during the year to monitor progress towards the proposed outcomes. (2000 character limit)

Apps Online

Outcome, Objectives and Evaluation Method

- The Office of HIV/AIDS Housing (OHH) has established a set of values for implementing HOPWA Modernization. These values are:

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-

- Describe your program proposed outcomes based on HOPWA Modernization values. Outcomes must be specific, measurable, attainable, relevant and time bound.

- Describe the indicators the organization will use during the year to monitor progress towards the proposed outcomes.

Continuous Quality Improvement

Continuous Quality Improvement

Applicant must show that the organization is able to measure client satisfaction with the services they provide; provide information on the process undertaken to gather satisfaction input from clients; and, demonstrate how previous results of client satisfaction surveys impact on service delivery. Please indicate if the applicant has meaningful Involvement of persons living with HIV/AIDS (PLWHA) in the program development process, services, policies and procedures.

Please indicate by checking if the organization have the following:

☒ 1. Client satisfaction surveys

☒ 2. Client grievance procedure that is accessible and available to the clients served

☐ 3. PLWHA serving as Board members and or staff

Continuous Quality Improvement

- Please indicate by checking if the organization has the following:
  - Client satisfaction surveys – Date of last completed - _____.
  - Describe the improvements incorporated in the program.
  - Client grievance procedure that is accessible and available to the clients served
  - PLWHA serving as Board members and or staff
  - Any other method

HOPWA Budget

- Complete HOPWA Budget for each HOPWA Activity separately

- Project the estimated number of beneficiaries to receive assistance

- Complete Budget Narrative explaining the amount requested and other agency funding resources to support the program

HOPWA Budget - FBH

HOPWA BUDGET
I Facility-Based Housing (FBH) Assistance

Facility-Based Housing (FBH) rental assistance includes Facility-Based or Project-Based Housing, Sponsor-Based Rental Assistance (Shelter + Care Support), Master-Leasing and Hotel/Motel Vouchers / Short-term Housing / Transitional Housing, operating costs for housing including rent, utilities, insurance, furniture/furnishing, maintenance; security, staff salaries/ benefits, supplies, and other incidental costs. The HOPWA subsidy is attached to a specific building or unit paid by the applicant agency. Please complete budget for the type/s of FBH applying for

Budget Information Summary	Facility Based or Project Based Rental Assistance	Sponsor-Based Rental Assistance S+C Support	Master Lease	Hotel/Motel Voucher/ Short-term/ Transitional Housing	SubTotal
Rent		▇			
Utilities		▇			
Insurance					
Furnishing / Equipment					
Maintenance of Facility / Equipment					
Security			▇	▇	
Supplies					
Staff Salaries / Benefits					
HOPWA Funds Requested					
Other Funds Committed					
Total Project Cost					

Project number of PLWHA to receive assistance (input) [   ]

Budget Narrative

The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000

HOPWA Budget - TBRA

II Tenant-Based Rental Assistance (TBRA)

Tenant-Based Rental Assistance (TBRA) is a rental subsidy used to help participants obtain permanent housing in the private rental housing market with lease under their name that meets HOPWA Habitability Standards, HUD fair market rent is rent reasonable.

Budget Information Summary ..	Tenant - Based Rental Assistance (TBRA)	
Rent		
Utilities		
Supplies		
Staff Salaries / Benefits		
HOPWA Funds Requested		Project number of PLWHA to receive assistance
Other Funds Committed		
Total Project Cost		

Budget Narrative

The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000

HOPWA Budget - STRMU

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III Short-Term Rent, Mortgage, Utilities (STRMU) Assistance

The goal of HOPWA STRMU assistance is to provide short-term interventions that help maintain stable living environments for households who are experiencing a financial crisis and the potential loss of their housing arrangement. STRMU assistance is a tool for the prevention of homelessness.

Budget Information Summary ..	STRMU
Short-Term Rent, Mortgage and Utility assistance	
Staff Salaries / Benefits	
HOPWA Funds Requested	
Other Funds Committed	
Total Project Cost	

Project number of PLWHA to receive assistance

Budget Narrative

The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000
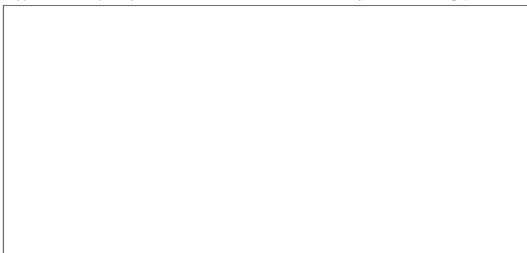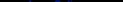
HOPWA Budget - PHP

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IV Permanent Housing Placement

Permanent Housing Placement services may be used to help eligible persons establish a new residence where on-going occupancy is expected to continue. It may be used to compliment other forms of HOPWA housing assistance. It could include Security Deposits and or First Month Rent, not more than equal to 2 months of assistance in total

Budget Information Summary ..	Permanent Housing Placement
Rent / Deposits	
Utilities / Deposits	
Supplies	
Staff Salaries / Benefits	
HOPWA Funds Requested	
Other Funds Committed	
Total Project Cost	

Project number of PLWHA to receive assistance

Budget Narrative

The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000 character limit)
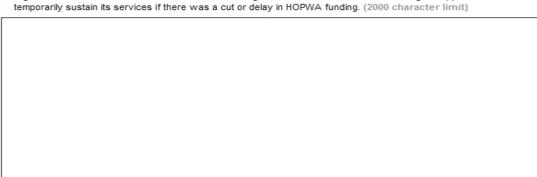
HOPWA Budget – Supportive Services

V Supportive Services

All households receiving HOPWA housing assistance must be provided with appropriate supportive services. Supportive services may be funded through other resources or through linkage to other programs. HOPWA funds may also be used but should be limited. Please check all the services directly provided. Referrals are part of Case management services. Case management services are for clients meeting HOPWA eligibility.

Budget Information Summary ..	Supportive Services
Case Management	
Child Care	
Educational services	
Employment Assistance and Job Training for PLWHA	
Legal Services	
Nutritional services (including meals)	
Mental Health	
Substance Abuse Treatment and Counseling services	
Transportation assistance	
HOPWA Funds Requested	
Other Funds Committed	Project number of PLWHA to receive assistance
Total Project Cost	

Budget Narrative
The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000 character limit)

HOPWA Budget –
Housing Information and Referral Services

VI Housing Information and Referral Services

Housing Information and Referral Services include assistance with referrals to affordable housing resources, assistance in locating available, affordable, and appropriate housing units, working with property owners to secure units for participants, homelessness prevention, and other housing-related activity

Budget Information Summary ..	Housing Information and Referral Services
Supplies	
Staff Salaries / Benefits	
HOPWA Funds Requested	
Other Funds Committed	
Total Project Cost	

Budget Narrative

The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000 character limit)

HOPWA Budget – Resource Identification

VII Resource Identification

Resource Identification services include assistance with identifying housing resources, establishing, coordinating, and/or developing housing assistance resources for eligible persons, hiring staff or consultants to develop housing finance package for a specific housing project, conducting preliminary research and determining feasibility of specific housing related initiatives.

Budget Information Summary ..	Resource Identification
Supplies	
Staff Salaries / Benefits	
HOPWA Funds Requested	
Other Funds Committed	
Total Project Cost	

Budget Narrative

The budget narrative explains what the numbers in the budget represent and how you arrived at them. The organization must demonstrate that it has other funding sources and has diversified funding to supplement or temporarily sustain its services if there was a cut or delay in HOPWA funding. (2000 character limit)

Application Submission Page

Application Submission Page

Applicant (Agency) Legal Name	
Contact Person Email	dtester@email.com
Contact Person	Dave Tester
Contact Person Phone	4444444
HMIS Project Name	

Funds Requested

SUBMIT

04/04/2019 03:25:13 PM

FFY 2020 HOPWA Application

For more information about the HOPWA program please visit our website at:

https://www.dca.ga.gov/safe-affordable-housing/homeless-special-needs-housing/housing-opportunities-persons-aids-hopwa

FFY 2020 HOPWA Application

Questions or concerns about the HOPWA application process? Please contact:

- Dr. Harvinder K Makkar
  - Harvinder.makkar@dca.ga.gov
  - 470.382.3518
- John Shereikis
  - John.Shereikis@dca.ga.gov
  - 470.747.9331

Thank You

Thank you for your attention and good luck!

QUESTIONS?

Georgia® Department of Community Affairs