

RFP Response Form

U.S. Department of Housing and Urban Development (HUD) 2016 Reallocation Funding for Permanent Supportive Housing and Rapid Re-Housing Programs

REQUIREMENTS

The maximum score a Proposal can receive is 105 points for a Permanent Supportive Housing (PSH) Program and 105 points for a Rapid Re-Housing (RRH) Program. Please respond to the questions in the following sections:

All Proposers must complete this section once:

A. Organizational Experience (40 points)

Proposers may complete one or both of the following sections; each proposed Program must be unique:

B. Permanent Supportive Housing Program (65 points)

C. Rapid Re-Housing Program (65 points)

A. Organizational Experience (40 points). Complete this section only once, even if you are proposing multiple programs. Your response to this section should not exceed 10 pages.

1. Describe your organization's experience providing housing and supportive services. If you currently run any housing programs, please complete the chart below.
Incorporated as a Community Mental Health/Mental Retardation center in 1969, the Chartiers Center service portfolio offers an array of traditional and non traditional treatment, support and housing options. These include Service Coordination, a Residential Treatment Program, Drug and Alcohol, Behavioral Health Out Patient, and the Hestia Project, a PSH program. A variety of Chartiers Center's staff have experience with the chronically homeless as well as peripheral activities that support advocacy, problem resolution and collaborative activities to address the needs of homeless individuals and families in Allegheny County. Many of Chartiers staff, including Blended Service Coordinators have completed an eleven day Co-Occurring training facilitated by Greenbriar Treatment Center. In addition Chartiers Blended Service Coordinators' work with the chronically homeless individuals and families throughout Allegheny County evidences success in assisting and supporting individuals and families to move from the street to stable housing. Chartiers Centers Chief Executive Officer and Chief Operating Officer have specific experience in the operation of HUD funded programs for the chronically homeless dual diagnosed mentally ill individuals and families which include traditional housing, Safe Haven, Shelter Plus Care and scattered site permanent housing as well as the provision of Service Coordination. In addition, both the Chief Operating Officer and the PSH Supervisor have, at various times, taken on leadership roles and/or participated at the County level including membership on the Housing Advisory Board, the Local Housing Option Team, the Continuum of Care Committee and as a determiner when a housing appeal has been requested. The PSH Program Supervisor is a Masters level mental health professional and is competent in HUD regulations, HMIS, and Motivational Interviewing both as a direct worker and in a Supervisory role.
Chartiers Center experience with Permanent Supportive Housing is its Hestia Program
Incorporated as a Community Mental Health/Mental Retardation center in 1969, the Chartiers Center service portfolio offers an array of traditional and non traditional treatment, support and housing options. These include Service Coordination, a Residential Treatment Program, Drug and Alcohol, Behavioral Health Out Patient, and the Hestia Project, a PSH program. A variety of Chartiers

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Center's staff have experience with the chronically homeless as well as peripheral activities that support advocacy, problem resolution and collaborative activities to address the needs of homeless individuals and families in Allegheny County. Many of Chartiers staff, including Blended Service Coordinators have completed an eleven day Co-Occurring training facilitated by Greenbriar Treatment Center. In addition Chartiers Blended Service Coordinators' work with the chronically homeless individuals and families throughout Allegheny County evidences success in assisting and supporting individuals and families to move from the street to stable housing. Chartiers Centers Chief Executive Officer and Chief Operating Officer have specific experience in the operation of HUD funded programs for the chronically homeless dual diagnosed mentally ill individuals and families which include traditional housing, Safe Haven, Shelter Plus Care and scattered site permanent housing as well as the provision of Service Coordination. In addition, both the Chief Operating Officer and the PSH Supervisor have, at various times, taken on leadership roles and/or participated at the County level including membership on the Housing Advisory Board, the Local Housing Option Team, the Continuum of Care Committee and as a determiner when a housing appeal has been requested. The PSH Program Supervisor is a Masters level mental health professional and is competent in HUD regulations, HMIS, and Motivational Interviewing both as a direct worker and in a Supervisory role.

The Hestia program provides the opportunity for individuals to exit or successfully graduate from the Hestia Program yet still retain some lease support if it is necessary via the Section 8 voucher system, thus creating options for newly identified individuals/families in need of the Hestia Program.

Current Housing Programs				
Program	Population Served	Number Units/Beds	Annual Budget	Annual Utilization Rate
HESTIA	Chronically Homeless with and SPMI Diagnosis	89	\$1,699,865.000	100%
Click here to enter text.	Click here to enter text.	Enter #	Enter \$	Enter %
Click here to enter text.	Click here to enter text.	Enter #	Enter \$	Enter %

- Describe the basic organizational and management structure of your organization. Include evidence of effective internal communication, external coordination with outside partners and an adequate financial accounting system.

Chartiers Center is a non-profit agency that provides a wide range of behavioral health, IDD, and housing services. The Board of Directors governs the agency with the following chain of command: Chief Executive Officer, Service line Chief Operating Officers, Program Directors, Supervisors and line staff.

Chartiers Center recognizes the value of both inter and intra-program communication as well as inter-agency communication. Chartiers Center has the expectation that weekly, bi-monthly, and monthly meetings occur on a regular basis with attendance being mandatory. Chartiers Center uses both electronic and voice communication tools, including confidential email via our electronic record that exceeds all HIPAA requirements.

Communication with other providers is an expectation in order to provide quality integrated care. Various staff attend numerous Housing, Provider, Inter-Agency Program meetings, and meetings

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with payors and governing staff. This is in addition to regional and state-wide meetings of professional organizations directly related to the multiple service provided by Chartiers Center. Coordination with external providers is frequently achieved via team meetings and sharing of documents. Staff directly related to housing services are available 24/7 which has assisted in building a very positive relationship with numerous landlords across Allegheny County.

Chartiers Centers uses Microsoft Dynamic Great Plains (GP) financial accounting system. GP offers a comprehensive set of business tools and Gives Chartiers Center the ability to easily create and manage budgets, automate data entry, preform reconciliations, reduce human error, and provide detailed financial reporting with the assistance of a fully integrated budgeting Microsoft Forecaster and Financial Statement software Microsoft Dynamic ERP Management Reporter.

3. Describe any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by your organization (if any).

There are no unresolved or audit findings.

4. Describe your organization's proposed staffing plan.

- a. Staff experience working with the homeless population and in the housing community
Chartiers Center's Service Coordination staff has a wealth of experience in working with individuals all ages by participating in our Hestia Program and will bring those experiences into the Atlas Project. Staffs' experience in adult coordination of care and support by utilizing a community support and team structure enables the participants to rapidly locate and maintain housing. Staff recognizes the importance of the housing first approach and assisting the participants in devising goals to address their needs. All staff involved with the participants has a least a Bachelors Degree within the behavioral health field with a minimum of 3 years experience in working with individuals experiencing substance abuse and chronic persistent mental illness and homelessness, and other housing issues, as well as barriers to addiction services, education, benefits, behavioral and physical health care, and community supports. In addition to the wide age range of the population served, staff have established and maintained a positive working relationship with numerous landlords across Allegheny County, allowing for a wide range of housing options and locations. Staff has also developed a collaborative relationship with providers within the housing community as well as community organizations such as religious, vocational and educational organizations, food banks and Social Security to mention a few. All Supervisors and executive level leadership have a Masters Degree within the Behavioral Health field and more than 5 years experience in working with a population that experiences multiple disabilities and deficiencies preventing them from maintaining a quality life experience. The combination of Service Coordination Staff and Supervisory experience, as well as the experiences of Chartiers Behavioral Health staff, Drug and Alcohol staff, and alternative housing staff provide a comprehensive team in addressing the needs of the population served.

- b. Your organization's strategy for recruiting and retaining quality staff

Chartiers Center has an aggressive recruiting approach that incorporates staff recommending new applicants, multiple media announcements of employment opportunities and electronic recruitment avenues. An electronic application process combined with the Agency's expectation to meet with applicants as soon as possible assists in minimizing any time that a position may be

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vacant. If a vacancy occurs, there is a contingency plan in place to ensure services are not interrupted.

Chartiers Center offers a quality inclusive benefits package and as well as the tools needed to do the job. These tools include, but are not limited to each staff having their own assigned agency vehicle, a cell phone and a surface pro tablet with remote connectivity to the electronic health record. Staff also have immediate access to two R.N. Blended Service Coordinators who can provide support and consultation for individuals who have co morbid diagnosis. This is an additional support and consumers find valuable.

- c. Your organization's professional development and staff training program
Staff are provided a minimum of 12 training hours per year. This is in addition to trainings and staff development activities that occur during the weekly one hour staff meetings. Funds, as well as time from the job, are made available to staff for continuing his/her education. In addition, Chartiers is part of the Behavioral Health Home Plus [BHHP] which will provide extensive and ongoing training focusing on physical health care issues and the relationship between behavioral and physical health care.
 - d. Your organization's plan for staff performance management
Staff are required to meet with his/her Supervisor at least once per week in which part of that time is used to assess current job performance related to regulatory requirements, use of support services, use of motivational interviewing techniques etc. An initial three month probationary review is completed as well as an annual review. If there is a deficiency noted a plan is created to ensure the employee masters the deficiency and is successful. This plan is created involving the employee, their supervisor and input from executive leadership.
5. Describe your organization's use of HMIS. Indicate if you are a victim service provider not required to participate in HMIS.
- a. Your organization's previous experience inputting data into HMIS
Chartiers Center has four (4) years experience in HMIS data entry, and report retrieval, and is currently working daily in HMIS specific to Chartiers Center's Hestia Project.
Chartiers PSH Supervisory staff is required to enter data collected into HMIS within one business day of receipt of the data.
 - b. Your organization's plan for managing referrals through HMIS, strategy for entering the required data into HMIS in a timely manner and who on your staff is responsible for this
The Program Supervisor is responsible for entering all data into HMIS within 24 hours of receipt. Referrals will be entered within this time line expectation as well. Once entered into HMIS, the participant will be assigned a BSC. The referrals will be managed daily to update as new data is received. The Continuum of Care Specialist will assist the Program Supervisor to follow up on collecting needed data/information that may not be included in the original referral.
 - c. Your organization's quality assurance procedures for entering data into HMIS and correcting data when necessary

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Data is reviewed, on a regular basis, by the PSH Supervisor and the Supervisor's colleagues. The Atlas Program will join with the Hestia Program as part of the QIP Team and will employ the standard PDSA method of monitoring and implementing program improvement.

6. Please fill out the following charts to indicate if you will follow a Housing First model for the proposed PSH and/or RRH Program(s). (Note: a project is considered Housing First only if "none of the above" is the only selection chosen). Provide a brief narrative on your organization's use of the Housing First model in the narrative box below.

Does the Program(s) ensure that Participants are not screened out based on the following items?	
Select all that apply	
Having too little or no income	<input type="checkbox"/>
Active history of substance use	<input type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input type="checkbox"/>
History of domestic violence	<input type="checkbox"/>
None of the above	<input checked="" type="checkbox"/>

Does the Program(s) ensure that Participants are not terminated from the program for the following reasons?	
Select all that apply	
Failure to participate in supportive services	<input type="checkbox"/>
Failure to make progress on a service plan	<input type="checkbox"/>
Loss of income or failure to improve income	<input type="checkbox"/>
Being a victim of domestic violence	<input type="checkbox"/>
Any other activity not covered in a lease agreement typically found in the project's geographic area	<input type="checkbox"/>
None of the above	<input checked="" type="checkbox"/>

[Click here to enter text.](#)

7. Describe your organization's experience in leveraging other federal, state, local and private sector funds.
As evidenced by Chartiers' model of care, we have effectively interlaced HUD funds [for lease support] with Health Choices funds [for supportive services]. This strengthens and stabilizes the core elements of the program. Additional funds have been added via an active effort to procure donations and in-kind service.
8. Attach an audited financial report for your organization and describe how it reflects your financial policies and organizational stability (does not count towards page limit).

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Chartiers Center enjoys a position of financial stability that is attributable to a business model that emphasizes that a strong adherence to compliance, internal controls and use of "Generally Acceptable Accounting Principles" [GAP] and allows Chartiers Center to enhance the services that are provided and to support staff. Financial policies are reviewed annually and approved by the Finance Committee of the Board of Directors. Additionally, the Chartiers Center Compliance Plan is reviewed annually with the Board as well with the topic of Compliance being a standing reporting item at each meeting. The external audit firm Maher Duessel has issued a Management form the most recent audit indicating there are no findings for any program or business transaction at Chartiers Center.

The majority of the requested funding will be used to provide rental assistance plus security deposit for the participants served under the Atlas Project. This is equal to \$313,365.00 in rental assistance and security deposits. Chartiers Center will provide supportive services for at least 35 adult individuals, 20 of whom will have at least one child under the age of 18 years.

B. Permanent Supportive Housing (PSH) Program (65 points). If you are proposing a PSH Program, fill out the questions below. If you are not proposing a PSH Program, leave this section blank and move to the section for the RRH Program. Note that each program will be scored separately. Your response to this section should not exceed 15 pages.

1. Provide a unique Program name. Note that it cannot be called "[Your organization's name] PSH."
Atlas Project
2. Provide a summary description of the entire scope of your organization's proposed PSH Program. Chartiers Center's Atlas Project will mirror Chartiers Center's Hestia Project, a successful Permanent Supported Housing (PSH) HUD program currently housing over 85 individuals and families. The Atlas Project will showcase several evidenced practices in offering scattered site leased apartment units for 16 individuals and 8 families who have a serious mental illness and who meet the HUD definition of chronic homelessness or near homeless. These individuals may also be experiencing other disabilities as well. The individuals/families will benefit from the "Housing First" model which will assume to provide housing without stipulation of prior or continued treatment or service criteria. The Atlas Project will be consumer directed and will promote and support the participant's needs and goals he/she identifies. Specifically, the Atlas Project will consist of scattered site housing located in the neighborhood of the participants choosing near family, amenities, etc. that are important to the participant. Based upon those guiding principles each individual will work closely with a Service Coordinator who has demonstrated success in working with the homeless in housing programs and will assist the participant in working toward his/her personal goals, develop goals in becoming a good neighbor and self sufficient member of the community. The Atlas Project participants will benefit from the experience of the Service Coordinators who all have positive working relationships with numerous landlords throughout Allegheny County, benefit acquisition procedures including SOAR, and a wide array of service providers (i.e. behavioral health, educational, employment, health care, etc.). Support and community services will be introduced as the individual is ready and/or desires it.

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3. Describe the estimated schedule for the proposed activities, the management plan and the method for assuring effective and timely completion of all work for the PSH Program.
The Atlas Project will be implemented immediately upon receipt of the grant by using the currently recognized and successful Hestia Program design. The Atlas Project will incorporate the current experienced staff (administrative, clinical, support and fiscal) who are working in the Hestia Program with the anticipated addition of a Peer Support Person and a Nurse RN Administrative Service Coordinator. The luxury of incorporating the Atlas Project into the outline of the Hestia Program will allow for timely data entry and reporting via HMIS, positive relationships with numerous landlords throughout Allegheny County, and timely and accurate fiscal accounting. The Atlas Project will follow all current Point in Time reporting requirements, attain, completed by experienced staff.
4. Describe your organization's strategy to serve PSH Program Participants
- a. The Target Population for the PSH Program is adults with a documented disability. Beyond that, the PSH Program does not identified a specific subpopulation focus. If your organization will propose serving a specific subpopulation, please identify it by completing the Population Focus chart below. Provide a narrative describing the specific subpopulation(s) and why you propose the specific focus.

PSH Program			
Population Focus			
Chronically Homeless	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input checked="" type="checkbox"/>
Youth under 25	<input type="checkbox"/>	Mental Illness	<input checked="" type="checkbox"/>
Families with children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
Other: Specify - Click here to enter text.			

Chartiers Atlas Project will serve 15 individuals and 20 families

- b. In the charts below, summarize your organization's proposed PSH Program. The numbers are intended to reflect your organization's plan for the PSH Program at maximum capacity. Numbers should reflect a single point in time and not the number serviced over the course of a year or grant term.

PSH Program				
Persons in Households with at Least One Adult and One Child				
	Adults over age 24	Adults ages 18-24	Children under age 18	Total Persons
Chronically Homeless Non-Veterans	20	Enter #	Enter #	20
Chronically Homeless Veterans	Enter #	Enter #	Enter #	Enter #
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #	Enter #

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People with Severe Mentally Illness	20	Enter #	Enter #	20
Victims of Domestic Violence	Enter #	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	25	25

0

PSH Program for Reallocation Funds			
Persons in Households without Children			
	Adults over age 24	Adults ages 18-24	Total Persons
Chronically Homeless Non-Veterans	10	5	15
Chronically Homeless Veterans	Enter #	Enter #	Enter #
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #
People with Severe Mentally Illness	Enter #	Enter #	Enter #
Victims of Domestic Violence	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	Enter #

PSH Program			
Persons in Households with Only Children			
	Accompanied Children under age 18	Unaccompanied Children under age 18	Total Persons
Chronically Homeless Non-Veterans	Enter #	Enter #	Enter #
Chronically Homeless Veterans	Enter #	Enter #	Enter #
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #
People with Severe Mentally Illness	Enter #	Enter #	Enter #
Victims of Domestic Violence	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	Enter #

Housing Type	Units	Beds	Dedicated Chronically Homeless Beds	Non- Chronically Homeless Beds
Scattered Site within Allegheny County	35	55	55	0

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Households	Households with at least one adult and one child	Adult households without children	Households with Only Children	Total
Total number of households	20	15	Enter #	35

Characteristics	Persons in households with at least one adult and one child	Adult persons in households without children	Persons in households with Only Children	Total
Adults over age 24	20	15	Enter #	35
Adults over age 18-24	Enter #	5	Enter #	5
Accompanied children under age 18	Enter #	Enter #	Enter #	Enter #
Unaccompanied children under age 18	Enter #	Enter #	Enter #	Enter #
Total Persons	20	15	Enter #	35

5. Describe your organization's experience with the PSH Program target population and your chosen subpopulation.
 Chartiers Center experience with Permanent Supportive Housing is its Hestia Program which has been operational for three and a half (3.5) years and supporting more than 120 individuals/families. The Hestia Program has provided scattered site rental assistance and supports to severely ill individuals who are chronically homeless; both individuals and families. Through our understanding of the inherent individual desire to attain ones goals, be autonomous and to "do better", the model of care embraces all of those elements. Participants need not "prove themselves" through pre-requisite "clean time", treatment adherence or other behavioral expectation. Blended Service Coordinators, who have expertise in finding and coordinating a variety of resources and collaborative relationships provide the one on one support that is titrated to meet the needs of the individual and is negotiated to enhance success. Consequently, we are proud that this model has proven effective and that our outcomes exceed the standards set by HUD. The Pittsburgh Foundation has recognized the value of the Hestia Program and highlighted a consumer and his success in the Hestia Program. The video can be viewed via the following URL:
www.youtube.com/watch?v=AEXE3br5WDo
 Recently, we began to phase in the opportunity for individuals to exit or successfully graduate from the Hestia Program yet still retain some lease support if it is necessary via the Section 8 voucher system, thus creating options for newly identified individuals/families in need of the Hestia Program.

6. Describe your organization's housing facility, facilities or sites for the PSH Program, including physical description, number of beds and geographic location.

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All sites in Chartiers Center’s Hestia program are scattered sites throughout Allegheny County. The individual holds the lease with the landlord. The current PSH program is a mix of individuals and families which include one bedroom apartments to three bedroom apartments.

7. Describe your organization’s plan for coordinating with outside partners to ensure that the PSH Program is successful, including your plan for leveraging funds and support.
Chartiers Center will continue to coordinate and collaborate with our extensive list of service providers, support organizations and landlords who have partnered with us in the Hestia Project. As part of the on going goal to continually strengthen our programs, the Atlas Project will look to add additional partners to ensure the participants’ needs are met.

8. In the following Supportive Services chart indicate who will provide the Supportive Services and how often PSH Program Participants will receive the Supportive Services. The chart has drop-down lists that provide specific answers for you to use. If your organization will not be providing or subcontracting the listed service in the chart, then do not complete that particular service. Provide a brief narrative on your organization’s plan for Supportive Services in the narrative box below.

PSH Program		
Supportive Service	Provider	Frequency
Assessment of Service Needs	Your organization	As needed
Assistance with Moving Costs	Your organization	Annually
Case Management	Your organization	Daily
Child Care	A partner agency	As needed
Education Services	A partner agency	As needed
Employment Assistance & Job Training	A partner agency	As needed
Food	A partner agency	As needed
Housing Search & Counseling Services	Your organization	As needed
Legal Services	A non-partner agency	As needed
Life Skills Training	A partner agency	As needed
Mental Health	Your organization	Weekly
Outpatient Health Services	Your organization	Bi-weekly
Outreach Services	Your organization	As needed
Substance Abuse Treatment	Your organization	Daily
Transportation	A non-partner agency	As needed
Utility Deposits	Your organization	Annually

Chartiers Center will provide Blended Service Coordination, Administrative Service Coordination, R. N. Service Coordination, Behavioral Health Out Patient Services, Respite/partial services will be provided as indicated and Drug and Alcohol Out Patient Services. Chartiers Center will also assist in ensuring each participant has the housing items needed to begin his/her PSH. Support will be available 24/7 via Chartiers Center After-Hours On Call which is staffed by a Blended Service

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Coordinator. Additional support services not provided by Chartiers will be provided by another Allegheny County Provider with whom Chartiers Center has a Letter of Agreement.

9. Describe your organization’s plan to track and achieve the HUD performance standards for the PSH Program and fill out the chart below:
- a. Maintaining permanent housing or exiting to permanent housing
Tracking will be via data sources, i.e. HMIS, monthly rent check tracking, etc., with the data collected by the PSH Program Supervisor from entry into the program until exit. Standards will be achieved through the diligent and collaborative work between the participant, the Blended Service Coordinator and Chartiers partners for this program.
 - b. Maintaining or increasing income
Tracking will be via data sources, i.e. HMIS, monthly rent check tracking, etc. with the data collected by the PSH Program Supervisor from entry into the program until exit. Standards will be achieved through the diligent and collaborative work between the participant, Chartiers Blended Service Coordinator and Chartiers partners for this program. The Blended Service Coordinator will be responsible for assisting the consumer in linking to benefits and/or employment as well as developing a budget that includes a savings plan even if only minimal.
 - c. Maintaining or increasing non-cash benefits (e.g., Food Stamps, Medicaid or Private Health Insurance)
Chartiers Blended Service Coordinator, Administrative Service Coordinator and/or R.N. Service Coordinator hold the responsibility to ensure the consumer is provided with support and linkage to all eligible benefits and will assess the consumer’s standing and eligibility on a regular basis.

PSH Program			
Housing Measures			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Participants remaining in permanent housing or exiting to permanent housing destinations at the end of the operating year	35	35	90
Participants maintaining or increasing their total income (from all sources) at the end of the operating year	35	35	100
Participants maintaining or increasing their non-cash benefits at the end of the operating year	35	35	100

10. Describe other outcomes that your organization plans to achieve in the PSH Program and your organization’s plan for tracking and achieving those outcomes. Use the chart below to summarize those outcomes. Insert or delete lines/charts as necessary.

PSH Program

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Additional Performance Measures
Life-Skills Homeless PSH Consumers enroll and complete life skills class(es)
Health care services will be available to participants
Participants will be linked to treatment services

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Life-Skills Homeless PSH Consumers enroll and complete life skills class(es)	35	35	90
Data source and data collection method: HMIS and Electronic Health Record			
Specific data elements and formula proposed for calculating results: The Target % is determined by the number of participants who complete the Proposed Measure divided by the number of program participants. This information will be managed by the Program Supervisor who will gather the data via HMIS, Electronic Health Record review, and report by the BSC assigned to the participant.			
Rationale for why the proposed measure is an appropriate indicator of performance: Life skills will help to ensure independent housing success.			

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Health care services will be available to participants	35	35	100
Data source and data collection method: HMIS and Electronic Health Record			
Specific data elements and formula proposed for calculating results: The Target % is determined by the number of participants who complete the Proposed Measure divided by the number of program participants. This information will be managed by the Program Supervisor who will gather the data via HMIS, Electronic Health Record review, and report by the BSC assigned to the participant.			
Rationale for why the proposed measure is an appropriate indicator of performance: Research indicates that integrated care reduces hospitalizations with an increase of quality of life. It is believed this Proposed Measure will increase the participants' opportunity to have gainful employment/education with increased quality of life.			

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Participants will be linked to treatment services	35	35	100
Data source and data collection method: HMIS and Electronic Health Record			
Specific data elements and formula proposed for calculating results: The Target % is determined by the number of participants who complete the Proposed Measure divided by the number of program participants. This information will be managed by the Program Supervisor who will gather the data via HMIS, Electronic Health Record review, and report by the BSC assigned to the participant.			

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Rationale for why the proposed measure is an appropriate indicator of performance:
 As part of the Proposed Health Care Measure, engagement with integrated care combining behavioral health, physical health,(including dental, eye, etc.,) drug and alcohol as indicated, etc. will increase quality of life. If this Proposed Measure is not addressed, it is believed the participants increase his/her chances hospitalizations, inability to participate in the community and live independently.

11. Describe your organization’s plan for managing referrals and securing beds for PSH Program Participants. Fill out the chart below.

[Click here to enter text.](#)

PSH Program	
Enter the percentage of Participants that will be coming from each of the following locations	
100 %	Directly from the street or other locations not meant for human habitation
Enter %	Directly from emergency shelters
Enter %	Directly from safe havens
Enter %	From transitional housing and previously resided in a place not meant for human habitation or emergency shelters, or safe havens
Enter %	Persons fleeing domestic violence
100%	Total of above percentages

12. Describe your organization’s ability to effectively utilize federal funds and performing the scope of services described in the RFP for the PSH Program within funding and time limitations.

Funds are used to rapidly secure housing for chronically homeless individuals and families with supports and services provided as needed via a multidisciplinary team of individuals and providers. With more than 90% of participants receiving an increase in income, this has reduced the amount of federal dollars used per household, thus allowing for additional individuals and families to be served. This translated to an increase of participants by 37% working towards the national goal to end all homelessness by 2020. Funds are used only for housing units that meet or exceed HUD Requirements with strict adherence to Fair market Rent. Chartiers Fiscal Department is diligent in maintaining timely rental payments, clear and audit proof ledgers of monies spent and monies awarded. Chartiers Hestia Project’s fiscal and program audits have been clean, supporting the adherence to all regulations and requirements.

13. Provide a detailed budget narrative that clearly supports the PSH Program.

[Click here to enter text.](#)

14. The charts below are HUD’s specific budget format. Use the charts to provide details on your organization’s budget for the proposed PSH Program.

PSH Program	
Select the costs for which funding is being requested	
Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input type="checkbox"/>

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Leased Structures	<input type="checkbox"/>
Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input type="checkbox"/>
Operations	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

PSH Program			
Rental Assistance Budget			
Total request for grant term			\$356,070.00
Total units			35
Type of rental assistance	FMR Area	Total Units Requested	Total Request
TRA	Allegheny County	35	\$356,070.00

Type of Rental Assistance: TRA

Options include tenant-based (TRA), sponsor-based (SRA) and project-based assistance (PRA). Each type has unique requirements and Proposers should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: Allegheny County, PA.

Select the FY 2016 FMR area in which the project is located. The selected FMR area will be used to populate the rents in the chart below. See <https://www.huduser.gov/portal/datasets/fmr.html> for more information and how to determine your organization's FMR area.

PSH Program Persons							
Rental Assistance Budget Detail							
Size of Units	Number of Units		Fair Market Rent		Number of Months		Total
SRO	Enter #	X	Enter \$	X	Enter #	=	Enter \$
0 bedroom	Enter #	X	Enter \$	X	Enter #	=	Enter \$
1 bedroom	15	X	657.00	X	13	=	\$128,115.00
2 bedroom	15	X	827.00	X	13	=	\$161,265.00
3 bedroom	5	X	1,026.00	X	13	=	\$66,690.00
4 bedroom	Enter #	X	Enter \$	X	Enter #	=	Enter \$
5 bedroom	Enter #	X	Enter \$	X	Enter #	=	Enter \$
6 bedroom	Enter #	X	Enter \$	X	Enter #	=	Enter \$
7 bedroom	Enter #	X	Enter \$	X	Enter #	=	Enter \$
Total	Enter #	X	Enter \$	X	Enter #	=	Enter \$

PSH Program		
Supportive Services Budget		
Category	Quantity and Description	Annual Assistance Requested
Assessment of Service Needs	Click here to enter text.	Enter \$

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Assistance with Moving Costs	Click here to enter text.	Enter \$
Case Management	Click here to enter text.	Enter \$
Child Care	Click here to enter text.	Enter \$
Educational Services	Click here to enter text.	Enter \$
Employment Assistance	Click here to enter text.	Enter \$
Food	Click here to enter text.	Enter \$
Housing/Counseling Services	Click here to enter text.	Enter \$
Legal Services	Click here to enter text.	Enter \$
Life Skills	Click here to enter text.	Enter \$
Mental Health Services	Click here to enter text.	Enter \$
Outpatient Health Services	Click here to enter text.	Enter \$
Outreach Services	Click here to enter text.	Enter \$
Substance Abuse Treatment Services	Click here to enter text.	Enter \$
Transportation	Click here to enter text.	Enter \$
Utility Deposits		
Operating Costs		
Total Services Requested		0.00

PSH Program	
Summary for Match	
Total Value of Cash Commitments	0.00
Total Value of In-Kind Commitments	0.00
Total Value of All Commitments	0.00

PSH Program					
Summary for Leverage					
Total Value of Cash Commitments		\$ 35,000.00			
Total Value of In-Kind Commitments		\$728,180.00			
Total Value of All Commitments		\$763,180.00			
Match or Leverage	Type	Source	Contributor	Date of Commitment	Value of Commitments
Leverage	In-Kind	Government	Chartiers Center	Enter Date	Enter \$
Choose an item.	Choose an item.	Choose an item.	Click here to enter text.	Enter Date	Enter \$
Choose an item.	Choose an item.	Choose an item.	Click here to enter text.	Enter Date	Enter \$

PSH Program			
Summary Budget			
Eligible Costs	Annual Assistance Requested	Grant Term	Total Assistance Requested for Grant Term

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1a. Acquisition			Enter \$
1b. Rehabilitation			Enter \$
1c. New Construction			Enter \$
2a. Leased Units	Enter \$	Enter Time	Enter \$
2b. Leased Structures	Enter \$	Enter Time	Enter \$
3. Rental Assistance	\$356,070.00	1 year	\$356,070.00
4. Supportive Services	Enter \$	Enter Time	Enter \$
5. Operating	Enter \$	Enter Time	Enter \$
6. HMIS	Enter \$	Enter Time	Enter \$
7. Sub-total Costs Requested			Enter \$
8. Admin (up to 7%)			\$24,924.90
9. Total Assistance Plus Admin Requested			Enter \$
10. Cash Match			Enter \$
11. In-Kind Match			Enter \$
12. Total Match			Enter \$
13. Total Budget			\$380,994.90

C. Rapid Re-Housing (RRH) Program (65 points). If you are proposing an RRH Program, fill out the questions below. If you are not proposing a RRH Program, leave this section blank. Note that each program will be scored separately. Your response to this section should not exceed 15 pages.

1. Provide a unique Program name. Note that it cannot be called “[Your organization’s name] RRH.”
Click here to enter text.
2. Provide a summary description of the entire scope of your organization’s proposed RRH Program.
Click here to enter text.
3. Describe the estimated schedule for the proposed activities, the management plan and the method for assuring effective and timely completion of all work for the RRH Program.
Click here to enter text.
4. Describe your organization’s strategy to serve RRH Program Participants
 - a. The Target Population for the RRH Program is adults or families experiencing homelessness. Beyond that, the RRH Program does not identified a specific subpopulation focus. If your organization will propose serving a specific subpopulation, please identify it by completing the Population Focus chart below. Provide a narrative describing the specific subpopulation(s) and why you propose the specific focus.

RRH Program			
Population Focus			
Chronically Homeless	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>

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Youth under 25	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
Other: Specify - Click here to enter text.			

Click here to enter text.

- b. In the charts below, summarize your organization’s proposed RRH Program. The numbers are intended to reflect your organization’s plan for the RRH Program at maximum capacity. Numbers should reflect a single point in time and not the number serviced over the course of a year or grant term.

RRH Program				
Persons in Households with at Least One Adult and One Child				
	Adults over age 24	Adults ages 18-24	Children under age 18	Total Persons
Chronically Homeless Non-Veterans	Enter #	Enter #	Enter #	Enter #
Chronically Homeless Veterans	Enter #	Enter #	Enter #	Enter #
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #	Enter #
People with Severe Mentally Illness	Enter #	Enter #	Enter #	Enter #
Victims of Domestic Violence	Enter #	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	Enter #	Enter #

RRH Program			
Persons in Households without Children			
	Adults over age 24	Adults ages 18-24	Total Persons
Chronically Homeless Non-Veterans	Enter #	Enter #	Enter #
Chronically Homeless Veterans	Enter #	Enter #	Enter #
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #
People with Severe Mentally Illness	Enter #	Enter #	Enter #
Victims of Domestic Violence	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	Enter #

RRH Program

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Persons in Households with Only Children			
	Accompanied Children under age 18	Unaccompanied Children under age 18	Total Persons
Chronically Homeless Non-Veterans	Enter #	Enter #	Enter #
Chronically Homeless Veterans	Enter #	Enter #	Enter #
Non-Chronically Homeless Veterans	Enter #	Enter #	Enter #
Chronic Substance Abuse	Enter #	Enter #	Enter #
People with HIV/AIDS	Enter #	Enter #	Enter #
People with Severe Mentally Illness	Enter #	Enter #	Enter #
Victims of Domestic Violence	Enter #	Enter #	Enter #
People with a Physical Disability	Enter #	Enter #	Enter #
People with a Developmental Disability	Enter #	Enter #	Enter #
People not represented by listed subpopulations	Enter #	Enter #	Enter #

Housing Type	Units	Beds	Dedicated Chronically Homeless Beds	Non-Chronically Homeless Beds
Click here to enter text.	Enter #	Enter #	Enter #	Enter #

Households	Households with at least one adult and one child	Adult households without children	Households with only children	Total
Total number of households	Enter #	Enter #	Enter #	Enter #

Characteristics	Persons in households with at least one adult and one child	Adult persons in households without children	Persons in households with only children	Total
Adults over age 24	Enter #	Enter #	Enter #	Enter #
Adults over age 18-24	Enter #	Enter #	Enter #	Enter #
Accompanied children under age 18	Enter #	Enter #	Enter #	Enter #
Unaccompanied children under age 18	Enter #	Enter #	Enter #	Enter #
Total Persons	Enter #	Enter #	Enter #	Enter #

5. Describe your organization's experience with the RRH Program target population and your chosen subpopulation.
Click here to enter text.

RFP Response Form

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6. Describe your organization's housing sites for the RRH Program.
 - a. How your organization will consider the needs of RRH Clients and the barriers that are currently preventing them from obtaining and maintaining housing and those needs and barriers will be addressed through case management
Click here to enter text.
 - b. How your organization will identify appropriate scattered site units and ensure that rents are reasonable (include your organization's definition of reasonableness)
Click here to enter text.
 - c. Your organization's plan for recruiting and working with landlords and other homeless services providers
Click here to enter text.
 - d. Your organization's plan for assessing the suitability of scattered site units for habitation by RRH Participants
Click here to enter text.
 - e. Where your organization's plan on locating the scattered site units in the County
Click here to enter text.
7. Describe your organization's plan for coordinating with outside partners to ensure that the RRH Program is successful, including your plan for leveraging funds and support.
Click here to enter text.
8. In the following Supportive Services chart indicate who will provide the Supportive Services and how often RRH Program Participants will receive the Supportive Services. The chart has drop-down lists that provide specific answers for you to use. If your organization will not be providing or subcontracting the listed service in the chart, then do not complete that particular service. Provide a brief narrative on your organization's plan for Supportive Services in the narrative box below.

RRH Program		
Supportive Service	Provider	Frequency
Assessment of Service Needs	Choose an item.	Choose an item.
Assistance with Moving Costs	Choose an item.	Choose an item.
Case Management	Choose an item.	Choose an item.
Child Care	Choose an item.	Choose an item.
Education Services	Choose an item.	Choose an item.
Employment Assistance & Job Training	Choose an item.	Choose an item.
Food	Choose an item.	Choose an item.
Housing Search & Counseling Services	Choose an item.	Choose an item.
Legal Services	Choose an item.	Choose an item.
Life Skills Training	Choose an item.	Choose an item.
Mental Health	Choose an item.	Choose an item.
Outpatient Health Services	Choose an item.	Choose an item.
Outreach Services	Choose an item.	Choose an item.
Substance Abuse Treatment	Choose an item.	Choose an item.
Transportation	Choose an item.	Choose an item.
Utility Deposits	Choose an item.	Choose an item.

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Click here to enter text.

9. Describe your organization’s plan to track and achieve the HUD performance standards for the RRH Program and fill out the chart below:
 - a. Maintaining permanent housing
Click here to enter text.
 - b. Maintaining or increasing income
Click here to enter text.
 - c. Maintaining or increasing non-cash benefits
Click here to enter text.
 - d. Obtaining employment
Click here to enter text.
 - e. Returning to homelessness in six and 12 months
Click here to enter text.
 - f. Utilizing supportive services
Click here to enter text.

RRH Program			
Housing Measures			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Participants remaining in permanent housing	Enter #	Enter #	Enter %
Participants maintaining or increasing their total income (from all sources) at the end of the operating year	Enter #	Enter #	Enter %
Participants maintaining or increasing their non-cash benefits at the end of the operating year	Enter #	Enter #	Enter %
Participants obtaining employment	Enter #	Enter #	Enter %
Participants returning to homelessness in six and 12 months	Enter #	Enter #	Enter %
Participants utilizing supportive services	Enter #	Enter #	Enter %

10. Describe other outcomes that your organization plans to achieve in the RRH Program and your organization’s plan for tracking and achieving those outcomes. Use the chart below to summarize those outcomes. Insert or delete lines/charts as necessary.

RRH Program
Additional Performance Measures
Click here to enter text.
Click here to enter text.
Click here to enter text.

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Click here to enter text.	Enter #	Enter #	Enter %

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Data source and data collection method: Click here to enter text.
Specific data elements and formula proposed for calculating results: Click here to enter text.
Rationale for why the proposed measure is an appropriate indicator of performance: Click here to enter text.

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Click here to enter text.	Enter #	Enter #	Enter %
Data source and data collection method: Click here to enter text.			
Specific data elements and formula proposed for calculating results: Click here to enter text.			
Rationale for why the proposed measure is an appropriate indicator of performance: Click here to enter text.			

Additional Performance Measures Detail			
Proposed Measure	Target (#)	Universe (#)	Target (%)
Click here to enter text.	Enter #	Enter #	Enter %
Data source and data collection method: Click here to enter text.			
Specific data elements and formula proposed for calculating results: Click here to enter text.			
Rationale for why the proposed measure is an appropriate indicator of performance: Click here to enter text.			

15. Describe your organization’s plan for managing referrals and securing housing for RRH Program Participants. Fill out the chart below.
[Click here to enter text.](#)

RRH Program	
Enter the percentage of Participants that will be coming from each of the following locations	
Enter %	Directly from the street or other locations not meant for human habitation
Enter %	Directly from emergency shelters
Enter %	Directly from safe havens
Enter %	Persons fleeing domestic violence
Enter %	Total of above percentages

11. Describe your organization’s ability to effectively utilize federal funds and performing the scope of services described in the RFP for the RRH Program within funding and time limitations.
[Click here to enter text.](#)
12. Provide a detailed budget narrative that clearly supports the RRH Program.
[Click here to enter text.](#)

RFP Response Form

U.S. Department of Housing and Urban Development (HUD) 2016 Reallocation Funding for Permanent Supportive Housing and Rapid Re-Housing Programs

13. The charts below are HUD's specific budget format. Use the charts to provide details on your organization's budget for the proposed RRH Program.

RRH Program	
Select the costs for which funding is being requested	
Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input type="checkbox"/>
Supportive Services	<input type="checkbox"/>
Operations	<input type="checkbox"/>
HMIS	<input type="checkbox"/>

RRH Program			
Rental Assistance Budget			
Total request for grant term			Enter \$
Total units			Enter #
Type of rental assistance	FMR Area	Total Units Requested	Total Request
Choose an item.	Click here to enter text.	Enter #	Enter \$

Type of Rental Assistance: Choose an item.

Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and Proposers should refer to the 24 CFR 578.51 before making a selection.

Metropolitan or non-metropolitan fair market rent area: Click here to enter text.

Select the FY 2016 FMR area in which the project is located. The selected FMR area will be used to populate the rents in the chart below. See <https://www.huduser.gov/portal/datasets/fmr.html> for more information and how to determine your organization's FMR area.

RRH Program						
Rental Assistance Budget Detail						
Size of Units	Number of Units		Fair Market Rent		Number of Months	Total
SRO	Enter #	X	Enter \$	X	Enter #	= Enter \$
0 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
1 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
2 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
3 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
4 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
5 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
6 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
7 bedroom	Enter #	X	Enter \$	X	Enter #	= Enter \$
Total	Enter #	X	Enter \$	X	Enter #	= Enter \$

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RRH Program		
Supportive Services Budget		
Category	Quantity and Description	Annual Assistance Requested
Assessment of Service Needs	Click here to enter text.	Enter \$
Assistance with Moving Costs	Click here to enter text.	Enter \$
Case Management	Click here to enter text.	Enter \$
Child Care	Click here to enter text.	Enter \$
Educational Services	Click here to enter text.	Enter \$
Employment Assistance	Click here to enter text.	Enter \$
Food	Click here to enter text.	Enter \$
Housing/Counseling Services	Click here to enter text.	Enter \$
Legal Services	Click here to enter text.	Enter \$
Life Skills	Click here to enter text.	Enter \$
Mental Health Services	Click here to enter text.	Enter \$
Outpatient Health Services	Click here to enter text.	Enter \$
Outreach Services	Click here to enter text.	Enter \$
Substance Abuse Treatment Services	Click here to enter text.	Enter \$
Transportation	Click here to enter text.	Enter \$
Utility Deposits	Click here to enter text.	Enter \$
Operating Costs	Click here to enter text.	Enter \$
Total Services Requested		Enter \$

RRH Program	
Summary for Match	
Total Value of Cash Commitments	Enter \$
Total Value of In-Kind Commitments	Enter \$
Total Value of All Commitments	Enter \$

RRH Program					
Summary for Leverage					
Total Value of Cash Commitments			Enter \$		
Total Value of In-Kind Commitments			Enter \$		
Total Value of All Commitments			Enter \$		
Match or Leverage	Type	Source	Contributor	Date of Commitment	Value of Commitments
Choose an item.	Choose an item.	Choose an item.	Click here to enter text.	Enter Date	Enter \$
Choose an item.	Choose an item.	Choose an item.	Click here to enter text.	Enter Date	Enter \$
Choose an item.	Choose an item.	Choose an item.	Click here to enter text.	Enter Date	Enter \$

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RRH Program			
Summary Budget			
Eligible Costs	Annual Assistance Requested	Grant Term	Total Assistance Requested for Grant Term
1a. Acquisition			Enter \$
1b. Rehabilitation			Enter \$
1c. New Construction			Enter \$
2a. Leased Units	Enter \$	Enter Time	Enter \$
2b. Leased Structures	Enter \$	Enter Time	Enter \$
3. Rental Assistance	Enter \$	Enter Time	Enter \$
4. Supportive Services	Enter \$	Enter Time	Enter \$
5. Operating	Enter \$	Enter Time	Enter \$
6. HMIS	Enter \$	Enter Time	Enter \$
7. Sub-total Costs Requested			Enter \$
8. Admin (up to 7%)			Enter \$
9. Total Assistance Plus Admin Requested			Enter \$
10. Cash Match			Enter \$
11. In-Kind Match			Enter \$
12. Total Match			Enter \$
13. Total Budget			Enter \$

ATTACHMENTS

Please submit the following attachments with your Response Form. These can be found at:
[http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Solicitations-\(RFP/RFQ/RFI\).aspx](http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Solicitations-(RFP/RFQ/RFI).aspx)

- Cover Page
- Allegheny County Vendor Creation Form
- W-9 Form
- MWDBE Participation Statement or Waiver Statement
- Audited Financial Report

CERTIFICATION

Please read the below statement and check the box to indicate agreement with its content.

By submitting this Proposal, I certify and represent to the County that all submitted materials are my work and that all responses are true and accurate.