



**MaineHousing**

**Maine State Housing Authority**

# **Emergency Shelter and Housing Assistance Program**

**2018 Program Guide  
& Application**

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# Program Guide

## Overview & Purpose

The mission of MaineHousing is to assist Maine people in obtaining and maintaining quality affordable housing and services suitable to their housing needs. In carrying out this mission, MaineHousing provides leadership, maximizes resources, and promotes partnerships to develop and implement sound housing policy.

MaineHousing uses funds from certain federal and state resources to give grants to agencies for a variety of activities to assist people who are experiencing homelessness or at risk of becoming homeless. MaineHousing has allocated resources to the Emergency Shelter and Housing Assistance Program to be distributed according to the Funding Formula Allocation outlined in Section 4 of MaineHousing’s Homeless Solutions Rule (the “Rule”). The Rule is available electronically at: <http://www.mainehousing.org/about/rules-detail/homeless-programs-rule>.

This program guide outlines the process through which these funds will be distributed and the parameters of the activities that they can support. Capitalized terms have the same meaning as in the Rule unless context indicates otherwise.

The Emergency Shelter and Housing Assistance Program consists of three integral funding components; the Shelter Operations Share (Operations Share), the Rapid Re-housing/Long-term Stayer and Stabilization Share (Stabilization Share), and the Incentives and Performance Share (Performance Share). The Operations Share is available to agencies that have a fixed facility, and is for reimbursement for costs to operate the facility including staffing. The Stabilization Share is available to agencies to provide Navigator services necessary to help clients achieve permanent stable housing. The Performance Share is available to agencies as an incentive to achieve specific performance measure outcomes as outlined in this guide.

In addition, MaineHousing also provides rental subsidies on a first come, first served basis to eligible program participants. Rapid re-housing and permanent subsidies will be provided through Stability Through Engagement Program/Tenant Based Rental Assistance (STEP/TBRA) funds and through Home to Stay Housing Choice Vouchers (HCV) funds. All Emergency Shelter and Housing Assistance Program funds must be targeted to individuals and families that meet the definition of homelessness outlined in 42 USC § 11302.

Housing vouchers and subsidies are always subject to the availability of funds.

## Funding Allocation

The Emergency Shelter and Housing Assistance Program funds will be distributed as follows:

- A. **Operations Share.** An amount equal to 40% of the funds will be disbursed among eligible agencies with a fixed facility, such that each Emergency Shelter will receive a percentage equal to the Emergency Shelter’s Bed Capacity divided by a number equal to the total Bed Capacity of eligible agencies statewide. Agencies will be reimbursed on a quarterly basis.
- B. **Stabilization Share.** An amount equal to 40% of the Funding Formula Allocation will be disbursed among eligible agencies, such that each agency providing staffing for Rapid Re-housing, Housing First and Housing Stabilization services operated by the agency will be eligible to receive a percentage equal to the agency’s

number of Clients Assessed and Stabilized, divided by the total number of Clients Assessed and Stabilized statewide in the previous quarter. Agencies are reimbursed for costs on a quarterly basis.

- C. **Performance Share.** An amount equal to 20% of the funds will be made available to eligible agencies that provide successful housing outcomes based on performance indicator data in HMIS (or in a comparable data base for providers of services to victims of domestic violence). The percentage of funding a provider receives for each performance measure met will be equal to the number of clients served by the provider divided by the total number of clients served by all of the providers that meet the respective performance measure benchmark in the previous six months. Agencies will receive a performance based payment on a semi-annual basis.

Grantees that receive allocations from federal funds, including Emergency Solutions Grant or HOME Investment Partnerships Act funds, may be required to provide a match from local or private funds.

Grants are always subject to the availability of funds.

## Eligible Applicants

### To be eligible to receive funds, an Applicant must:

- A. be a non-profit corporation in good standing in the State of Maine qualified for tax exemption under 501(c)(3) of the Internal Revenue Code or a municipal corporation;
- B. be eligible in accordance with the HEARTH Act;
- C. be a provider of homeless services with at least one (1) year of experience providing emergency housing, street outreach, Homeless Prevention or Rapid Re-housing activities;
- D. be a regular and active participant in the Maine Continuum of Care, in accordance with their respective governance charters and performance criteria;
- E. have board and or advisory board representation from Homeless Persons or formerly Homeless Persons who are involved in policy or planning of the organization;
- F. participate in the Maine Coordinated Entry System and enter into a HMIS Data Sharing Agreement for sharing data and administering housing prioritization and assessment tools;
- G. have the administrative and financial management capacity necessary to administer and to account for the use of the applicable grant in accordance with the funding requirements;
- H. meet the objectives and strategic goals to end homelessness as outlined in the Maine Consolidated Plan;
- I. meet the objectives of this Program set forth in this Program Guide;
- J. participate in and meet the performance and reporting requirements of the Homeless Management Information System (HMIS) or a comparable database if the Applicant serves victims of domestic violence;

- K. not engage in any explicitly religious activities, such as worship, religious instruction, or proselytization, as part of the activities and services funded with any grant for activities or services covered by this Program Guide; and if religious activities are offered, they must be offered at a separate time or location from the activities and services covered by this Program Guide; and participation in those religious activities must be voluntary for persons receiving assistance with funds covered by this Program Guide;
- L. operate its programs free from discrimination on the basis of age, race, color, religion, national origin, physical or mental disability, sexual orientation, or gender in accordance with applicable federal and state fair housing laws;
- M. comply with Section 504 of the Rehabilitation Act of 1973, which prohibits disability discrimination in programs that receive HUD funds; and
- N. comply with Maine Housing requirements.

**Applicants that are Emergency Shelters or Emergency Housing Providers must additionally do the following:**

- A. provide access 365 days per year to assist Homeless Persons meet basic emergency shelter needs;
- B. provide adequate sleeping space or beds, and clean and functioning shower and toilet facilities;
- C. provide safe and nutritious food, including breakfast or access to breakfast and, if open 24 hours, also provide lunch and dinner or access to lunch and dinner;
- D. treat all guests with dignity and respect, regardless of religious or political beliefs, cultural background, disability, gender identity or sexual orientation;
- E. provide shelter and housing services based upon a Rapid Re-housing or Housing First model ;
- F. operate at Bed Capacity unless the homeless response system is experiencing demand insufficient to fill capacity;
- G. provide linkages and access to community resources such as health care, job readiness and employment services, Mainstream Resources, and educational services to assist guests in achieving housing stability;
- H. assess guests for housing prioritization and services to enable mobility to permanent housing with adequate supports;
- I. inform guests of their rights and responsibilities, including specific shelter policies and house rules;
- J. accept eligible persons regardless of their ability to pay or their eligibility for reimbursement or actual reimbursements from any third party source, including local, municipal, state, or federal funding sources;
- K. have no lease requirements for guests;

- L. if serving families with children, provide space other than open dormitory style and do not require involuntary family separation for admission;
- M. provide separate accommodations for male and female consumers;
- N. protect the privacy and confidentiality of guests and their personal information;
- O. provide training, policies, procedures and regular maintenance to encourage, improve, and maintain the health and safety of guests, volunteers and staff;
- P. post fire, disaster, and other emergency procedures in a conspicuous place and review the procedures with each guest;
- Q. maintain a daily and confidential census of shelter clients including precise sleeping locations;
- R. operate in compliance with all applicable federal, state and local codes, laws and regulations; and
- S. have written policies and procedures for standards that address the following areas: access to shelter services, residential rights and responsibilities; program, personnel and facility operations; health and safety; food preparation and distribution; case management services; staff training; and HMIS security and computer protocols.

<b>Eligible Activities, Criteria &amp; Disbursement</b>
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### **Eligible Activities for Operations Share**

The Operations Share may be used for:

The costs of maintenance (including minor or routine repairs), rent, security, fuel, equipment, insurance, utilities, food, furnishings, supplies and staff necessary for the operation of the Emergency Shelter. Minor rehabilitation if the building will be used as an Emergency Shelter for 3 years and meets safety, sanitation and environmental standards of the McKinney-Vento Act.

If an applicant indicates that funds will be used for minor rehabilitation, MaineHousing may need to conduct an environmental review of the intended project in compliance with HUD's environmental review rules before any Emergency Solutions Grant funds may be committed or expended for the project and before the applicant takes any further action with the project. As part of the environmental review, in certain instances, MaineHousing may need to publish required environmental notices and obtain HUD's prior approval before such funds can be awarded. In the event MaineHousing incurs out-of-pocket costs in conducting an environmental review, MaineHousing will require the applicant to reimburse MaineHousing for such costs. Depending on certain factors, the environmental review process can add both cost and time to a rehabilitation project.

After the close of each quarter in calendar year 2018, grantees will be paid a percentage of the Operations Share equal to the Emergency Shelter's Bed Capacity divided by the total Bed Capacity available statewide as reimbursement for operating expenses.

## Eligible Activities for Stabilization Share

Stabilization Share funds must be used for staffing, including at least one staff designated and trained as the primary navigator (Primary Navigator) for your agency. The Primary Navigator will attend all necessary technical assistance and Navigator services (Navigator services) specific training. They will serve as the trainer for any additional staff currently providing Navigator services within the agency and new hires throughout the year. This person will be the primary point of contact in regards to Navigator services for clients, other agency Navigator services providers, and MaineHousing staff. The Primary Navigator will coordinate messaging from MaineHousing staff to the rest of their agency in regards to Navigator services and program delivery requirements. Each provider must have at least one staff designated and trained to complete all Primary Navigator services for that agency.

Although each agency will have a Primary Navigator, other staff within the agency may provide Navigator services to eligible households. Navigator services are services that help program participant’s move from homelessness to appropriate housing opportunities quickly and efficiently. Staff providing Navigator services help client’s access an array of mainstream services to meet the health, housing, employment, resources, and other basic needs of the client.

Staff providing Navigator services will focus their efforts on assisting the household in reaching housing stability. Navigator services are time-limited and strategic; they should focus solely on the goal of achieving stable housing, and accessing mainstream resources. Clients who require additional case management services to reach their goals should be given ample opportunity and resources to access traditional case management services apart from Navigator services. Staff providing Navigator services will additionally have access to a set aside of Stability Through Engagement Program/Tenant Based Rental Assistance (STEP/TBRA) and Home To Stay Housing Choice Voucher (HTS HCV) rental subsidies to be utilized on a first-come-first-serve basis as resources remain available. These are not the only housing resources available. Others include: Market rent units, Shelter Plus Care, or Bridging Rental Assistance Program (BRAP), and the appropriate housing resource should be utilized based upon the VI SPDAT score and Maine CoC prioritization tools.

### Stabilization Share Program Outcomes Matrix

Program Outcomes	Benchmark
The ESHAP recipient will complete an initial assessment which must include the VI SPDAT within 30 days of a client’s entry to their program.	<b>75 – 100% of clients are assessed within 30 days.</b>
The ESHAP recipient will ensure that clients who score greater than a 3 have a Housing Stability Plan (HSP).	<b>75 – 100% of clients with assessment scores greater than 3 have a HSP.</b>
The ESHAP recipient will ensure that current clients have received a contact and service at least every 30 days.	<b>90 – 100% of current clients had a 30 day service.</b>

Clients considered permanently housed will fall under the following headings in HMIS or comparable database:

- Rental by client, with VASH subsidy (HUD)
- Rental by client, no ongoing housing subsidy (HUD)
- Rental by Client with RRH or Equivalent Subsidy
- Permanent housing {other than RRH} for formerly homeless persons (HUD)
- Owned by client, with ongoing housing subsidy (HUD)
- Owned by client, no ongoing housing subsidy (HUD)
- Rental by client, with other ongoing housing subsidy (HUD)
- Rental by client, with GPD TIP subsidy (HUD)
- Transitional housing for homeless persons (including homeless youth) (HUD)
- Staying or living with family, permanent tenure (HUD)
- Staying or living with friends, permanent tenure (HUD)

If choosing Rental by client with other ongoing housing subsidy, you must indicate what type of subsidy. After the close of each quarter in calendar year 2018, providers will be paid such percentage as reimbursement for Navigator services costs.

### **Stability Through Engagement Program/Tenant Based Rental Assistance (STEP/TBRA)**

The Stability Through Engagement Program/Tenant Based Rental Assistance (STEP/TBRA) may be funded under the HOME Investments Partnerships Program regulations at 24 CFR Part 92 (“FedHOME regulations”). Grantees will use the funds for rental assistance, utility deposits and security deposits to rapidly re- house homeless families and individuals.

STEP/TBRA offers rental assistance from up to 12 months, to a maximum of 24 months, to individuals or families who are homeless and whose annual income is at or below 30% of area median income for their household size. Income includes gross household income from all sources. The rules under HUD’s Section 8 Program will be used to determine annual income and area median income. Each participant will be required to pay 30% of their adjusted total household income for rent. STEP/TBRA is a Rapid Re-housing strategy and guidelines are further detailed in the STEP/TBRA administrative Plan.

Extensions must be requested no less than 60 days prior to the household’s end of participation. If an ESHAP agency wishes to continue a STEP/TBRA participant beyond the initial 12 month term, the agency must document why the participant was not able to achieve housing stability within the initial term, how the extension will allow the participant to achieve housing stability, and what specific steps the agency will take to ensure that the participant achieves housing stability during the extension. The agency must also commit to providing all necessary ongoing Navigator services required to ensure the participant achieves housing stability prior to the end of any extension. These services must be provided for the duration of any extension, unless the participant is exited from STEP/TBRA. Funding to provide these services cannot be charged to MaineHousing. This will additionally require new leases, HQS inspections and HAP contracts. Please refer to the STEP/TBRA 2018 Administrative Plan for details.

The STEP/TBRA Program should be offered without preconditions, such as: employment, income, mainstream



resources, sobriety, good credit or clean criminal history. STEP/TBRA applicants who are found ineligible will be informed of the reason for their ineligibility and documentation will be included in the applicant file.

### Housing Choice Vouchers (HCV)

Home to Stay Housing Choice Vouchers (HTS HCV) will be administered by MaineHousing’s HCV Department according to federal regulations and MaineHousing policies detailed in the current Administrative Plan for Section 8 Housing Choice Voucher and Project Based Voucher Programs. The Administrative Plan is available on the MaineHousing website at the following link: <http://www.mainehousing.org/programs-services/rental/rentaldetail/HousingChoiceVouchers>

MaineHousing makes the final decision on program eligibility, which requires a determination that the current or past behavior of household members does not include activities which are prohibited by HUD or MaineHousing. Upon admission, each family will be required to pay between 30% to 40% of their adjusted total household income for rent each month.

HTS HCV rental assistance is for permanent housing only. Emergency, temporary or transitional housing is not eligible for HTS HCV rental assistance.

Providers may access HTS HCV rental assistance only to the extent MaineHousing has HTS HCV rental assistance available.

### Criteria for Performance Share

Funds will be made available to eligible agencies that provide successful housing outcomes on performance measure indicator data in HMIS (or elsewhere for providers of services to victims of domestic violence). Applicants must identify their HMIS Agency Administrator. The performance measures are in accordance with the HEARTH Act and are set forth below.

Performance Measures	Low Barrier Shelter Benchmark	Single Adult Shelter Benchmark	Family Shelter Benchmark	Teen Shelter Benchmark	Domestic Violence Shelter Benchmark
1. Percentage of clients exiting to permanent housing in the previous six months.	<b>5% or greater</b>	<b>30% or greater</b>	<b>30% or greater</b>	<b>5% or greater</b>	<b>30% or greater</b>
2. Percentage of clients who returned to homelessness within 6 months of exiting to permanent housing within the previous six months.	<b>15% or less</b>	<b>15% or less</b>	<b>15% or less</b>	<b>15% or less</b>	<b>15% or less</b>

## **Performance Measures Matrix for the Performance Share**

Half of the funds allocated to the Performance Share will be divided among providers that meet or exceed their benchmark for percentage of households exiting to permanent housing during the previous six months. The other half of the funds allocated to the Performance Share will be divided among providers that do not exceed their benchmark for percentage of clients who return to homelessness within 6 months of exiting to permanent housing.

The percentage of funding a provider receives for each performance measure met will be equal to the number of clients served by the provider divided by the total number of clients served by all of the providers that meet the respective performance measure benchmark.

The performance share shall be disbursed on a semi-annual basis. Funds may be used for any purpose consistent with the provider's mission.

Performance measure one will be based on the percentage of clients exiting to permanent housing from January 1 to June 30 or July 1 to December 31, as applicable (Performance Period).

Performance measure two will be based upon the percentage of clients who returned to homelessness during the Performance Period being measured within six months of exiting to permanent housing.

Funds may be used for any purpose consistent with the provider's mission

## **Monitoring Compliance and Enforcement**

### **Monitoring**

- A. MaineHousing will review for program compliance at reasonable times, no less than once a year.
- B. MaineHousing may copy and examine all of a grantee's records other than medical or other confidential client information protected by privacy laws.
- C. Grantees will maintain records sufficient to meet monitoring and auditing requirements of MaineHousing and HUD including without limitation to daily rosters and client files.
- D. Grantees will adhere to uniform administrative requirements as outlined in the code of federal regulations 2 CFR section 200, and retain program records for no less than 5 years after participation ends.
- E. Grantees will maintain timesheets for staff salaries being charged to the Emergency Shelter and Housing Assistance Program that contain the amount of time spent on grant activities by the program.
- F. In the case of a physical shelter program facility, MaineHousing will inspect to a minimum for compliance with HUD's Housing Quality Standards (HQS) and other MaineHousing requirements.
- G. MaineHousing staff will provide grantees with training, monitoring and oversight to ensure program integrity.

## Compliance Enforcement

Funding is subject to a grantee's compliance with this guide, a grant agreement with MaineHousing, and with all applicable federal, state and local laws and ordinances as may be amended from time to time including, without limitation, the Rule, the Maine Housing Authorities Act, 30-A M.R.S.A., §4701, et. seq., as amended (the "Act") the McKinney-Vento Act, as amended by the HEARTH Act.

MaineHousing will review the performance of each grantee in carrying out its responsibilities at least once every year and as otherwise determined by MaineHousing. In conducting performance reviews, MaineHousing will rely primarily on information obtained from the records and reports from grantees, as well as information from monitoring reviews, audit reports, and HMIS.

If MaineHousing determines that a grantee has not complied with a program requirement, MaineHousing will give the grantee notice of this determination. MaineHousing will give the grantee an opportunity to demonstrate, within the time prescribed by MaineHousing that grantee has complied with program requirements.

If the grantee fails to demonstrate to MaineHousing's satisfaction that the activities were carried out in compliance with program requirements, MaineHousing will take one or more of the following actions:

- A. Instruct the grantee to submit and comply with proposals for action to correct, mitigate, and prevent noncompliance with program requirements;
- B. Suspend disbursement of funds for some or all activities;
- C. Reduce or terminate the remaining grant and reallocate those funds to other grantees;
- D. Disqualify grantee from participation in the Performance Share; or
- E. Require grantee to repay grant funds.

# Application

## Application Submission Process

The Applications are due no later than **Monday, December 11<sup>th</sup>, 2017 by 4pm**. If you have questions as you prepare your Application, please e-mail [SHLTAPP@mainehousing.org](mailto:SHLTAPP@mainehousing.org).

Uploading and submitting your Application and any supporting documents is simple. Just click on the following secure link: <https://mainehousing.sharefile.com/f/fo1276a4-f7a3-45f4-92a9-29db06b08549>. **Applications may be submitted as two documents; the application as one document (filled electronically), and the attachments as a second. Applications not submitted as prescribed will not be reviewed. The application is electronically fillable; please utilize electronic signatures for all required signatures when submitting the filled application.**

Applications that in MaineHousing’s sole judgment are incomplete and/or missing required documents will not be eligible for consideration. For an application to be considered complete, it must contain all components within the following sections;

- **Application Questions**
- **Emergency Shelter or Emergency Housing Provider Minimum Threshold Requirements**
- **All Required Attachments & Exhibits. (All policies must be resubmitted with the 2018 application. Policies will not be pulled from the 2017 ESHAP application.)**

MaineHousing will use the following process to determine which applicants are eligible for funding:

- a. Staff will review each application to ensure that it is complete, including the submission of the required attachments. Only complete applications which have included all required attachments will be considered. Staff will determine if the application meets minimum threshold requirements.
- b. Applicants who are eligible for funding will be issued a grant agreement specifying terms and conditions of the funding award. Successful applicants will be expected to submit a signed Data Sharing Agreement and a Certification of Local Approval verifying that the municipality in which the program will run will not be seeking any funds from the Emergency Solutions Grant program to perform similar activities. A grant agreement will not be fully executed until this certification and any other documents that may be required by MaineHousing are received.
- c. Applicants who do not meet threshold requirements and have submitted their application within the time allowed will be notified in writing.

Application Timeline	
Task	Date
Deadline for Completed Applications	December 11 <sup>th</sup> , 2017
Award Notification to Grantees	December 20 <sup>th</sup> , 2017
Executed Grant Agreement	December 29 <sup>th</sup> , 2017
Mandatory Primary Navigator and HMIS Admin. Training	January 12 <sup>th</sup> , 2018
Program Year	January 1 <sup>st</sup> , 2018 – December 31 <sup>st</sup> , 2018

**Application Questions: This is a fillable form and will need to be completed in no more than 1000 characters, 12 point, single spaced, in the space provided. This application must be electronically submitted as a PDF file.**

1. Description of Applicant Organization. (1000 characters)

2. Narrative Describing Organizational Capacity. (1000 characters)

3. What internal training resources will be offered to Primary Navigators?

4. Do you regularly share clients with another Emergency Shelter or Emergency Housing Provider? If yes, please provide the policy or process currently in place for ensuring the client's needs are being met.      **Yes**      **No**

5. What is your shelter's intake procedure and how does a client access Navigator services?  
Please indicate any documentation necessary upon intake to the shelter.

6. Please list all non-negotiable Emergency Shelter program eligibility requirements and rationale below (ex: Criminal history, sobriety, populations served, residency restrictions, etc.):

A large, empty rectangular box with a black border, intended for the user to list non-negotiable Emergency Shelter program eligibility requirements and their rationale. The box is currently blank.



7. Does your agency or local community provide any financial assistance related to housing costs for clients in need? Please indicate below:

- a. Rental Assistance (Current)
- b. Rental Arrears Assistance
- c. Rental Application Fees
- d. Security Deposits
- e. Utility Deposits
- f. Utility Assistance (past due)
- g. Last Month's Rent
- h. Moving Costs
- i. Tenant Legal Services
- j. Credit Repair
- k. Other:

8. Is there a cap on the amount of financial assistance provided?

**Yes**                      **No**

9. If yes, please list the financial assistance(s) and the cap(s):

10. Please list all the program specific services/amenities offered (ex: Laundry, clothing, showers, etc.):

11. What is your shelter's turn away policy when the shelter is full? Are you currently using the CallPoint module in HMIS for turn away data?

13. Do you operate a fixed facility? **Yes** **No**

**a. List all fixed facilities by Shelter Name and Address**

Site/Shelter Name	Physical Address (Non DV Only)

**b. For each site that you are applying for funding please answer the following:**

	Site:	Site:	Site:	Site:
Target Population(s)				
Number of Beds for Single Adult Individuals				
Number of Beds for Families with Children				
Number of Family Units				
Number of Beds designated for Youth				
Number of Beds designated for Chronically Homeless				
Number of Beds designated for Veterans				

**c. How many beds will you be reporting at each facility on the 2018 HUD Housing Inventory Chart?**

14. Do you have experience providing: Street Outreach, Homelessness Prevention, or Rapid Re-Housing activities for at least one year? **Yes** **No**

15. Please attach a description of your experience providing Street Outreach, Homelessness Prevention, or Rapid Re-Housing activities if you are a *first time Applicant*.  
**Attached** **Not Applicable**

16. Have you had any citizen complaints in the last 12 months? If yes, please attach documentation of the complaint to the application, including the nature of the complaint and the resolution:  
**Yes** **No**

17. Who represents your agency at Maine Continuum of Care meetings?

	<b>Emergency Shelter or Emergency Housing Provider Minimum Threshold Requirements</b>	<b>Yes</b>
1	We have read, will abide by and operate in accordance with all provisions of the Maine Homeless Solutions Rule updated July 11 <sup>th</sup> , 2017. The Rule can be found here: <a href="#">Maine Homeless Solutions Rule</a>	
2	We will participate in and comply with all Coordinated Entry System Policies and Procedures (or comparable Coordinated Entry system for Domestic Violence Agencies) 24 § 576.400 (d)	
3	The Primary Navigator and HMIS Agency Administrator will attend a one-day training in Augusta, Maine on <b>Friday, January 12<sup>th</sup>, 2018:</b>	
4	We will act in accordance with the restrictions on lobbying in 31 U.S.C. 1352 and implementing regulations in 24 CFR Part 87, which require that no federally appropriated funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of a federal agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any federal contract, grant, loan or cooperative agreement.	
5	We will prohibit any employee, agent, consultant, officer, or elected or appointed official of an applicant, who exercises or has exercised any functions or responsibilities with respect to assisted activities, or who is in a position to participate in a decision-making process or gain inside information with regard to such activities, from obtaining a personal or financial interest or benefit from the activity, or from having an interest in any contract, subcontract or agreement with respect thereto, or the proceeds there under, either for him or herself or those with whom he or she has family or business ties, during his or her tenure or for one year thereafter.	

Executive Director Signature \_\_\_\_\_

Date \_\_\_\_\_

<b>Required Attachments &amp; Exhibits. Please label with the corresponding letter.</b>			
	<b>Attachments &amp; Exhibits</b>	<b>Attached</b>	<b>Not Applicable</b>
<b>A.</b>	Certification Regarding Lobbying		
<b>B.</b>	Homeless Consumer participation.		
<b>C.</b>	ESG 2018 Minimum Data Requirements and Participation Certification		
<b>D.</b>	Applicant Conflict of Interest Disclosure Form		
<b>E.</b>	Homeless Initiatives Contact Form		
<b>F.</b>	Certification of Local Approval for Nonprofit organizations		
<b>G.</b>	Documentation of 501(c)(3) status.		
<b>H.</b>	<b>Most recent</b> audit completed by an outside firm and accompanying management letter (A 133 or comparable)		
<b>I.</b>	Corporate Resolution from Board of Directors to approve application submission.		
<b>J.</b>	An organizational chart showing titles and lines of authority for all individuals with any role in approving or recording of financial transactions.		
<b>K.</b>	List of agency Board of Directors outlining who each member represents.		
<b>Below are all required policies. All required policies must be submitted and labeled with their corresponding number.</b>			
<b>1.</b>	Applicant organization's non-discrimination policy <u>with a paragraph narrative indicating how the general public will be informed of the policy.</u>		
<b>2.</b>	Client Grievance and Appeal of Termination Policies		
<b>3.</b>	Evidence of policies and procedures that outline approval authority for financial transactions, guidelines for controlling expenditures and the recording of financial transactions.		
<b>4.</b>	Chart of all financial accounts and/or account manual		
<b>5.</b>	Record retention policy		
<b>6.</b>	Procurement Policy		
<b>7.</b>	Personnel policy indicating all personnel are responsible for communicating to appropriate supervisory officials any operating problems or noncompliance with laws and regulations		
<b>8.</b>	Access to shelter services (how one accesses services) policy		

9.	Client Residential rights and responsibilities		
10.	Program personnel and facility operations		
11.	Health and safety		
12.	Food preparation and distribution		
12.	HMIS and Data Security protocols including any security procedures for staff who work from home with client data		
14.	Fair Housing policy		
15.	Drug-Free Workplace Policy		

**MAINEHOUSING NONDISCRIMINATION NOTICE:**

*MaineHousing does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, national origin, ancestry, physical or mental disability, age, familial status or receipt of public assistance in the admission or access to or treatment in its programs and activities. In employment, MaineHousing does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, national origin, ancestry, age, physical or mental disability or genetic information. MaineHousing will provide appropriate communication auxiliary aids and services upon sufficient notice. MaineHousing will also provide this document in alternative formats upon sufficient notice. MaineHousing has designated the following person responsible for coordinating compliance with applicable federal and state nondiscrimination requirements and addressing grievances: Louise Patenaude, Maine State Housing Authority, 353 Water Street, Augusta, Maine 04330-4633, Telephone Number 1-800-452-4668 (voice in state only), (207) 626-4600 (voice) or Maine Relay 711.*

**ATTACHMENT A. CERTIFICATION REGARDING LOBBYING**

Certification for Contracts, Grants, Loans, and Cooperative Agreement

That undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with this Federal contract, Grant, Loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements and that all subrecipients shall certify and disclose accordingly).

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature:

Typed Name and Address:

\_\_\_\_\_

\_\_\_\_\_

Title:

Date:

\_\_\_\_\_

\_\_\_\_\_

**ATTACHMENT B: HOMELESS CONSUMER PARTICIPATION**

**1: Eligibility Documentation Regarding Homeless Consumer Participation**

Documentation of the active participation of a homeless or formerly homeless individual on the governing board or other equivalent policymaking entity which makes policies and decisions regarding any facility, service, or other assistance is a requirement for organizations applying for ESG funds as per 24 CFR Part V, 576.56 (b) (1).

Name of Organization: \_\_\_\_\_

1. Does the organization have representation of a Homeless or Formerly Homeless member on the Board of Directors or other equivalent Policymaking Entity?

- Yes, homeless representative serves on the Board of Directors.
- Yes, homeless representative serves on a Policymaking Entity.
- No

2. The number of homeless representatives on the Board of Directors or policymaking entity: \_\_\_\_\_

3. The name of the Policymaking Entity is: \_\_\_\_\_

4. a. Does the Policymaking Entity consider and make policies and decisions regarding any facility, service, or other assistance provided by your organization?

- Yes
- No

b. If yes, explain the types of policies and decisions regarding the facility, services, or other assistance which are made by the Policymaking Entity and how policies and decisions made by the Policymaking Entity are forwarded to the Board of Directors and what happens after. Please limit your response to a narrative that fits within the remaining space on this page.

5. Does your organization involve homeless families and individuals in maintaining, operating and rehabilitating the shelter or other facilities, and/or providing services?

- Yes
- No

**OFFICIAL AUTHORIZED TO COMMIT APPLICANT ORGANIZATION TO THIS AGREEMENT**

**PRINT** Name & Title \_\_\_\_\_

**SIGNATURE & DATE** \_\_\_\_\_



**ATTACHMENT C: MINIMUM DATA REQUIREMENTS**

Please review the most current data requirements found [here](#) and complete the following:

**CERTIFICATION OF COMPLIANCE**

I, \_\_\_\_\_, in my capacity as Executive Director of \_\_\_\_\_, do hereby  
(Name) (Agency)  
certify to comply with the data entry requirements outlined within this form and will record services provided to our clients. This data will be recorded in the HMIS or comparable database for victim service providers. I understand that failure to enter this information into ServicePoint or a comparable database for victim service providers may impact future funding.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**ATTACHMENT D - APPLICANT CONFLICT OF INTEREST DISCLOSURE FORM**

Please respond to the following question: Does the applicant, any principal or affiliate of the applicant, or anyone who will be paid for work on the program have business ties, familial relationships, or other close personal relationships with a current MaineHousing employee or commissioner or with anyone who was a MaineHousing employee or commissioner within the past two years? If yes, please describe in the box below:

**If you are unsure whether a relationship, association, or connection you have may constitute a conflict of interest, please consult with MaineHousing's Manager of Audit and Compliance Linda Grotton: (207) 624-5735 or [lgrotton@mainehousing.org](mailto:lgrotton@mainehousing.org)**

Name of Applicant: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization Type:
City/County
Non-Profit
Faith Based/Non-Profit
Other

**ATTACHMENT E: HOMELESS INITIATIVE CONTACT FORM**

**Organization Name:** \_\_\_\_\_

**Organization Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** ME **Zip Code:** \_\_\_\_\_



Check if Physical address is the same as Mailing Address

**Organization Physical Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** ME **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Shelter Name:** \_\_\_\_\_

**Shelter Physical Address (Non DV only):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** ME **Zip Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**\*If you operate more than one shelter please complete one form for each.**

**Executive Director:** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Shelter Director/Program Manager:** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Primary Financial Contact:** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Staff Person Responsible for McKinny-Vento Education Act Requirements (if working with youth and/or families):** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Primary Housing Navigator:** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Housing Navigator Provider:** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Housing Navigator Provider:** \_\_\_\_\_

Email:	
Phone and extension:	
Fax:	
Length of time in current position:	

**Executive Director** \_\_\_\_\_

*Signature*

*Printed Name*

*Date*



**ATTACHMENT F** (Can be filled out by hand and submitted with the attachments file):

**CERTIFICATION OF LOCAL APPROVAL FOR NONPROFIT ORGANIZATIONS**

This form is required with the application of any non-profit applying directly to MaineHousing, instead of in conjunction with a local government.

The undersigned, authorized to act on behalf of \_\_\_\_\_, certifies to  
(Name of town, city or county)

MaineHousing that although this jurisdiction will not perform the functions of the 2018 grant recipient for Emergency Shelter Grants amounts, it does hereby approve of the activities to be undertaken with the grant funds by \_\_\_\_\_ to  
(Name of shelter) (Location of grant activities)

include the following activities:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

2017 Ending Homelessness Prioritization Chart – Adopted by the Maine CoC on 9/21/17, and SHC on 10/10/17

	Priority	Homeless Category	Parameters	N	Resources	Process
1.5 %	P1	Long Term Stayers (LTS)/Chronically Homeless: Individuals	Greater or equal to 180 days in a 365 period; or VI-SPDAT flagged (score >8) including medically compromised	70	300 Dedicated S+C vouchers. 80 local Section 8 vouchers. ESHAP For Vets: HUD/VASH with initial SSVF assistance.	1) 1 year of HMIS data, application; 2) CAA will centralize vouchers and award these to shelters/providers directly; 3) CAA will follow up to verify disability and criteria for chronic homelessness; 4) PHA commitments for Section 8; 5) PATH commitment to connect people who are homeless to housing resources.
	P2	Long Term Stayers (LTS): Families	Greater or equal to 180 days in a 365 period; or VI-SPDAT flagged (score >8)	29	ESHAP, GA, occasional S+C as family qualifies	HTS from ESHAP; shelters use ESHAP resources to solve for this population; GA
22%	P3	Domestic Violence Families & Individuals	Greater than 30 days; or VI-SPDAT flagged (score >3)	945	Dedicated transitional supportive housing, permanent supportive housing, Section 8, BRAP, S+C, ESHAP, GA	STEP or HTS from ESHAP; Transitional DV Resources, CHOM, ETC.
	P3	Unaccompanied Youth unable to be reunited with their families	Greater than 30 days; or VI-SPDAT flagged (score >3)	100	Transitional supportive housing, permanent supportive housing, GA, ESHAP, Wrap funds, Rent and security deposit for DHHS OCFS placements, RHYA resources	Transitional youth service partners/BRAP - LAA's; STEP or HTS from ESHAP
	P3	Less than Long Term Stayers (LTS) Individuals & Families	Greater than 60 days but less than 180 days in a 365 day period or VI-SPDAT flagged (score >3) including medically compromised	285	Permanent housing, permanent supportive housing, transitional supportive housing, Section 8, BRAP, S+C, Wrap funds, ESHAP. For Vets: SSVF, or where appropriate HUD/VASH	Shelter case management, market apartments with outreach support, rapid rehousing, STEP or HTS from ESHAP
	P4	Institutions	Greater than 90 days	80	BRAP, PNMI	BRAP-LAAs, PNMI
76.5 %	P5	Circumstantially Homeless	Less than 60 days & not flagged on VI-SPDAT	4327	SSVF, General Assistance	Existing mainstream resources - general assistance, allow them to house themselves
	P5	Unaccompanied Youth (working toward reunification/stability)	Less than 60 days & not flagged on VI-SPDAT; RHYA Programs	537	Wrap funds - Section 17, RHYA resources	Existing mainstream resources - general assistance. Traditional youth service providers

Veterans, the elderly, and the medically compromised could fit into any prioritization category as applicable (i.e., Veterans could fit into any category except youth).

<p><b>KEY:</b>                  S+C = Shelter Plus Care                  PSH = Permanent Supportive Housing                  VI-SPDAT = Vulnerability Index &amp; Service Prioritization Decision Assistance Tool                  SSVF = Supportive Services for Veteran Families                  BRAP = Bridging Rental Assistance Program                  GA = General Assistance</p>	<p>PNMI = Private Non-Medical Institutions                  HUD/VASH = Veterans Affairs Supportive Housing                  Home to Stay = Rapid Re-Housing HCV (Section 8 vouchers) funded through ESHAP                  STEP = Stability Through Engagement Program - Rapid Re-Housing (TBRA coupons) funded through ESHAP                  TBRA = Tenant Based Rental Assistance – Rapid Re-Housing funded through ESHAP                  RHYA = Runaway and Homeless Youth Act                  ESHAP = Emergency Shelter and Housing Assistance Program – Housing Navigator Stabilization Services</p>
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