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| 2021 Score Card  **Renewal Project** - SSO | | |
| Organization Name: | Click or tap here to enter text. |
| Program Name: | Click or tap here to enter text. |
| Date: | Click or tap here to enter text. |
| Applicant Name: | Click or tap here to enter text. |
| Applicant Email: | Click or tap here to enter text. |

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| HUD Eligibility Requirements | |
| *Must answer “yes” to all in order to move on, points will be addressed throughout the tool. (See Section 1)* | |
| Does the applicant meet minimal guidelines to proceed? If applicant has any infractions, please provide back-up as to why applicant should be considered. (see attached [Eligibility Requirements for Applicants of HUD’s Grants Programs](file:///\\FHFS1\users\Shared\Community%20Health%20Improvement\CoC\CoC%20NOFA\FY21\EligibilityRequirementsGrantProgramsFiscalYear2020%20-%20Attach%20to%20Score%20Card.pdf)) | Yes  No |

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| CoC Local Thresholds  *Local thresholds are objective and the reviewer MUST answer “yes” to all for the application to move forward in the rank process. Points will be addressed throughout the tool.*  *See Screen 6D, 6E, and attachments in 7A* | |
| Will the project participate in coordinated entry? | N/A |
| Does the project address how they intend to implement a housing first and/or low barrier to entry? | N/A |
| Does the project applicant provide documented, secured minimum match? | Yes  No |
| Is the project financially feasible? | Yes  No |
| Is the applicant an active CoC participant? (attends at minimum, 75% of CoC meetings – Lead Agency will provide info) | Yes  No |
| Is the application complete and data consistent? | Yes  No |
| If utilizing local CCIN database, is data quality at or above 90%? | N/A |

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| Policy Priorities | | |
| *Policy priorities to be addressed by project applicant. Check “yes” to all that apply. Applicant MUST address at minimum 1 priority need. In order to receive full points, the applicant must show the need and provide back-up on how they intend to impact the priorities selected. As a reminder, the CoC conducted an annual gaps analysis which can be used as additional support. (See section 3B – Project Description)* | | |
| Ending homelessness for all persons | Yes | |
| Use a housing first approach  \*CoC Local Priority | Yes | |
| Reducing unsheltered homelessness  \*CoC Local Priority | Yes | |
| Improving system performance  \*CoC Local Priority | Yes | |
| Partnering with housing, health, and service agencies | Yes | |
| Racial equity  \*CoC Local Priority | Yes | |
| Persons with lived experience | Yes | |
| **Total (yes):** | |  |
| **Bonus 10 Point Racial Equity:** | |  |
| **Bonus 10 Points Partnering with Housing, Health, and Service Agencies:** | |  |
| **Total Points (add total yes and bonus):** | |  |

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| Project Threshold Requirements | | | |
| *Questions will be scored on a 0 to max value range based on the interpretation of the reviewer. There is a 2 question threshold, if the applicant doesn’t fully address 2 out of 4 questions the project will be rejected.*  *Review FY19 submission and Recipient Performance Pg 22, 4A Standards* | Points Awarded | *Out of* | Max Value |
| Whether the project applicant’s performance met the plans and goals established in the initial application, as amended. |  | *Out of* | 15 |
| Whether the project applicant demonstrated all timeliness standards for grants being renewed, including those standards for the expenditure of grant funds that have been met. |  | *Out of* | 15 |
| The project applicant’s performance in assisting program participants to achieve and maintain independent living and records of success, except dedicated HMIS projects that are not required to meet this standard. |  | *Out of* | 15 |
| Whether there is evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site. |  | *Out of* | 15 |
| **Total Awarded:** |  | *Out of* | **60** |

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| Timeliness | | | | |
| *Questions will be scored on a 0 to max value range based on the interpretation of the reviewer.*  *See Recipient Performance Pg22* | Points Awarded | | Max Value | |
| Did the project applicant submit the previous year’s Annual Performance Report (APR) on time? |  | *Out of* | | 10 |
| **Total Awarded:** |  | *Out of* | | **10** |

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| Project Financial Information | | | | |
| *Questions are answered with a “Yes” or “No” response. Full points awarded for “Yes” response.*  *Review Screen [x]: CoC Funding Requested, Amount of other public funding (federal, state, county, city), Amount of private funding*  *See Budget Screens – Screens 6A-E, Recipient Performance (Pg 22), and 7A attachments.* | Points Awarded | | Max Value | |
| Drawdowns occurred at least quarterly (agency will provide documentation) – if yes, award full 6 points, if partially met award 3 points, if not met award 0 points) |  | *Out of* | | 5 |
| Recent audit identified agency as ‘low risk’ |  | *Out of* | | 5 |
| Recent audit indicates no findings |  | *Out of* | | 5 |
| Documented match amount meets HUD requirements |  | *Out of* | | 5 |
| Budgeted costs are reasonable, allocable, and allowable |  | *Out of* | | 20 |
| **Total Awarded:** |  | *Out of* | | **40** |

**Renewal Project Supplemental Questions**

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| Performance & Outcome | | | |
| *Questions will be scored on a 0 to max value range based on the interpretation of the reviewer.*  If yes, award points – see supplemental questions | Points Awarded | | Max Value |
| Has the project had successful outcomes? |  | *Out of* | 25 |
| Did the applicant adequately explain why the renewal is needed? |  | *Out of* | 25 |
| Does the project address CoC/HUD priorities? |  | *Out of* | 25 |
| Has the project impacted priority needs thus far? |  | *Out of* | 25 |
| **Total Awarded** |  | *Out of* | **100** |

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| Program Participant Outcomes (Equity) | | | | | |
| *Questions are answered with a “Yes” or “No” response. Full points awarded for “Yes” response.*  *Addressed within supplemental face sheet* | | Points Awarded | | Max Value | |
| Project describes their plan for reviewing program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age. If already implementing a plan, describe findings from outcomes review. |  | | *Out of* | | **10** |
| Project describes plan to review whether programmatic changes are needed to make program participant outcomes more equitable and developed a plan to make those changes. If already implementing plan, describe findings from review. |  | | *Out of* | | 10 |
| Project describes plan to work with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and/or age. If already implementing plan, describe findings from review. |  | | *Out of* | | 10 |
| **Total Awarded:** |  | | *Out of* | | **30** |

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| Equity Factors - Agency Leadership, Governance, and Policies | | | | |
| *Questions are answered with a “Yes” or “No” response. Full points awarded for “Yes” response.*  *Addressed within supplemental face sheet Provide attachment* | Points Awarded | | Max Value | |
| Project has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions. |  | *Out of* | | 10 |
| Project’s organizational board of directors includes representation from more than one person with lived experience (per 578.75g)). |  | *Out of* | | 10 |
| Project has relational process for receiving and incorporating feedback from persons with lived experience or a plan to create one. |  | *Out of* | | 10 |
| Project has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes. |  | *Out of* | | 10 |
| **Total Awarded:** |  | *Out of* | | **40** |

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| **Total Application Points** |  | **/280** |
| **Total Bonus Points** |  | **/27** |