

## MEMORANDUM

TO: Potential Applicants

FROM: Chris Winters, Commissioner, Department for Children & Families

DATE: May 31, 2024

SUBJECT: Emergency Shelter & Permanent Supportive Housing Notice of Funding Opportunity

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The State Fiscal Year 25 Budget includes the potential for up to \$10 million in contingency funding to expand shelter bed and permanent supportive housing capacity in the State.

*(a)(1) The Department for Children and Families shall continue to develop emergency shelters for the provision of lodging between December 1, 2024 and March 31, 2025 to households that do not meet the eligibility criteria for General Assistance Emergency Housing as described in subsection (a) of Sec. E.321 of this act or are otherwise in need of emergency shelter. (2) The Department shall work with community providers as available to deliver daytime and overnight shelter services.*

*(b)(1) In fiscal year 2025, \$10,000,000 allocated from the General Fund in Sec. B.1102(b)(9) of this act to expand shelter bed and permanent supportive housing shall be used by the Department to first develop emergency shelters as required in subsection (a) of this section. Any allocated funds that are not needed for emergency shelters may be used to expand permanent shelter bed and permanent supportive housing capacity.*

The Vermont Department for Children & Families invites applications to provide emergency shelter capacity from December 1, 2024 to March 31, 2025. Applications for emergency shelter beyond these dates and permanent supportive housing capacity will also be accepted and reviewed based on the availability of funds.

Enclosed you will find the Notice and Application for one-time Funding:

- I. Notice & Program Overview
  - II. Application, with Appendices
  - III. Standard AHS Grant and Contract Provisions for information purposes only (Attachments C & F)
- Awards will be made for rolling start dates in state fiscal year 2025.

**PLEASE REVIEW ALL MATERIALS CAREFULLY.**

**APPLICATION DUE DATE (Early submissions are appreciated): 4:00 PM, July 10, 2024**

**Webinar Announcement:** The Department for Children & Families will host a webinar on **June 4, 2024**. The webinar from 12:00-12:45pm will be a review of the Notice and Application for funding. The webinar will be recorded and archived. Applicants are encouraged to attend or review the webinar.

**Overview Webinar**

**Tuesday, June 4, 12:00-12:45pm:**

[Click to join on your computer or mobile app](#)<sup>1</sup>

Or call in (audio only): +1 802-552-8456

Phone Conference ID: 527 983 629

**Office Hours Announcement:** The Department for Children & Families will also host two Office Hours session to provide additional technical assistance related to the application and budget tool. They will not be recorded. The sessions are open to all applicants who would like the opportunity to ask specific questions about the application.

**Office Hours Session #1**

**Thursday, June 13, 12:00-1:00pm:**

[Click to join on your computer or mobile app](#)<sup>2</sup>

Or call in (audio only): +1 802-552-8456

Phone Conference ID: 173 280 463

**Office Hours Session #2**

**Tuesday, July 2 3:00-4:00pm:**

[Click to join on your computer or mobile app](#)<sup>3</sup>

Or call in (audio only): +1 802-552-8456

Phone Conference ID: 341 857 616

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<sup>1</sup> [https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_YmE5N2Y5NmQtNjdkMCO0NzFjLTkxNzQtNmE4Zm11M2E1OGJi%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%229f7f88bb-7b00-4ebf-ab2f-7d49ca269f6b%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmE5N2Y5NmQtNjdkMCO0NzFjLTkxNzQtNmE4Zm11M2E1OGJi%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%229f7f88bb-7b00-4ebf-ab2f-7d49ca269f6b%22%7d)

<sup>2</sup> [https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_NjE0M2I3YzltMTY3OS00ZGRmLTk4NjktN2MzOTRiMjQ4Y2RI%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%229f7f88bb-7b00-4ebf-ab2f-7d49ca269f6b%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_NjE0M2I3YzltMTY3OS00ZGRmLTk4NjktN2MzOTRiMjQ4Y2RI%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%229f7f88bb-7b00-4ebf-ab2f-7d49ca269f6b%22%7d)

<sup>3</sup> [https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_MTJlNDQzMWwMOTY0Ny00ZDI3LWFiNDAtMmY3YTtk1MWYwMzc5%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%229f7f88bb-7b00-4ebf-ab2f-7d49ca269f6b%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_MTJlNDQzMWwMOTY0Ny00ZDI3LWFiNDAtMmY3YTtk1MWYwMzc5%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%229f7f88bb-7b00-4ebf-ab2f-7d49ca269f6b%22%7d)

**Department for Children and Families**  
**EMERGENCY SHELTER & PERMANENT SUPPORTIVE HOUSING FUNDING OPPORTUNITY**  
**(FFY 2024/ SFY 2025)**

**SECTION I: NOTICE AND OVERVIEW**

**OBJECTIVES**

Funding is intended to develop, expand and operate emergency shelter capacity to be online by December 1, 2024 and operate at least through March 31, 2025. This includes one-time funding available to develop and operationalize emergency shelter projects, operate emergency shelter, and provide essential services to shelter guests. Priority will be given to projects that can be extended beyond March 31, 2025.

Dependent on the availability of funding, Emergency Shelter and Permanent Supportive Housing acquisition, development, and construction projects completed after December 1, 2024 may be considered for this one-time funding.

This funding opportunity operates in conjunction with the Office of Economic Opportunity's Housing Opportunity Grant Program.<sup>4</sup>

**AMOUNT AND SOURCE OF FUNDS**

Grants will be awarded by the Department for Children and Families to Vermont municipalities or non-profits whose purpose is to assist people experiencing homelessness or at risk of homelessness.

The State anticipates awarding **\$10,000,000** in one-time General State Fund (GSF) and, for eligible projects, services and operations may be funded through the **\$25,747,402** from the General State Fund (GSF) appropriation to the Housing Opportunity Grant Program.

**The availability of funds in SFY 2025 is contingent on final appropriation by the State legislature and identified savings from SFY 2024.**

**APPLICANT ELIGIBILITY REQUIREMENTS**

To be eligible an applicant must:

- Be a municipality or a private non-profit organization<sup>5</sup>. Faith-based non-profit organizations are eligible and should review requirements in Section E, Attachments.
- All applications must have municipal/town approval and submit a Certification of Local Government Approval with their application (Appendix E).
- All applicants must not be on the federal ([SAM](#)) or state ([BGS](#)) debarment list. Any subrecipient of federal funding must be current with their annual filing to the [State of Vermont Department of Finance & Management](#).

**APPLICATION & SUBMISSION INFORMATION**

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<sup>4</sup> <https://dcf.vermont.gov/oeo/programs/hop>

<sup>5</sup> Applications from a group of organizations, including public-private partnerships, will be considered but need to identify a lead eligible applicant.

## 1) Content and Form

Proposals should follow the outline in the APPLICATION section below. All proposals must include the following, in the order shown:

- Cover Sheet
- Background (*if applicable*)
- Project Narrative
- Budget & Justification
- Attachments – *please review carefully*

Proposals should be in 12 pt. font, with numbered pages. There are no page limitations.

## 2) Submission Process

Applicants should submit their proposal electronically by sending a PDF document to [lily.sojourner@vermont.gov](mailto:lily.sojourner@vermont.gov). Budgets must be submitted in excel.

Applications will NOT be accepted by mail, facsimile, or hand delivery.

**Applications are due no later than 4:00 P.M. July 10, 2024.**

All questions should be directed to Lily Sojourner, (802) 585-4365, [lily.sojourner@vermont.gov](mailto:lily.sojourner@vermont.gov)

## **APPLICATION TIMELINE**

- Notice of Funding Opportunity released: **May 31, 2024**
- Webinar Overview of Notice: **June 4, 2024 12:00pm**  
*See webinar information on page 2. This webinar will be recorded and archived for later viewing.*
- Office Hours Session: **June 13, 2024 12:00pm**  
*See office hours information on page 2.*
- Office Hours Session: **July 2, 2024 3:00pm**  
*See office hours information on page 2.*
- Applications due no later than **4:00 PM, Monday, July 10, 2024**
- Award Notifications: **Rolling awards**
- Program Start Date: **Rolling start date** (priority for December 1, 2024 start date)
- Program Period: **Program start date – June 30, 2025**

## **APPLICANT SELECTION CRITERIA**

All applications will be evaluated by the Department for Children & Families based on local need, capacity of applicant, approach, and local coordination. Both the applications– and ultimately each project funded – will be evaluated based on :

- 1) A demonstrated ability to meet the criteria as outlined in this Notice of Funding.
- 2) A demonstrated ability to affirmatively reach underserved populations, including Black, indigenous and people of color, people with disabilities, persons with limited English proficiency, New Americans, and other underrepresented groups
- 3) The applicant’s history of providing effective shelter or services to individuals experiencing homelessness or at risk of homelessness.
- 4) A demonstrated ability to address an identified homeless need or gap in the district and effectively collaborate with local Continuum of Care/Housing Coalition partners to improve outcomes for the homeless and those at-risk of homelessness.
- 5) Ability to demonstrate leveraged funding to support the proposed project.
- 6) For emergency shelter applicants, ensure the continued availability of clean and safe emergency shelter.
- 7) The applicant’s engagement of homeless individuals and families in the governance or operation of programming and services, to the maximum extent practicable.
- 8) A demonstrated ability to responsibly manage public funds and reporting expectations required under a grant agreement with the State of Vermont.

Actual funding will be based on the following:

- Requested amount (total request and spending plan)
- Available funds
- Strength of application in demonstrating application criteria are met

The Department for Children & Families reserves the right to request additional information and to negotiate terms of the grant agreement with prospective grantees prior to grant execution. This may

include refinement of the project outcomes, services provided, project start date, and costs covered under the grant agreement.

## **ELIGIBLE PROJECT TYPES**

**EMERGENCY SHELTER:** Emergency Shelter means any facility, the primary purpose of which is to provide a temporary shelter for people experiencing homelessness in general or for a specific population of people experiencing homelessness, **AND** which does not require occupants to sign leases or occupancy agreements. This includes temporary seasonal/warming shelters and apartments owned or leased by the grantee and intended for short-term stay only. **Preference will be given to projects that will be operational by December 1, 2024.**

- A) **Essential Services** for homeless individuals and families in Emergency Shelter (See Appendix D).
- B) **Shelter Operations.** Eligible costs may also include property acquisition, construction, use of modular construction and units, and significant renovation costs (projects will be required to obtain all normal permits and adhere to building code requirements)

**APPENDIX D, HOP Standards for Provision of Assistance** for additional limitations and requirements.

**PERMANENT SUPPORTIVE HOUSING:** Permanent Supportive Housing (PSH) is permanent housing in which housing assistance (e.g. long-term leasing or rental assistance) and supporting services are provided to assist households with at least one member with a disability or complex needs in achieving housing stability. Eligible costs include property acquisition, construction, use of modular construction and units, and significant renovation costs. Funding for services must be leveraged.

## **FUNDING PRIORITIES**

1<sup>st</sup> Emergency Shelter Projects operational December 1, 2024-March 31, 2024

2<sup>nd</sup> Emergency Shelter Projects and Permanent Supportive Housing Projects

Additional priority will be given to

- Municipalities
- Projects in Chittenden, Rutland, Washington, Bennington, and Windham counties
- Projects that can use this funding to launch year-round or ongoing projects

## **REPORTING & RECORDKEEPING REQUIREMENTS**

- **Monthly Reports:** Grantees will submit monthly progress reports to the Department for Children & Families until the project is operational, using templates provided.
- **Additional Reporting for Projects Including Essential Services & Shelter Operations:**
  - **Performance Reports** are due: October 15, January 15, April 15 and July 15. These consist of summary of demographic information, shelter utilization, and performance outcomes tailored to the funded project type (*see below*). The Quarter 4 report must also include a

narrative covering activity during the year.

- Point-in-Time Count: Grantees are required to participate in the annual Point-in-Time Count conducted by the Continuum of Care. The date of the count will be determined by HUD (anticipated late January).
- HMIS: Grantees are required to participate in the VT HMIS (Homeless Management Information System), as designated by their Continuum of Care. Victim service providers are exempt from this requirement under the Federal Violence Against Women Act (VAWA), but are required to use Osnum, a separate comparable database (§576.400f). Some required reports must be generated through the HMIS or comparable system.
- Coordinated Entry: Grantees are required to participate in the Coordinated Entry process put in place by their respective Continuum of Care, the Vermont Coalition to End Homelessness or Chittenden County Homeless Alliance.
- Participant Eligibility: Grantees are required to document participant eligibility as part of an intake process. These records and associated documentation may be kept virtually (e.g., HMIS) and/or in hard copy form.
- **WRITTEN STANDARDS** (see Appendix D for details): All projects are required to have written standards (policies and procedures).
- General Recordkeeping: See Appendix G for general recordkeeping requirements.
- Financial Reports: All cash requests must be accompanied by a financial accounting of expenditures. A final financial report is due July 30 and must include a final accounting of the expenditure of funds.
- Financial Records: Grantees are required to maintain complete financial records of all funded activity, including invoices, receipts, and payroll records. Grantees may be required to produce these to the OEO, HUD, or Agency of Human Services at any time in connection with documentation of a disbursement request, program monitoring, or financial auditing.
- Continuum of Care Reporting: Grantees will be required to report no less than once per year to their local Continuum of Care/Housing Coalition on the outcomes achieved by the project(s).

## **PERFORMANCE MEASURES**

### **Providing Access to Emergency Shelter**

The number of nights that the emergency shelter is staffed, insured, and clear of safety violations.

### **Connecting Homeless Households with Essential Services**

The percentage of homeless households in emergency shelter who meet with a case manager or equivalent within 3 days of referral (target 90%).

### **Increasing Income and Access to Mainstream Benefits for Homeless Households**

The number of homeless households receiving case management and:

the percentage who subsequently attain employment **OR** are enrolled in an educational or training program, **OR** qualify for cash or non-cash benefits (e.g., Reach-Up, SSI, General Assistance, VA, 3SquaresVt, etc.) within 90 days of referral (target 70%);

the percentage who subsequently are stabilized in transitional or permanent housing within 90 days (target: 70%) **AND** the percentage of these formerly homeless households who continue to be stably housed for at least 90 days (target 70%).



**Department for Children & Families**

**EMERGENCY SHELTER & PERMANENT SUPPORTIVE HOUSING FUNDING OPPORTUNITY**

**SECTION II: APPLICATION**

**A) COVER SHEET**

*Include a Cover Sheet with the following (# and label):*

- 1) Applicant Name, Address, Telephone
  
- 2) Unique Entity ID (UEI)
  
- 3) Fiscal Agent Name and Address (if applicable)

*If using a Fiscal Agent, please attach signed written agreement between applicant and fiscal agent.*

- 4) Official Contact Person Name, Job Title, Telephone and Email (for all official grant correspondence)
  
- 5) Name and Contact Information for Person Preparing Application (if different)
  
- 6) Local Continuum(s) of Care & Agency of Human Services (AHS) District(s)
  
- 7) Please note the Project Type(s) for which the applicant is requesting funds:
  - Emergency Shelter: complete C #7-15
  - Permanent Supportive Housing: complete C #16-19

***In addition to the Sections and Questions noted above, all applicants must complete Sections A (this cover sheet), B (if applicable), C #1-6, D, and E.***

- 8) Total Request \_\_\_\_\_
  
- 9) Organization will be able to meet the required insurance coverage limits detailed in Attachment C if awarded funds.<sup>6</sup>  Yes  No

To the best of my knowledge and belief, information on all forms in this application is true and correct, and the application has been duly authorized by the governing body of the applicant.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name/Title

<sup>6</sup> A Certificate of Insurance will be required prior to any grant agreements being executed.

**B) BACKGROUND NARRATIVE** (NOT APPLICABLE for agencies that have received funding from the Department for Children & Families, Department for Housing and Community Development, or Vermont Housing and Conservation Board within the past 5 years)

1) General Background: Provide the following background information on your organization: brief history, structure of organization, board members, staffing, affiliations, and activities. Make clear how housing programming or services aligns with mission of the organization.

2) Management Experience & Capacity:  
*Applicants must also attach an organizational chart.*

Applicant has experience with the following (check all that apply):

- Managing federal grants - *please list*:
- Managing state-funded grant programs - *please list*:
- Managing a project of similar scale/size - *please list*:

3) Housing and/or Homeless Assistance Experience:

Applicant has experience providing (check all that apply):

- Emergency Shelter
- Homelessness Prevention
- Transitional Housing
- Rapid Re-housing
- Outreach to People Experiencing Homelessness
- Case Management or Service Coordination
- Other - *please identify*:

4) Experience Working with Marginalized Populations:

Applicant has experience with targeted outreach and services to the following marginalized populations (check all that apply):

- Black and/or people of color
- People with limited English proficiency
- Indigenous Communities
- People living with disabilities
- New Americans
- Other underserved or marginalized population - *please describe*:
- Migrant Farmworkers

5) Demonstrated Results: Use data from past performance to demonstrate the applicant's ability to reduce the incidence or duration of homelessness in your local Continuum of Care, prevent homelessness or re-house the homeless, provide effective housing stability case management services, and/or connect homeless clients with mainstream benefits.

**C) PROGRAM NARRATIVE (please use the following outline; please cross-reference when appropriate)**

- 1) Summary: Briefly describe how funds will be utilized and who the project(s) is designed to serve. Be specific beyond the basic eligibility criteria provided (i.e., identify any subpopulations, families with children, etc.).
  
- 2) Local Continuum of Care/Housing Coalition: Indicate how the organization actively participates in the local Continuum of Care/Housing Coalition (or for statewide projects, the Vermont Balance of State CoC and the Chittenden County Homeless Alliance). *All projects must also include the Continuum of Care/Housing Coalition Review Form (see Appendix C) to demonstrate evidence the project fills a need within the local Continuum of Care/Housing Coalition, addresses a gap and/or meets a priority need.*

Check all that apply:

- Attends regular meetings
- Participates in one or more committees
- Supports Point-in-Time count activities
- Coordinated Entry Partner (signatory to local Partnership Agreement)
- Not currently participating – *please describe how you would participate in the future:*
- Other - *please describe:*

- 3) Mainstream Resources (if applicable): Indicate how the project(s) will connect clients with mainstream benefits (e.g., Medicaid, 3SquaresVt, Reach Up, WIC, SSDI/SSI, VA, HireAbility (vocational rehab) unemployment insurance, etc.) and services such as medical/mental health treatment, counseling, workforce development/job training, childcare, financial empowerment and other services needed to achieve independent living.

Check all that apply:

- Uses standard assessment or screening tool (*please attach*)
- Uses individualized service plan to identify and track benefits and services (*please attach*)
- Provides benefit application assistance - *please note:*
- Other - *please describe:*

- 4) Homeless Education Connection (if applicable): If the project serves school-aged children, describe the organization’s relationship with the Homeless Education Liaison(s) to identify children in their districts who are eligible for homeless education program resources, maximize and coordinate these resources, and support continuity in education whenever possible. *For more information, please review:* <https://education.vermont.gov/student-support/federal-programs/consolidated-federal-programs/education-homeless-children-and>

5) Homeless Participation: Indicate how, to the maximum extent practicable, the applicant will involve (through employment, volunteer services, or otherwise) homeless individuals and families in operating or providing shelter and/or services.

Check all that apply:

- The board of directors is structured to include individuals with lived experience
- Advisory council of individuals with current and/or past lived experience
- Peer-led programming or services
- Paid peer positions
- Recruitment for positions targets or prioritizes people with lived experience
- System for regular consumer feedback and analysis
- Regular meetings for shelter guests for the purpose of listening and supporting shelter operation
- Other - *please describe*:

6) Accessibility: Describe how the applicant will ensure access to all programs, services and activities for people with disabilities, including those with disabilities not related to mobility. *If the organization has an agency or program policy, that may be attached in lieu of a separate narrative.*

**EMERGENCY SHELTER APPLICANTS ONLY (QUESTIONS 7-15)**

***Includes warming/seasonal shelters, emergency apartments***

*Please review Appendix D, Standards for Provision of Assistance for basic program requirements.*

7) For each project or facility, please include the following:

- a) Name of Shelter Project:
  
- b) Shelter Address:
  
- c) Shelter Contact Person, Job Title, Telephone & Email:
  
- d) Anticipated Opening Date:
  
- e) # of Weeks per Year in Operation:
  
- f) Capacity Chart:

	Proposed
# of emergency shelter beds:	
# of emergency shelter bedrooms:	
# of emergency apartments and bedrooms:	

***Please note overflow capacity separately. Pack-and-play capacity should not be included.***

8) Intake & Admission:

- a) Shelter hours:
  - 24 hours/day, 7 days/week
  - Other - **All shelter projects must provide shelter on a 24/7 basis, unless an exception is granted by the Office of Economic Opportunity.** If requesting an exception, the shelter must also have a daytime continuity plan which ensures all shelter guests have a safe place to be during daytime hours, including transportation available to/from the shelter. ***If in need of an exception, please describe the reasons here, as well as the proposed daytime continuity plan:***
  
- b) Intake hours (if different than shelter hours):
  
- c) Shelter admission policy – Please describe any prioritization as well as any pre-requisites to shelter. *Policy may be attached in place of narrative.*
  
- d) Shelter diversion – Please describe how the shelter works with households prior to shelter admission to identify an immediate housing arrangement that is a safe alternative to shelter or sleeping unsheltered. *Note: this is required of all shelter projects.*

- e) Please attach or describe local emergency shelter protocol to coordinate access with other local emergency shelters (including publicly-funded motel stays).
- f) Coordinated Entry – Please describe when and how shelter guests are offered the opportunity to participate in Coordinated Entry, as well as who conducts the Coordinated Entry Assessment.

9) Volunteers:

Indicate if the project uses volunteers for shelter staffing needs:

- No
- Yes - *please describe how volunteers are recruited, trained and supervised:*

10) Savings Requirements:

Indicate if participants are expected to save household income while in shelter:

- No
- Yes - *Please describe (or attach written policies) how the organization monitors or collects savings, including any interest earned from client savings held in escrow. Describe how savings requirements, totals and returned funds are communicated to clients.*

11) If funding will be used for Essential Services Case Management:

*Please see Appendix D, Standards for Provision of Assistance, for clarification on the definition of "Essential Services Case Management"*

- a) Shelter staff and leadership have been trained in and use the following practices or evidence-informed approaches in the Emergency Shelter project (check all that apply):
  - Standard Case Management or Service Coordination
  - Motivational Interviewing
  - Critical Time Intervention
  - Trauma-informed Practice
  - Shared Decision-Making
  - Intensive Case Management
  - Assertive Community Treatment
  - Strengthening Families Framework
  - Family Centered Teaming/Practice
  - Other - *please describe:*

b) Estimated caseload at any point in time per full time staff person: \_\_\_\_\_

c) Anticipated minimal level (how often) of services:

- Daily
- 3 or more times weekly
- Weekly
- Monthly
- Varies, by design - *please describe:*

d) Please describe how the project provides an assessment of individual household needs and strengths. *Assessment tool may be attached in place of a narrative.*

e) Please describe the process for development of a written housing plan or case plan. *An individualized housing/service plan tool or template may be attached in place of a narrative.*

12) If Essential Services Funding will be used for **services other than case management or staff**, describe how funds will be utilized to connect homeless individuals and families to critical services needed to achieve self-sufficiency and permanent housing.

13) Please describe the site and location, including proximity to services (e.g. grocery store, health services, schools, public transportation, etc.).

14) Readiness to start by December 1, 2024 or identified start date of \_\_\_\_\_:

- a) Describe State and Local permitting and regulatory approvals that your project has identified, along with the proposed timetable for those approvals and any anticipated challenges.
- b) Describe support or resistance from municipality, neighborhood, and abutters. Document evidence of municipal willingness to grant regulatory approvals required (if any).
- c) Describe the outreach plan for engaging with the local government and community (municipality, first responders, law enforcement, nearby schools, transportation providers, service providers, etc.) in the planning and implementation of the project.
- d) Provide a project timeline. Include key dates such as permits in hand, 100% funding commitments, design completion, construction complete, hiring, contracts etc. and any other key dates for actions to carry out this project.

15) If funding will be used for property acquisition, constructions or significant renovations, please answer the following questions:

- a) Describe proposed project, including the scope of work, square footage, design, building materials, site improvements, parking, and environmental testing and/or abatement:
- b) Proposed Development Schedule – Please cite the date expected for the following events:

Submission of financing applications  
Regulatory and zoning reviews and approvals  
Building permit  
Receipt of financing commitments  
Construction start  
Construction completion  
Occupancy  
Please include any notes about phasing here:

- c) Site Control – State the current status of ownership and describe plans to acquire site control. If site control has been established, provide evidence of options, purchase and sale, or develop designation.
- d) Funding Sources – Identify proposed sources and uses. Describe timeline related to funding and identify if there are areas of the project without identified funding sources.
- e) Describe plan for property management?

**PERMANENT SUPPORTIVE HOUSING (PSH) APPLICANTS ONLY (QUESTIONS 16-19)**

16) For each proposed project or facility, please include the following:

Name of PSH Project:

Proposed PSH Address:

PSH Contact Person, Job Title, Telephone & Email:

Project Description:

Estimated Funding Request<sup>7</sup>:

Plan for Services:

- a) Identified Service Provider:
- b) Funding Source:

17) Please describe the site and location, including proximity to services (e.g. grocery store, health services, schools, public transportation, etc.).

18) Readiness to start by December 1, 2024 or identified start date of \_\_\_\_\_:

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<sup>7</sup> If selected, a detailed budget will be requested.



- a) Describe State and Local permitting and regulatory approvals that your project has identified, along with the proposed timetable for those approvals and any anticipated challenges.
- b) Describe support or resistance from municipality, neighborhood, and abutters. Document evidence of municipal willingness to grant regulatory approvals required (if any).
- c) Describe the outreach plan for engaging with the local government and community (municipality, first responders, law enforcement, nearby schools, transportation providers, service providers, etc.) in the planning and implementation of the project.
- d) Provide a project timeline. Include key dates such as permits in hand, 100% funding commitments, design completion, construction complete, hiring, contracts etc. and any other key dates for actions to carry out this project.

19) If funding will be used for property acquisition, constructions or significant renovations, please answer the following questions:

- a) Describe proposed project, including the scope of work, square footage, design, building materials, site improvements, parking, and environmental testing and/or abatement:
- b) Proposed Development Schedule – Please cite the date expected for the following events:  
 Submission of financing applications  
 Regulatory and zoning reviews and approvals  
 Building permit  
 Receipt of financing commitments  
 Construction start  
 Construction completion  
 Occupancy  
 Please include any notes about phasing here:
- c) Site Control – State the current status of ownership and describe plans to acquire site control. If site control has been established, provide evidence of options, purchase and sale, or develop designation.
- d) Funding Sources – Identify proposed sources and uses. Describe timeline related to funding and identify if there are areas of the project without identified funding sources.
- e) Describe plan for property management?

If funding is available, the Department for Children and Families will follow up with applicants who have expressed interest in Permanent Supportive Housing Projects to request a detailed budget.

## c) **BUDGET & JUSTIFICATION**

**Emergency Shelter Applicants must present their budget using the excel template provided. DOUBLE CHECK ALL MATH.**

**Please also provide a budget justification for each category of funding requested.** This can be added to the budget template (excel) or provided separately. A budget justification should include the basis or methods for costs, allowing their review to determine whether costs are allowable, reasonable and appropriate. **DOUBLE CHECK ALL MATH.**

### **For ALL Salaries**

Applicants are required to use the personnel worksheet provided in the budget template (excel).

**Attach a Job Description for all positions to be supported by funds.** Ensure that the job titles listed in the budget template match the submitted job descriptions.

For any subcontracted services, provide a basis for the amount included.

Materials, supplies, and travel may be included when specifically to support direct service staff.

### **For Emergency Shelter Operations**

Requests for operations funding must include a list of items for which the grantee is requesting funding (i.e., rent, electricity, insurance, fuel, cleaning, rubbish/snow removal, maintenance/minor repairs, etc.). If not evident, provide a basis for the amount included.

**If the organization operates more than one shelter facility,** be clear with project titles and addresses which facilities are being included in the request.

**If funds will support a facility, does the shelter facility also provide shelter or beds for individuals and families that do NOT meet the definition of homeless (*Appendix A*) – such as offenders on furlough through the Department of Corrections?** If so, how many beds or units does the facility have in total and how many are set aside for DOC clients or other non-homeless clients? **Be sure to provide a total shelter operations budget.** Include any additional information or basis for determining the HOP request for shelter operations funding.

**Please note:** Requiring guests to pay any fees or “rent” in exchange for shelter is prohibited. Grantees may require guests or participants to save household income. All household savings must be returned to guests upon project exit. Any interest earned from client savings held in escrow should be returned to the client. Grantees must have a policy in place if they will require guests to save household income.

**For Administration**

All grantees may use a federally approved indirect cost rate or a de minimus indirect rate of 10% of modified total direct costs.

If using a federally approved indirect cost rate, please attach.

If using a 10% de minimus, please review the following information. Modified Total Direct Costs (MTDC) are the basis for determining the 10% de minimus indirect rate.

**Direct Costs included in MTDC:**

All direct salaries and wages, applicable fringe benefits, materials and supplies, services, and travel

Sub-contracts (up to the first \$25,000 of each sub-contract)

Routine maintenance/repairs

Security

Food and shelter supplies

**Costs Excluded from MTDC:**

Equipment

Rent, Insurance, Utilities, Fuel, Equipment, Furnishings

Hotel/motel vouchers

Client financial and rental assistance (i.e., security deposits, last month's rent, utility deposits, utility payments, moving costs, rental assistance, rental arrears).

HMIS licenses

Portion of a subcontract in excess of \$25,000

## **E) ATTACHMENTS**

### **1) ORGANIZATION AND PROJECT BUDGET(S) (required)**

Attach **both** the current organization budget and proposed project budget(s). Multi-service organizations should also provide a department or program budget (current and/or projected). Please note all additional funding sources and amounts (anticipated and secured) for your housing project such as: Reach-Up, HUD Continuum of Care, HUD Housing Counseling, Dept. of Corrections, Private Donations, etc.

### **2) ORGANIZATIONAL CHART (required)**

**3) CONTINUUM OF CARE/HOUSING COALITION REVIEW FORM (preferred, not required)**, included here as Appendix C.

**4) CERTIFICATE OF LOCAL GOVERNMENT APPROVAL (if applicable<sup>8</sup>)**, included here as Appendix E.

**5) SIGNED ASSURANCES (required)**, please sign the form provided in Appendix F.

### **6) REQUIRED AND OPTIONAL ATTACHMENTS RELATED TO NARRATIVE QUESTIONS**

#### **Cover Sheet**

Signed written agreement between applicant and fiscal agent (Question 3) – ***required, if applicable***

#### **Program Narrative**

- Mainstream benefits assessment or screening tool (Question 3)
- Mainstream benefits individualized service plan (Question 3)
- Accessibility policy (Question 6)

#### **Emergency Shelter Applicants**

- Shelter admission policy (Question 8c)
- Emergency shelter coordination protocol (Question 8e)
- Savings requirements policy (Question 10)
- Assessment tool (Question 11d)
- Individualized housing/service plan (Question 11e)

#### **Budget & Justification**

- Project budget(s) using excel template – ***required for emergency shelter projects***
- Budget justification – ***required (may be included as part of Excel template)***
- Job descriptions for all position to be supported by funds – ***required***
- Federally-approved indirect cost rate agreement – ***required, if applicable***

### **7) For Faith-based or Religious Organizations, Buildings, Programs or Activities:**

Eligibility for funding requires that services and assistance (at your facility or as part of the funded project)

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<sup>8</sup> Required for all applications for emergency shelter projects (i.e., facility-based).

are carried out in a manner which neither advances nor inhibits religion. Please answer the following questions with those criteria in mind:

- Is the shelter or housing facility owned by a "primarily religious organization?"
- Describe all activities, services, or other benefits offered by the shelter which reflect a religious orientation and which will be funded wholly, or in part, by the HOP funds.
- Attach the shelter's Articles and By-Laws if these documents reflect a religious orientation in its activities or purpose. (Only required for new applicants or those that have updated by-laws since a previous HOP application).

**WE RESERVE THE RIGHT TO REQUEST FURTHER INFORMATION.**

**WE RESERVE THE RIGHT TO CONSIDER FUNDING REQUESTS FULLY OR PARTIALLY UNDER THE HOUSING OPPORTUNITY GRANT PROGRAM.**

**WE RESERVE THE RIGHT TO SUPPORT FUNDING REQUESTS THROUGH MEMORANDUMS OF UNDERSTANDING WITH PARTNERS SUCH AS THE DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT OR THE VERMONT HOUSING & CONSERVATION BOARD.**

## APPENDIX A. DEFINITION OF HOMELESSNESS

*Published by HUD - November 15, 2011; Adopted by the Vermont Agency of Human Services*

<b>CRITERIA FOR DEFINING HOMELESSNESS</b>	<b>Category 1</b>	Literally Homeless	<p>(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> <li>(i) Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;</li> <li>(ii) Is living in supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); <b>OR</b></li> <li>(iii) Is exiting an institution where (s)he resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.</li> </ul>
	<b>Category 2</b>	Imminent Risk of Homelessness	<p>(2) Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> <li>(i) Residence will be lost within 14 days of the date of application for homeless assistance;</li> <li>(ii) No subsequent residence has been identified; <b>AND</b></li> <li>(iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing.</li> </ul>
	<b>Category 3</b>	Homeless under other Federal statutes	<p>(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> <li>(i) Are defined as homeless under the Runaway and Homeless Youth Act (42 U.S.C. 5732a, section 387), the Head Start Act (42 U.S.C. 9832, section 637), the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2, section 41403), the Public Health Service Act (42 U.S.C. 254b(h), section 330(h)), the Food and Nutrition Act of 2008 (7 U.S.C. 2012, section 3), the Child Nutrition Act of 1966 (42 U.S.C. 1786(b), section 17(b)) or McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a, section 725);</li> <li>(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;</li> <li>(iii) Have experienced persistent instability as measured by two moves or more during the preceding 60-days; <b>AND</b></li> <li>(iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or GED, illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment.</li> </ul>
	<b>Category 4</b>	Fleeing/ Attempting to Flee Domestic Violence	<p>(4) Any individual or family who:</p> <ul style="list-style-type: none"> <li>(i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;</li> <li>(ii) Has no other residence; <b>AND</b></li> <li>(iii) Lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.</li> </ul>

**APPENDIX B. DEFINITION of “AT RISK OF HOMELESSNESS”**

HUD Interim ESG Regulation – Congruent with definition adopted by Vermont Agency of Human Services

<b>CRITERIA FOR DEFINING AT RISK OF HOMELESSNESS</b>	<b>Category 1</b>	Individuals and Families	<p>An individual or family who:</p> <ul style="list-style-type: none"> <li>(i) Has an annual income below 30% of median family income for the county<sup>9</sup>; <b>AND</b></li> <li>(ii) Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; <b>AND</b></li> <li>(iii) Meets one of the following conditions: <ul style="list-style-type: none"> <li>(A) Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; <b>OR</b></li> <li>(B) Is living in the home of another because of economic hardship; <b>OR</b></li> <li>(C) Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; <b>OR</b></li> <li>(D) Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; <b>OR</b></li> <li>(E) Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; <b>OR</b></li> <li>(F) Is exiting a publicly funded institution or system of care.</li> </ul> </li> </ul>
	<b>Category 2</b>	Unaccompanied Children and Youth	A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute.
	<b>Category 3</b>	Families with Children and Youth	A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.

<sup>9</sup> In State Fiscal Year 2025, the Housing Opportunity Grant Program income eligibility for Financial Assistance is at or below 50% AMI. OEO will post HUD income limit charts when available.

## APPENDIX C. CONTINUUM OF CARE/HOUSING COALITION REVIEW FORM

Local Continua of Care (CoC)/Housing Coalitions do not need to vote to approve a project application or to prioritize multiple projects within a local CoC/coalition. The purpose of this form is to demonstrate coordination and communication with the local CoC/coalition.

### TO BE COMPLETED BY THE APPLICANT

Applicant Agency: \_\_\_\_\_ Fiscal Agent (if applicable): \_\_\_\_\_

Total Funding Request: \_\_\_\_\_

Project Description	\$ Amt of Request
Click here to enter text.	
Click here to enter text.	
Click here to enter text.	
Click here to enter text.	
Click here to enter text.	

### TO BE COMPLETED BY THE LOCAL CONTINUUM OF CARE (COC)/HOUSING COALITION

Name of Local CoC/Coalition:<sup>10</sup> \_\_\_\_\_

Local CoC/Coalition Chair(s): \_\_\_\_\_ Email(s): \_\_\_\_\_

Date of Local CoC/Coalition Review of HOP Requests for Funding: \_\_\_\_\_

#### RENEWAL REQUESTS: Did the Grantee report on the outcomes achieved by the HOP-funded project(s)?

Yes
  No
  Not a Renewal Request

Dates: \_\_\_\_\_

#### FOR ALL REQUESTS: Does the project fill an identified need within the local Continuum of Care/Housing Coalition?

Yes
  No

Comments: [Click or tap here to enter text.](#)

#### FOR ALL REQUESTS: If the local CoC/coalition has a strategic plan (not required), does the project meet a local priority?

Yes
  No
  Not applicable (no strategic plan)

Comments: [Click or tap here to enter text.](#)

Comments: [Click or tap here to enter text.](#)

<sup>10</sup> Statewide projects may instead be reviewed by the VT Balance of State CoC.



**Additional Comments:** Click or tap here to enter text.

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Signature of Local CoC/Coalition Chair  
(or delegate)

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Printed Name

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Date

## APPENDIX D. HOUSING OPPORTUNITY GRANT PROGRAM SFY25 STANDARDS FOR PROVISION OF ASSISTANCE

### EMERGENCY SHELTER

- A. Admission:** Providers must have written policies or procedures addressing shelter admission that meet the following requirements:
- Project participant eligibility is limited to families and individuals who meet the criteria under paragraph (1), (2), (3), or (4) of the HUD Definitions of Homelessness
  - The following may not be used as the basis for denying someone admission to shelter:
    - Age of children in the family (for shelters that provide services to families)
    - Fleeing domestic or sexual violence
    - Disability status, including substance use disorder or mental health disorder
    - Any other protected class, except in the case that the shelter is limited to specific subpopulations (e.g. youth, adults only, families with children)
  - Hours of admission must be posted clearly for the general public and include information about where/how to apply
    - Providing public information about a 24/7 hotline that can be used to access shelter may be used to meet this requirement
  - Include a process for reasonable accommodation requests and information about how there are reviewed
  - Planning for discharge starts at the time of admission to ensure that guests are moving to permanent housing as soon as possible
- B. Diversion:** Providers must have a written standard to ensure diversion from shelter occurs when possible<sup>11</sup>. The written standard must include:
- A practice of discussing diversion options with all applicants for shelter at the point of referral or first contact
  - How staff will support the applicant to move towards stability while they are staying in an alternative location to shelter
- C. Referral:** Providers must have a written standard that describes how the shelter coordinates access to mainstream benefits and resources (such as housing, health, social services, employment, education, and youth programs) to ensure guests are assisted, as needed, with obtaining appropriate supportive services, including other Federal, State, local, and private assistance.
- A policy, procedure, or tool that ensures guests are screened for their needs and then receive appropriate referrals to other providers is acceptable.

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<sup>11</sup> Diversion occurs before a person enters shelter and is aimed at helping them identify an immediate housing arrangement that is a safe alternative to shelter or sleeping unsheltered. This housing arrangement may be temporary, allowing time to identify a permanent housing option while avoiding the immediate trauma of homelessness, or it may allow those involved to explore the possibility of extending a temporary arrangement into a permanent one. (Source: USICH, "[Homelessness Prevention, Diversion, and Rapid Exit](#)")

**D. Discharge:** Providers must have written policies and procedures addressing discharge from shelter that meet the following requirements:

- A formal process for both voluntary and involuntary termination of shelter that at a minimum:
  - Recognizes the rights of individuals affected
  - Clearly defines what could result in the termination of shelter, focusing on behaviors that disrupt or jeopardize health or safety of shelter guests, rather than compliance to rules or case plans
  - Exercises judgment and examines all extenuating circumstances in determining when violations warrant termination so that a participant's assistance is terminated only in the most severe cases
- Information about the discharge process is provided to all guests at intake
- When involuntary termination occurs and contact with the guest can be made:
  - The shelter must attempt to work with the guest to identify alternative shelter options
  - Whenever possible, guests are provided with a written notice that includes:
    - the reason for termination
    - the process to appeal the decision
    - what actions they will need to take in order to be considered for a return to shelter in the future, if needed
- The appeals process must:
  - Happen in a timely manner
  - Include the option for guests to have their request reviewed by agency staff not involved in the initial termination decision
- Terminations, both voluntary and involuntary, are documented in a way that allows for them to be reviewed during monitoring
  - Documentation of termination must be kept in client files

**E. Length of Stay:** Providers may have a length of stay policy. If a provider limits length of stay at shelter, they must have a policy that meets the following requirements:

- Identifies what the initial length of stay is, how guests can request an extension, and how the program will make decisions about granting the extension
- Information about this policy and the process to request an extension is provided to all guests at intake

**F. Safeguards for Special Populations:** Providers must have written policies and procedures regarding safeguards to meet the safety of special populations, including victims of domestic or sexual violence. The policies and procedures must ensure the following requirements are met:

- No individual or family may be denied admission to or removed from the shelter on the basis or as a direct result of the fact that the individual or family is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the individual or family otherwise qualifies for admission or occupancy.

- There must be a process to assess for the potential of threats to safety for persons fleeing domestic violence, dating violence, sexual assault, or stalking.
- The shelter exhibits cultural competence and responsiveness, including providing adequate protections for shelter seekers across demographic differences.
- Confidentiality policies ensure that the identity of guests is protected, except in those circumstances when a guest has signed a release of information or as required by law.

**G. Needs of Special Populations:** Providers must have a written standard regarding how they will meet the needs of special populations, including individuals and families who have the highest barriers to housing and are likely to be homeless the longest. The standard must ensure the following requirements are met:

- Expectations of shelter guests are clearly communicated and easily accessible for review by guests
- Shelter staff and volunteers receive training in trauma-informed care

**H. Shelter Hours:** Providers must provide shelter on a 24/7 basis, unless an exception is granted by the Office of Economic Opportunity.

- Examples of when exceptions may be granted include, but are not limited to:
  - a shelter is unable to provide staffing on a 24/7 basis
  - zoning requirements prohibit daytime operations
  - the shelter is located in a shared use facility
- Shelters that have been granted an exception are required to identify a daytime continuity plan to ensure guests have access to shelter at all times.
  - When the Emergency Shelter is not open to guests, alternative locations must be identified. These locations:
    - Must not require an appointment
    - Must be considered a public space
    - Must be accessible to all guests

**I. Prioritization:** If a provider *maintains a waiting list*, they must have a written policy on prioritization that meet the following requirements:

- When space in shelter becomes available, the order of priority must, at a minimum, be:
  1. Literally Homeless (Category 1) - Unsheltered
  2. Literally Homeless (Category 1) – Staying in a motel not paid for by self, including those fleeing domestic or sexual violence
  3. Literally Homeless (Category 1) – Staying in a place other than a motel, including those fleeing domestic or sexual violence
  4. Imminently Homeless (Category 2) – Including those fleeing domestic or sexual violence
- Align with fair housing and reasonable accommodation requirements

- J. Local Coordination:** Providers must be a part of their local CoC's written protocol for coordination between local emergency shelters, Economic Services, and 2-1-1. The protocol must meet the following requirements:
- Describe a strategic, community-wide system to prevent and end homelessness for that area
  - Identify how shelter openings will be communicated and how referrals to shelter will be coordinated
  - Include the following for each agency/partner: contact information, intake hours, shelter hours (if applicable), population(s) served, intake process
  - Emphasize ease of access for those seeking emergency shelter
- K. Coordinated Entry:** Providers must have written policies or procedures ensuring guest access to the Coordinated Entry system that meet the following requirements:
- *If the emergency shelter provider is a Referral Partner (Balance of State) or Access Point (Chittenden)*, a referral to the local Lead Agency must be made within 3 calendar days of a guest's entry to shelter.
  - *If the emergency shelter provider is a Lead Agency, Assessment Partner (Balance of State) or Assessment Hub (Chittenden)*, the opportunity to complete the CE Assessment is provided to the guest within one week of entry into shelter.
- L. Required Savings:** If a provider requires guests to contribute to a savings account while at the shelter, they must have a written policy detailing the requirement.
- M. Essential Services:** Providers receiving funding for Essential Services must have written standards regarding how guests' needs for services are determined and prioritized. That standards must meet the following requirements:
- Clearly identify how the needs of guests are assessed during the intake process and on an ongoing basis, as appropriate.
  - Needs must be prioritized to ensure that basic/immediate needs are addressed as soon as possible. This may be done through the use of a specific assessment tool, a case plan addressing prioritization, or a written intake process.

## **RAPID RE-HOUSING**

Written standards may be developed in partnership with the local Continuum of Care. Written standards must be applied consistently within the project and must conform to the Coordinated Entry policies and procedures established by the respective Continuum of Care.

Grantees/subrecipients may modify their level of assistance below the maximums provided in this document based on availability of HOP funds, or ability to leverage other state, federal or private assistance funding for clients.

Grantees/subrecipients must meet all requirements related to the Violence Against Women Act (VAWA).

No grantee/subrecipient may, with respect to individuals or families occupying housing owned by the grantee/subrecipient or parent organization, determine eligibility, carryout assessment activities, or administer rental assistance.

- A. *Intake & Prioritization:*** Providers must have written standards addressing how they will determine and prioritize which eligible families and individuals will receive rapid re-housing assistance.
- Project participant eligibility is limited to families and individuals who meet the criteria under paragraph (1) of the HUD Definitions of Homelessness
  - Rapid Rehousing services and assistance must be prioritized according to the Coordinated Entry policies and procedures of the Vermont Balance of State CoC or Chittenden County Homeless Alliance (respective to geography).
  - Household income information at the time of assistance must be documented and maintained.
- B. *Length of Rental Assistance:*** Providers must have written standards addressing how they will determine how long a particular project participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time.
- While the ability to sustain housing is a HOP goal and performance measure, it will not be interpreted as a threshold requirement. Prioritization and determination of assistance should be based on household need at the time of initial intake and screening.
    - Rental assistance will be tenant-based and provided on a medium-term basis for no less than four months and up to twenty-four months.
  - Eligibility and types/amounts of assistance must be re-evaluated not less than once annually. Each re-evaluation must establish and document:
    - 1) that the participant does not have an annual income that exceeds 30% of median family income; and
    - 2) the participant lacks sufficient resources and support networks necessary to retain housing without HOP assistance
- C. *Participant Contribution:*** Providers must have written standards addressing how they will determine what percentage, or amount, of rent and utilities costs each project participant must pay, if any, while receiving rapid re-housing assistance.
- Grantees/subrecipients are strongly encouraged to require participants to contribute a minimum of 30% of their household income towards housing costs.
- D. *Housing Stabilization & Relocation Services:*** Providers must have written standards addressing how they will determine the type, amount, and duration of housing stabilization and/or relocation services to provide a project participant. Standards must include the limits, if any, on the rapid rehousing assistance that each project participant may receive, such as:
- the maximum dollar amount of assistance that can be received;
  - the maximum number of months the assistance can be received for; or
  - the maximum number of times the program participant may receive assistance.

- E. *Coordination:*** Providers must have a written standard that describes how the project coordinates access to mainstream benefits and resources (such as housing, health, social services, employment, education, and youth programs) to ensure participants are assisted, as needed, with obtaining appropriate supportive services, including other Federal, State, local, and private assistance.
- A policy, procedure, or tool that ensures participants are screened for their needs and then receive appropriate referrals to other providers is acceptable.
- F. *Housing Retention Services:*** Housing Retention Services are provided that meet the following requirements<sup>12</sup>:
- Require the project participant to meet with a case manager not less than once per month to assist in ensuring long-term housing stability
  - Include the development of a plan to assist the participant in retaining permanent housing after HOP assistance ends, taking into account the participant's current and expected household budget, additional sources of assistance, and affordability of area housing.
- G. *Rental Assistance:*** Rapid Re-Housing rental assistance must meet the following requirements:
- A written lease must be in place, and the applicant's name must be on the lease, before rental assistance payments are made.
  - Rental assistance cannot be provided if rent exceeds the Fair Market Rent established by HUD or does not meet the standard for rent reasonableness (24 CFR 982.507).
  - All payments must be third-party vendor payments; payments may not be made to relatives who are landlords.
  - Payments are to be made on behalf of renters only; homeowners are not eligible for HOP assistance.
  - No rental assistance may be provided to a household for a purpose and time period supported by another public source.
  - The grantee/subrecipient will enter into a rental assistance agreement with the landlord. Landlords must agree to copy the provider on any eviction notice or complaint used to commence eviction; the provider must make timely payments to the owner according to the participant lease agreement.
  - All rental assistance is tenant-based; the participant selects their own housing unit and may move to another unit or building and continue assistance so long as other requirements and eligibility are met.
  - The unit must have an AHS Housing Inspection conducted by the Vermont State Housing Authority<sup>13</sup>
  - If constructed prior to 1978, the unit must meet HUD's lead paint requirements.

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<sup>12</sup> Projects are exempt from this case management requirement if prohibited under the federal Violence Against Women Act (VAWA) or Family Violence Prevention and Services Act from making shelter or housing conditional on the participant's acceptance of services.

<sup>13</sup> This inspection meets HUD's required habitability standards.

- H. **Termination:** Providers must have written policies and procedures addressing the process to terminate Rapid Re-Housing assistance that includes, at a minimum:
- Written notice to the program participant containing a clear statement of the reasons for termination
  - A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision
  - Prompt written notice of the final decision to the program participant

## **SERVICE DEFINITIONS**

While acknowledging that case management should remain flexible to best serve the individual needs of households, the following definitions provide expectations as to provision of services.

**A. Intake/Assessment:** *To provide coordination at the program or community level.*

- Record basic household information to determine immediate need, and eligibility for other assistance
- Conduct an assessment to determine the amount and type of assistance and support that the individual or family needs to regain stability in permanent housing
- Determine what initial referrals may be appropriate to meet a range of household needs – including, shelter and housing, as well as mainstream services (such as childcare, parenting, employment, education, mental health, substance use treatment/recovery, legal services, etc.) and benefits (such as WIC, Reach Up, 3SquaresVt, SSI/SSDI, etc.)
- Follow-up on initial referrals to prevent a household from “falling through the cracks”

**B. Essential Services Case Management:** *To provide coordination for households in emergency shelter settings, ensuring basic needs are addressed and providing comprehensive referrals to mainstream services and benefits.*

- Determine (in consultation with household and other community partners, if applicable) who shall be the lead case manager for the household.
- Work with participants to develop a housing and service plan, set goals, and help participants stay on course
- Provide ongoing risk assessment and safety planning with victims fleeing violence or make appropriate referral
- Employ best practices to help the household identify its strengths and opportunities, as well as underlying issues which may have led to homelessness, or could undermine success if not addressed
- Provide information, referrals and encouragement for the household (or members of the household) to avail themselves of other appropriate services or take appropriate action to address barriers
- Assist with developing, securing and coordinating mainstream services and benefits
- Monitor and evaluate client progress
- Maintain a relationship with household, identifying the appropriate level of support without creating over-dependence



- Ensure households have appropriate services after they have moved into permanent housing, including housing retention services

### **Other Guidance and Restrictions**

Additional guidance on eligible and ineligible uses of HOP funds are contained in the Notice of Funding, grant agreements and [guidance](#)<sup>14</sup> issued by the Office of Economic Opportunity. Grantees are encouraged to contact the Office of Economic Opportunity at (802) 241-0935 for clarification on any HOP requirements or standards.

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<sup>14</sup> <https://dcf.vermont.gov/oeo/partners/HOP>

**APPENDIX E. CERTIFICATION OF LOCAL GOVERNMENT APPROVAL**

**CERTIFICATION OF LOCAL GOVERNMENT APPROVAL**

**FOR NONPROFIT ORGANIZATIONS**

**RECEIVING EMERGENCY SHELTER or PERMANENT SUPPORTIVE HOUSING FUNDS FROM STATE OF VERMONT**

I, \_\_\_\_\_ (*name and title*) duly authorized to act on behalf of the \_\_\_\_\_ (*name of jurisdiction*) hereby approve the following project(s) proposed by \_\_\_\_\_ (*name of nonprofit*) which is (are) to be located in \_\_\_\_\_ (*name(s) of jurisdiction(s)*):

By: \_\_\_\_\_  
Signature and Date

\_\_\_\_\_  
Typed Name of Signatory Local Official

\_\_\_\_\_  
Title

## **APPENDIX F. PROGRAMMATIC ASSURANCES**

### **(Include as a signed page with submission)**

**Affirmative Outreach:** The grantee will make known that use of the facilities, assistance, and services are available to all on a nondiscriminatory basis. If it is unlikely that the procedures that the grantee intends to use to make known the availability of the facilities, assistance, and services will reach persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for those facilities and services, the grantee will take additional steps to ensure that those persons are made aware of the facilities, assistance, and services. The grantee will also take appropriate steps to ensure effective communication with persons with disabilities to ensure that interested persons receive information concerning the location of assistance, services, and facilities that are accessible to persons with disabilities. The grantee will also take reasonable steps to ensure meaningful access to programs and activities for limited English proficiency (LEP) persons.

**Availability of Shelter:** If funds are used for emergency shelter, the grantee will provide services or shelter to homeless individuals and families for the period during which the assistance is provided, without regard to a particular site or structure, so long as the applicant serves the same type of persons (*e.g.*, families with children, unaccompanied youth, veterans, disabled individuals, or victims of domestic violence) or persons in the same geographic area.

**Confidentiality:** The grantee will implement written procedures to ensure that:

- (i) All records containing personally identifying information of any individual or family who applies for and/or receives assistance funded will be kept secure and confidential;
- (ii) The address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project assisted with funding will not be made public, except with written authorization of the person responsible for the operation of the shelter; and
- (iii) The address or location of any housing of a project participant will not be made public, except as provided under a preexisting privacy policy of the grantee and consistent with state and local laws regarding privacy and obligations of confidentiality.

**Connection to Mainstream Benefits:** Grantees must coordinate and integrate activities, to the maximum extent practicable, with mainstream housing, health, social services, employment, education, and youth programs for which families and individuals at risk of homelessness and homeless individuals and families may be eligible.

**Coordination with Local Continuum of Care/Housing Coalition:** The Grantee will develop and maintain collaborative relationships within their local Continuum of Care/Housing Coalition to ensure coordination and effective service delivery for families and individuals. *All projects must also include the Continuum of Care/Housing Coalition Review Form (see Appendix C) to demonstrate evidence the project fills a need within the local Continuum of Care/Housing Coalition, addresses a gap and/or meets a priority need.*

**Coordination with McKinney-Vento Liaisons:** If the project serves school-aged children, the grantee must coordinate with local Homeless Education Liaison(s) to identify children in their districts who are eligible for homeless education program resources, maximize and coordinate these resources, and support continuity in education whenever possible.

**Homeless Participation:** To the maximum extent practicable, the grantee will involve, through employment, volunteer services, or otherwise, homeless individuals and families in maintaining and operating facilities assisted under this funding opportunity, in providing services assisted under this funding opportunity, and in providing services for occupants of facilities assisted under this funding opportunity.

**Permanent Housing & Support Services:** The grantee will assist homeless individuals in obtaining permanent housing, appropriate supportive services (including medical care, mental health and substance abuse treatment, counseling, supervision, and other services essential for achieving independent living), and other Federal, State, local, and private assistance available for such individuals.

**Reasonable Accommodations:** The grantee agrees to make reasonable accommodations in rules, policies, practices, or services when such accommodations may be necessary to afford a person with a disability equal opportunity to use housing or shelter, including public and common areas.

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Signature, Executive Director

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Date

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Printed Name

**APPENDIX G. RECORDKEEPING REQUIREMENTS**  
**Housing Opportunity Grant Program (HOP)**  
**Vermont Office of Economic Opportunity (OEO)**

HOP grantees'/subrecipient's written policies and procedures must ensure the following recordkeeping requirements are met, regardless of project type:

**A. Client File Recordkeeping**

**1. Documentation of Project Eligibility or Ineligibility Determination**

*See **Definition of Homelessness** and **Definition of At Risk of Homelessness** for specific eligibility requirements.*

Eligibility must be documented for all project participants. Records must also be kept for applicants deemed ineligible for assistance.

**2. Acceptable Documentation Provisions**

Acceptable documentation includes one of the following, listed in order of preference:

- a. third party verification, including written and source documentation, and HMIS records;
- b. intake worker observation/certification; or
- c. self-certification from person(s) seeking assistance.

Lack of third-party documentation must not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being immediately admitted to shelter or receiving services provided by a victim service provider. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations.

**3. Documentation of Termination of Assistance**

Involuntary termination of services, shelter or assistance according to project policy and procedures, including any appeal by the participant.

**4. Documentation of Services and Assistance Provided to the Participant**

Including entry and exit dates into the project (e.g., emergency shelter stays, enrollment in case management, etc.). Records kept in written files and/or HMIS or comparable management information system (as noted in grant agreement) are acceptable as long as they note when the person entered the data, date of entry, and any changes made.

## **B. Additional Recordkeeping Requirements**

- 1. Coordination with the Continuum of Care and other programs**
- 2. Compliance with Conflict of Interest Policy**, which includes all program personnel
- 3. Financial records**, which demonstrate how HOP grant funds were spent on allowable costs in accordance with grant agreements
- 4. Record Retention Policy: All records must be retained for 5 years after all funds are expended.**  
Please refer to each grant's close out letter for specific instructions regarding record retention.

## **ATTACHMENT C: STANDARD STATE PROVISIONS FOR CONTRACTS AND GRANTS**

Revised December 7, 2023

“Attachment C: Standard State Provisions for Contracts and Grants” (revision version dated December 7, 2023) constitutes part of this Agreement and is hereby incorporated by reference as if fully set forth herein and shall apply to the purchase of all goods and/or services by the State under this Agreement. A copy of this document is available online at: <https://bgs.vermont.gov/purchasing-contracting/forms>.

## **ATTACHMENT F: AGENCY OF HUMAN SERVICES' CUSTOMARY CONTRACT/GRANT PROVISIONS**

REVISED MAY 16, 2018

“Attachment F: Agency of Human Services’ Customary Contract/Grant Provisions” constitutes part of this Agreement and is hereby incorporated by reference as if fully set forth herein and shall apply to the purchase of all goods and/or services by the State under this Agreement. A copy of this document is available online at: <https://bgs.vermont.gov/purchasing-contracting/forms>