
2016 Supportive Housing Program Application Instructions

Prepared By:
Ohio Development Services Agency
Community Services Division
Office of Community Development

John R. Kasich, Governor of Ohio
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2016 Supportive Housing Program APPLICATION INSTRUCTIONS

Community Program Information

Select Community Program Information in the left hand column under **Grant Request**. Pull down the desired contact person to populate the Address, Administrator's Phone and Administrator's Email. Click **Save** to initiate the application.

Program Description

Select Program Description in the left hand column under **Grant Request** and click on the "Add Program Description" icon (+). Use the *Program Type* drop down menu to select either Permanent Supportive Housing or Transitional Housing. Use the *Grant Term (Years)* drop down menu to select number of years. Select 2 Years unless the project received a waiver to apply for a one-year grant, or instructed by OCD.

Select the appropriate county in which the Transitional Housing or Permanent Supportive Housing program is located. Click the *Insert* button to save the data entered and then click **Save**.

Please note that applicants do not enter a Program Narrative in OCEAN. All narratives will be uploaded as an attachment based on the questions in 2016 Supportive Housing Attachments.

Strategic Planning (permanent supportive housing only)

Permanent supportive housing is the key component to realizing HUD's goal of ending homelessness for chronically homeless persons. In support of that goal, answer the questions in the chart related to your program's Strategic Planning objectives pertaining to those served.

Financing Data

Applicants should enter each source of leveraged funds to be used to meet the Supportive Housing Program's match requirement of at least \$1 in local public or private resources for every two dollars in Supportive Housing Program funds. To begin adding sources of leveraged funds, click on the "Add Leveraged Fund" icon (+)

Leveraged Fund Provider Enter source of leverage funds.

Example: "Beta County United Way"

Example: "Volunteer Hours"

Example: "Shelter Plus Care"

Leveraged Fund Type: From the dropdown menu, select one of the following options: Other Federal, Other Funds, Private Funds, State and Local Funds. Please note that those options are consistent with the categories found on the Office of Community Development’s Status and Final Performance Reports.

Example: “Beta County United Way” select Other Funds

Example: “Volunteer Hours” select Private Funds

Example: “Shelter Plus Care” select Other Federal

Leveraged Fund Category:

From the dropdown menu, select one of the following options: Grant, In Kind, Cash.

Example: “Beta County United Way” select Cash

Example: “Volunteer Hours” select In Kind

Example: “Shelter Plus Care” select Grant

Click **Save** to save the application

Project Details

For the purposes of this application, a project is defined as a transitional or permanent supportive housing program listed in the Ohio Balance of State or local entitlement community’s Housing Inventory Chart (HIC) for which the agency can generate a separate HMIS report. Agencies applying for new projects not currently listed in either the Ohio Balance of State or local entitlement HIC should contact their Supportive Housing representative.

To add a project, click on the “Add Project Details” icon () then enter the requested project information. Repeat this process for each additional transitional housing and/or permanent supportive housing project.

Project Type: The “Project Type” dropdown menu defaults to Housing Unit/Building.

Project Name (35 Character Limit): The project name should be the same as listed in the Ohio Balance of State or local entitlement community’s Housing Inventory Chart.

Project Budget: Enter the total amount of Supportive Housing funds requested for the project. Do not include other sources of matching funds.

Target Population 1: Select from the dropdown menu the option that fully describes the eligible household type. For instance, a project that primarily serves single females, but occasionally serves single females with children should select Single Females and Households with Children.

Target Population 2: Using the dropdown menu, select the option that describes the project's target population or select "Not Applicable" if the project serves (on average) fewer than 75% of persons in this population.

Describe how the target population for this project addresses the goal of ending homelessness in your community:

In the text box describe the target population's barriers to independent permanent housing and how the project will help end homelessness for that population. Projects targeting specific populations not listed in the drop down menu, such as persons with substance abuse issues, must identify the target population. Permanent supportive housing projects not exclusively targeting persons with a specific disability must broadly describe the disabilities of the persons served by the project (e.g. persons with mental illness or physical disabilities). While transitional housing projects are not required to exclusively serve persons with disabilities, those programs must target persons with high barriers to permanent housing including many persons with disabilities. For those projects, please describe the characteristics of the populations served by the program which require them to enter a transitional housing program, rather moving directly to permanent housing.

Click the *Insert* button to save the data entered.

Housing Details

Select Project type from dropdown menu. Click  to complete the housing chart for each Type of Housing Unit. Scattered site permanent supportive housing projects should include the number and type of units expected to be provided at a given point in time.

If applicable, explain in the box provided why the total capacity of beds does not equal the number of beds listed in the HIC.

Click **Save** to save the data entered

TH Details Historical

Enter the date range of the HUD CoC APR that will be used to complete historical information questions. In most cases, the date range will be from 1/1/2015 – 12/31/2015). However, if your HMIS standard is for a different 12-month period, enter that date range. Enter the start date of the report in the *From* box. Based on the start date OCEAN will automatically calculate and fill in the *To* box.

In the *Goal* box, enter the applicable performance standard for Average Length of Stay and Median Length of Stay based on either the Ohio Balance of State Performance Plan or the local entitlement's community's performance plan. In the *Actual* box, enter Average Length of Stay and Median Length of Stay for Leavers from the HUD CoC APR; Question 27.

Select Project Type from dropdown. Then click  to complete the charts based on information from the HUD CoC APR for the period selected. Refer to the chart below for assistance on completing the HMIS Details charts.

Question	Source of Information	Notes
No. of Households Served	HUD CoC APR; Question 9	Enter total Households
No. of Persons Served	HUD CoC APR; Question 8	Total Persons Served During the Operating Year
No. of Adults Served	HUD CoC APR; Question 7	Enter Total number of records for Adults Only
No. of Persons Exited	HUD CoC APR; Question 7	Enter Total number of records for Leavers
No. of Adults Exited	To be determined	Enter No. of Adults Exited
No. of Persons Exited to Permanent Destinations	HUD CoC APR; Question 7	Enter Total number of records for Leavers
No. of Adults Exited with Income Growth	To be determined	Enter No. of Adults Exited with Income Growth
No. of Persons Exited with Non-Cash Benefits	HUD CoC APR; Question 26a2 1+ Sources	Enter No. of Persons Exited with Non-Cash Benefits
No. of Persons Served per Night	HUD CoC APR; Question 8	Enter Total for Average Number of Persons Served Each Night
No. of Beds in HIC	Ohio Balance of State or Entitlement Community Housing Inventory Chart	Enter total number of beds

If applicable, in the box provided please describe the reasons the average occupancy rate during the grant period was below 90%.

Click  to complete the chart. For *Continuum Goal* enter the appropriate performance standard from either the Ohio Balance of State Performance Plan or the local entitlement's community's performance plan. If the entitlement community's performance plan does include a specific performance standard, include the applicable Ohio Balance of State performance standard. For Performance Standard except for *Returns to Homelessness*, *Percentage* will calculate automatically based on previously entered data.

Performance Standard	Continuum Goal	Percentage
Exits to Permanent Destinations	Enter applicable Standard	Percentage will be calculated automatically
Receipt of Non-cash Benefits and Health Insurance	Enter applicable Standard	Percentage will be calculated automatically
Employment and Income Growth	Enter applicable Standard	Percentage will be calculated automatically
Returns to Homelessness within Six Months	Enter applicable Standard	BOS of applicants should obtain number from Recurrence Report for the period selected. Applicants from entitlement communities should consult their CoC lead agency.
Returns to Homelessness	Enter	BOS of applicants should obtain number from

within 24 Months	applicable Standard	Recurrence Report for the period selected. Applicants from entitlement communities should consult their CoC lead agency.
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If applicable, in the box provided explain the reason if the average occupancy rate is less than 90%

PSH Details Historical

Enter the date range of the HUD CoC APR that will be used to complete historical information questions. In most cases, the date range will be from 1/1/2015 – 12/31/2015). However, if your HMIS standard is for a different 12-month period, enter that date range. Enter the start date of the report in the *From* box and the end date of the report in the *To* box.

Select Project Type from dropdown. Then click  to complete the charts based on information from the HUD CoC APR for the period selected. Refer to the chart below for assistance on completing the HMIS Details charts.

Question	Source of Information	Notes
No. of Households Served	HUD CoC APR; Question 9	Enter total Households
No. of Persons Served	HUD CoC APR; Question 8	Total Persons Served During the Operating Year
No. of Adults Served	HUD CoC APR; Question 7	Enter Total number of records for Adults Only
No. of Persons Exited	HUD CoC APR; Question 7	Enter Total number of records for Leavers
No. of Adults Exited	To be determined	Enter information only if any performance standard is based on the Number of Adults Exited.
No. of Persons Exited to Permanent Destinations	HUD CoC APR; Question 7	Enter Total number of records for Leavers
No. of Adults Exited with Income Growth	To be determined	Enter No. of Adults Exited with Income Growth
No. of Persons Exited with Non-Cash Benefits	HUD CoC APR; Question 26a2 1+ Sources	Enter No. of Persons Exited with Non-Cash Benefits
No. of Persons Served per Night	HUD CoC APR; Question 8	Enter Total for Average Number of Persons Served Each Night
No. of Beds in HIC	Ohio Balance of State or Entitlement Community Housing Inventory Chart	Enter total number of beds

Average Occupancy Rate (percentage of units) will be calculated automatically based previously entered information.

Click  to complete the chart. For *Continuum Goal* enter the appropriate performance standard from either the Ohio Balance of State Performance Plan or the local entitlement's

community's performance plan. If the entitlement community's performance plan does include a specific performance standard, include the applicable Ohio Balance of State performance standard. For Performance Standard except for *Returns to Homelessness*, *Percentage* will calculate automatically based on previously entered data.

Performance Standard	Continuum Goal	Percentage
Exit to or Retention of Permanent Destination	Enter applicable Standard	Percentage will be calculated automatically
Receipt of Non-cash Benefits and Health Insurance	Enter applicable Standard	Percentage will be calculated automatically
Employment and Income Growth	Enter applicable Standard	Percentage will be calculated automatically
Returns to Homelessness within Six Months	Enter applicable Standard	BOS of applicants should obtain number from Recurrence Report for the period selected. Applicants from entitlement communities should consult their CoC lead agency.
Returns to Homelessness within 24 Months	Enter applicable Standard	BOS of applicants should obtain number from Recurrence Report for the period selected. Applicants from entitlement communities should consult their CoC lead agency.

TH Details Proposed

Select Project type then click  to complete the chart with the proposed outcomes for the period 1/1/17 through 12/31/18. If the agency is applying for a one year grant, complete the chart for the period 1/1/17 through 12/31/17.

PSH Details Proposed

Select Project type then click  to complete the chart with the proposed outcomes for the period 1/1/17 through 12/31/18. If the agency is applying for a one year grant, complete the chart for the period 1/1/17 through 12/31/17.

Activity Information

To begin adding activities, select a project from the "Project Type" dropdown menu.

Click on the "Add Activity" icon () to begin adding activities to the selected project

Activity Class: Using the dropdown menu, select the activity class (Housing or Administration) associated with the activity.

Activity Name: Using the dropdown menu, select the activity type (e.g. General Data Collection & Eval, Operating Expenses/CHDO, Rental/Housing Assistance, or Supportive Serv. w/Housing) associated with the activity.

Activity Budget: Enter the total amount of Supportive Housing Program funds requested for the activity. Do not include any other source of funding in the activity budget.

NOTE: The Activity Budget for each activity added to a Project will be tabulated and presented as an “Activity Subtotal” next to the “Project Type” dropdown menu. This subtotal should match the dollar amount in the selected project.

Short Activity Description (300 Character Limit): In the space provided, describe how the agency is proposing to expend SHP funds on the requested activity. For staff costs describe the staff positions and number of FTEs to be charged to the grant. Describe non-staff expenses including type of utilities to be charged to the grant etc.

Example (Operating): To ensure 24-hour staff, funds used to provide 1.5FTE front desk staff for the Delta PSH Program. Additional funds will be used for utilities including water, gas and electric as well as maintenance expenses.

Example (Supportive Services): Grant funds will be used for 2.5 FTE for case management costs and case manager travel expenses.

Activity Leveraging

Select an activity from the “Activity” dropdown menu and click on the “Add Leveraged Funds” icon ()

Leveraged Fund Amount: From the dropdown menu, select a leverage source previously identified under the “Financing Data” section of the application. In the space provided, specify the amount of cash or in-kind funds the selected source has committed to the activity.

Grant Request Documents

Click on the “Add Document” icon () to begin uploading attachments to the application. Use the *Attachment Type* drop down menu to select the type of document to be uploaded and click the [link to attachment template](#). The [link to attachment template](#) will provide instructions on the document to be uploaded or provide a template for a document to be completed by the applicant.

Click the *browse* button to select the requested document or completed template and click the *Upload* button to upload the selected file.

OCEAN will display validation messages for documents that are required for **all** applicants until those documents are uploaded. However, please note that documents that are required for only some applicants such as Evidence of Local Coordination – Part B do not have corresponding validation messages. Therefore, applicants are advised to review all the options from the

Attachment Type drop down menu to determine which documents are required for the individual applicant.

Grant Request Documents

Click on the “Add Document” icon () to begin uploading attachments to the application. Use the *Attachment Type* drop down menu to select the type of document to be uploaded and click the [link to attachment template](#). The [link to attachment template](#) will provide instructions on the document to be uploaded or provide a template for a document to be completed by the applicant. Once the document has been saved, you may click the browse button to select the requested document or completed template and click the Upload button to upload the selected file.

OCEAN will display validation messages for documents that are required of **all** applicants until those required documents are uploaded. **However, please note** that documents required for only some applicants such as ‘Evidence of Local Coordination – Part B’ do not have corresponding validation messages since they are not required of all applicants. Therefore, applicants are advised to review all the documents on the Attachment Type drop down menu to determine which documents are required for the individual applicant. There are several documents required that do not appear as a validation message.