NYC CoC 2023 Annual Project Evaluation
Local Priorities Survey (LPS)

Part 1: Program Overview

A. Organization Name and Contact Person

Organization Name _____

Project Application Name _____

Contract Number Identification/Grant Award Number (First 6 digits only. e.g. NY8675)
_____

Contact Name   _____

Contact Email Address for person completing the LPS _____

Contact Phone Number for person completing the LPS _____

The NYC DSS FHPR Evaluation Team will verify your project type (PH, RRH, TH, TH-RRH), contract period (projects must end by 12/31/2022), contract amount, total spend-down [up to 9 points], and quarterly spend-down [1 point].

Part 2: Program Details

1. **Does your project enroll clients eligible for SSI or SSD during the evaluation period?**
   □ Yes
   □ No

1a. **If YES, did you use the SOAR approach? [1 point]**
   □ Yes
   □ No

1b. **If NO to 1. or 1a., projects may still be awarded 1 point if any of the following statements below are true. Please make a selection:**

   □ All housed clients receive SSI or SSD, and, there were no new admissions to the project during the latest contract period, so there is no need to utilize SOAR. This can be demonstrated through documentation if requested.

□ At least one client refused to allow a Case Manager to apply for SSI or SSD on their behalf during the latest contract period. This can be demonstrated through documentation if requested.

□ Our organization previously applied for SSI or SSD on behalf of the client during or prior to the latest contract period and the application is in process without a determination being made yet. If the client is denied, we will utilize the SOAR approach to apply again. This can be demonstrated through documentation if requested.

□ Another organization that provides services to at least one of our clients has already applied for SSI or SSD on their behalf. Our case managers will continue to monitor the status of this application and will utilize SOAR to apply for SSI or SSD on a client's behalf if the client is denied benefits. This can be demonstrated through documentation if requested.

2. Which of the following additional supportive services for benefits/entitlements and/or back to work support have you used to assist your clients? Please check all that apply (1 checkmark = 1 point; 2 checkmarks = 2 points. Two points maximum regardless of # of selections). [up to 2 points]

□ SNAP Benefits

□ Public Assistance

□ Medicaid/Medicare Insurance

□ Internship opportunities

□ SUD and/or MH treatment program enrollment

□ None of the Above

□ Back to work supported employment

□ Assistance in finding volunteer opportunities

□ Job training assistance

□ Housing placement support

□ PROS and/or clubhouse program enrollment

Part 3: Policy Section

1. Board of Directors' awareness of the NYC CoC and an understanding of the importance of the role and experience of persons with lived experience (PWLE) is necessary to inform organizational and program decisions, and is a national and local priority for organizations receiving HUD McKinney-Vento funding.

Does your agency have a person with lived experience (PWLE) on its Board of Directors or another Policy-Making Body/Consumer Advisory Board/Committee? [2 points]

□ Yes
□ No

If "No," please provide an explanation

_____
_____
_____

It is also a priority for HUD and the NYC CoC to ensure that agencies are (i) Taking the participation of persons with lived experience into account as part of their decision-making; (ii) Being responsive to the inquiries and concerns of persons with lived experience; (iii) Ensuring that persons with lived experience are actively engaged in activities and initiatives.

How did your agency incorporate the perspective of PWLE into the operation of your project?

☐ Our agency conducts persons with lived experience Satisfaction Surveys at least annually. **[1 point]**

☐ Our program holds monthly Community Meetings. **[1 point]**

☐ Other. Please explain below. **[1 point dependent on response]**

_____
_____
_____

☐ Our program provides various activities and initiatives for persons with lived experience. **[1 point]**
- *Upload description/document from one activity or initiative (such as a group or event) The CoC is leaving "activity" and "Initiative" open-ended and not defining it at this time, and it can be in-person or virtual. Examples include, but are not limited to: birthday parties, holiday dinners, gift cards to eateries, picnics in the park, sessions promoting mask wearing, social distancing, vaccination.*

☐ Our agency has a Grievance Policy for clients **[1 point]**
- *Upload Grievance Policy*

☐ Does your organization employ persons with lived experience? This can include Certified Peer Specialists **[1 point]**

☐ Does your <u>project</u> employ persons with lived experience? This can include Certified Peer Specialists **[1 Bonus Point]**

2. Environmental Review

An environmental review is required for all HUD-funded projects to ensure that the proposed project does not negatively impact the surrounding environment and that the property site itself will not have an adverse environmental or health effect on end users.

Please attest to the following for the project grant**: [1 point]**

- ☐ This project is in compliance with Environmental Review standards required by HUD and verification can be provided if requested.
- ☐ I am <u>unable</u> to provide verification of compliance with HUD Environmental Review standards.

3. HUD-funded projects are required to participate in NYC's coordinated entry system (CAPS). Please certify that your organization is in compliance with the following CAPS requirements. Please check all that apply. [1 point]

- ☐ Our project completes the Coordinated Assessment Survey on behalf of clients
- ☐ Our project receives referrals from CAPS to fill units
- ☐ Unknown/Not Sure
- ☐ None of the above

4. Does your organization plan to participate in the 2023 HOPE Survey? *NYC DSS will verify your organization's participation through its registration list.* **[1 Bonus Point]**

- ☐ Yes
- ☐ No

5. The 2022 NOFO placed emphasis on CoCs to ensure racial equity.

5a. Has your project taken steps to eliminate or lessen barriers (e.g. lack of outreach, substance use, history of DV, criminal history, etc.) that lead to racial disparities and/or inequity? [Required response; Unscored]

- o Yes
- o No

If so, please specify

_____
_____
_____

5b. Has your project staff conducted or attended trainings/presentations (internal or external) on racial disparities and strategies to promote racial equity and inclusion? [Required response; Unscored]

- o Yes
- o No

If so, please specify

_____
_____
_____

5c. Have you identified any effective measures to promote racial equity? [Required response; Unscored]

- o Yes
- o No

If so, please share

_____
_____
_____

6. **The 2022 NOFO also placed emphasis on CoCs to ensure that providers are addressing the needs of Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) homeless persons.**

   6a. Has your project implemented or staff attended training on CoC-wide anti-discrimination policies that ensure LGBTQ+ individuals and families receive supportive services and housing free from discrimination? [Required response; Unscored]

   - o Yes
   - o No

   If so, please specify

   _____
   _____
   _____

7. **Throughout the past two years, as providers responded to the challenges of COVID-19, partnerships were developed with state and local public health agencies. These partnerships helped increase the safety of people**

experiencing homelessness from contracting COVID-19 and facilitated an increase in vaccination rates amongst people experiencing homelessness.

7a. Has your project built partnerships with state and local public health agencies to ensure it is prepared to prevent and respond to future infectious disease outbreaks amongst people experiencing homelessness? [Required response, Unscored]

- ○ Yes
- ○ No

If so, please specify

_____
_____
_____

8. **Please certify that your organization is in compliance with all of the following policies required by HUD and the CoC. Please mark all that apply.** [All policies required except ESSA to receive 1 point; See *NYC CoC Evaluation Policies & Procedures* for details]

- ☐ Use of a *Housing First* approach
- ☐ The Fair Housing Act, which includes an Equal Access Policy for your organization
- ☐ A gender identity LGBTQI+ Policy
- ☐ The Violence Against Women Act (VAWA) (applicable to all projects regardless of population served)
- ☐ HUD Housing Quality Standards/Inspections
- ☐ NYC CoC Written Standards
- ☐ The Every Student Succeeds Act (ESSA) (*projects not serving children are exempt*)

Part 4:	Attestation & Monitoring

Annual Evaluation Submission acknowledgements

1. By submitting this LPS, you certify that the information contained herein is true and accurate and may be included in project monitoring. You acknowledge that the LPS, and all responses within, is complete. Any false and/or inaccurate statements will result in a reduction in points for the germane question and the overall project Evaluation score for this Evaluation Period.

☐ I agree