



Homeless and Special Needs Housing Application Instructions

Housing Trust Fund - Homeless Reduction Grant

Due Date: November 1, 2021

Questions regarding program or application should be directed to:

Taylor Ryan
(804) 629-0765

taylor.ryan@dhcd.virginia.gov

CAMS-related questions should be directed to:

CAMS HELP DESK

CamsHelp@dhcd.virginia.gov



Homeless and Special Needs Housing Application

The Homeless and Special Needs Housing (HSNH) application is a community-based application for the Virginia Homeless Solutions Program (VHSP) and Housing Opportunities for Persons With AIDS (HOPWA) funding and provides the collaborative framework for the Housing Trust Fund (HTF) portion of the application.

Eligible Applicants

Eligible applicants are units of local government and non-profit organizations.

Applicants must have a registered CAMS profile in order to apply. Proposed projects that will leverage multiple partners and subcontracts are allowable. The applicant is the entity responsible for compliance. Please contact DHCD if you have any questions.

DHCD may not enter into program grant agreements with any applicant with outstanding audit findings, IRS findings, DHCD monitoring findings or other compliance issues. Please note that DHCD will work with all interested parties toward the resolution of outstanding issues, where appropriate.

DHCD must verify project partner capacity and roles when evaluating applications and project feasibility. Applicants must be able to clearly articulate the relationship between all partners involved in the service provision, development, ownership, and/or property management of a project.

Application Submission

The Housing Trust Fund (HTF) Homeless Reduction Grant applications must be submitted through DHCD's [Centralized Application and Management System](#) (CAMS). Applicants should carefully follow all instructions for submission. Applications submitted with incorrect or missing information will be reviewed as is.

An applicant organization must have a registered CAMS organizational profile in order to apply for HTF funding. Once an organization has an approved profile, individual users may be given access to CAMS by the organization's profile manager.

Applicants may submit applications at any time prior to the deadline. DHCD will only review applications submitted by the established deadline.

CAMS will send the applicant an email notification when an application has been submitted and received.

Project Information

The applicant must log into CAMS and select the Housing Trust Fund Homeless Reduction Grant Pool 2022 program, select the appropriate sub-program (HTF-HRG Rapid Rehousing, HTF-HRG Underserved Populations Innovation Projects, or HTF-HRG Permanent Supportive Housing) and click [Apply](#). When the applicant clicks on [Apply](#) the system will ask for a [Project Name](#). Please be careful to enter a project name that will help DHCD identify your project. The name of the development or the street where the project is located would be appropriate project names. Once the applicant hits [Continue](#) the project name cannot be edited. At this point CAMS will give the application a system-generated [Application ID](#) number.

HSNH: Housing Trust Fund - Homeless Reduction Grant Application Instructions

The screenshot shows the DHCD CAMS Portal interface. At the top, there's a navigation bar with 'Profile', 'Search Programs', 'Downloads', 'Apply', 'Application Status', 'View And Manage Projects', and 'User Guide'. The main content area is titled 'Apply Application' and shows a search for 'Housing Trust Fund (HTF) 2017 - Housing Trust Fund Homeless Reduction Grant'. A modal dialog box is open, displaying a warning message and input fields for 'Application ID' and 'Project Name'. The 'Application ID' field is pre-filled with '09509232016135912'. Below the dialog, there are 'Continue' and 'Cancel' buttons. The background shows the application details for the 'Housing Trust Fund Homeless Reduction Grant', including the start and end dates (9/23/2016 to 11/4/2016) and eligible organization types.

Select Continue and CAMS will take the applicant to the Project Information tab. On the project information tab the Organization Name will be pre-populated based on the organization's profile. Please note, any errors or needed updates to the organizational profile must be made by the individual who is set up as a profile manager for your organization.

On the project information tab the applicant must enter the Project Primary Contact information. This is the name of the individual DHCD should contact with questions about the project and their contact information.

Place of Primary Performance is where that project will be located and the Primary Service Area is the locality(s) that the project is intended to target.

The page will display a 'Print' option at the top right-hand corner. The 'Print' function will produce a PDF that can be printed or saved. This will have any information that you have entered and saved in the application.

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Tip: To print an application that will display all the questions simply go into the “Narrative Information” tab and enter NA into each text box. This will allow you to have a copy of the application including all the narrative questions to work from outside of CAMS.

Application Submission

Application ID: 85209242021085842 Project Name: Test [Edit?](#) Program Name: HTF-HRG Rapid Rehousing Projects
 Application Start Date: 09/24/2021 Application End Date: 11/01/2021 Status: Incomplete

Project Information | Project Budget | Narrative Information | Attachments | Additional Information

[Save This Tab](#)

Project Information
 Organization Name: Virginia Department of Housing and Community Development

Project Primary Contact

First Name*: Last Name*:
 Title*: Email*:
 Work Phone*: - -

Project Location

Address*: Zip Code*: - [What's my 4?](#)
 City*:

Primary Service Area

Please select ALL localities that will be in your project's primary service area. Only one County, City or Town must be selected to save this page. Select the Add/Edit link to make changes. Selections will display below the County, City and Town sections. When selecting a County, it is not necessary to also select a Town that lies within that county. Consult the application information for this program for additional information.

County: [Add/Edit County](#) City: [Add/Edit City](#) Town: [Add/Edit Town](#)
 No County Selected. No City Selected. No Town Selected.

Project Budget

The next tab, Project Budget, requires basic budget information that corresponds to the requested amount and project type.

Application Submission

Application ID: 85209242021085842 Project Name: Test [Edit?](#) Program Name: HTF-HRG Rapid Rehousing Projects
 Application Start Date: 09/24/2021 Application End Date: 11/01/2021 Status: Incomplete

Project Information | **Project Budget** | Narrative Information | Attachments | Additional Information

[Save This Tab](#)

Project Budget Information
 Please enter your Total Request: \$

Cost/Activity Category	DHCD Request	Other Funding	Total
<input type="checkbox"/> Rapid Re-housing Add Delete	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> Housing Search and Placement	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Housing Stabilization Case Management	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Housing Stabilization Financial Assistance	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Housing Stabilization Services	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Rent Arrears	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Rent assistance	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Service Location Costs	\$ 0.00	\$ 0.00	\$0.00
<input type="checkbox"/> Administration Add Delete	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> Administration	\$ 0.00	\$ 0.00	\$0.00
TOTAL	\$0.00	\$0.00	\$0.00

Budget Narrative:

Narrative Information

The applicant will then go to the narrative questions. There are size limits to the text boxes. DHCD suggests that applicants work in Word and copy and paste into the CAMS text boxes. Word allows an applicant to spell check and check the size of the text prior to copying and saving in the text box. Once the narrative information is complete applicants should print the questions by clicking

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the Print tab at the top of the page and review them for completeness and accuracy. The applicant is able to edit this information up until the time the application is submitted for review.

The CAMS text box in this section will only accommodate text responses. Graphics, tables, and charts will appear as text only. The applicant may use the CAMS attachment section to provide any additional information not accommodated in the narrative text boxes.

HSNH: Housing Trust Fund - Homeless Reduction Grant Application Narrative

Letter of Support - Local Coordination (All applicants)

A letter of support for this application must be provided. The letter of support must be written and signed by the Continuum of Care or Local Planning Group Board Chairperson.

Need, Approach, + Capacity (RRH Projects Only)

1. Provide a clear and detailed description of the proposed project and funding request that meets the requirements established in the HSNH-HTF-HRG program guidelines. This should include but is not limited to the activities, target population, goals, and timeline for implementation and hiring of staff (if applicable) for this project.
2. Provide quantitative data that demonstrates the community need for this project and describe how this data was used to inform the project design. If sufficient quantitative data is not available, qualitative data may be provided. If current local data and research systems do not accurately identify the need for this project, how will this project supplement or improve current data collection efforts?
3. Describe how households will access this project and engage with services. How will the project work to ensure households facing specific barriers (i.e., language, mobility, or limited personal phone or internet access) will be able to access and engage with services through this project?
4. Describe in detail how the organization implements a Housing First approach. Include specific examples such as organizational or programmatic policies, procedures, and guidelines.
5. Provide quantitative data on racial disparities within current services and program outcomes. Qualitative data may also be used to supplement the information provided. If applicable, detail how this project will address these disparities. If current local data and research systems do not accurately identify these disparities, how can this project supplement or improve data collection?
6. Describe the project's role in the local crisis response system to include how referrals are received through local coordinated entry and how the proposed project would work in conjunction with existing permanent housing resources.
7. Describe how persons with lived experience, community stakeholders, and other homeless service providers are involved in the development and implementation of this project.
8. Detail the intended outcomes of this project including the number of households that will be served with the requested funds. If the proposed project was previously funded through the Virginia Housing Trust Fund, how is this proposal continuing or building upon existing efforts?

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9. Describe how the project will implement housing stabilization services and leverage mainstream resources to ensure that households are quickly and stably moved into permanent housing.
10. Detail any current or developing strategies for transitioning households out of the project and maintain housing stability. Provide examples of partnerships with other programs or mainstream supports that would assist in this transition.
11. How is your organization uniquely positioned to serve the target population and meet the community need for this project? Include organizational experience, staff skills, and partnerships. In addition, how is your organization able to meet the requirements of this grant to include program, reporting, and financial requirements?
12. Has the agency's programs been monitored by state or federal funders? Please detail any significant issues or concerns and if funds have been returned as a result of that monitoring.
13. Detail how the proposed project will be sustained and program services will continue once this grant has ended.

Need, Approach, + Capacity (PSH Projects Only)

1. Provide a clear and detailed description of the proposed project and funding request that meets the requirements established in the HSNH-HTF-HRG program guidelines. This should include but is not limited to the activities, target population, goals, and timeline for implementation and hiring of staff (if applicable) for this project.
2. Provide quantitative data that demonstrates the community need for this project and describe how this data was used to inform the project design. If sufficient quantitative data is not available, qualitative data may be provided. If current local data and research systems do not accurately identify the need for this project, how will this project supplement or improve current data collection efforts?
3. Describe how households will access this project and engage with services. How will the project work to ensure households facing specific barriers (i.e., language, mobility, or limited personal phone or internet access) will be able to access and engage with services through this project?
4. Describe in detail how the organization implements a Housing First approach. Include specific examples such as organizational or programmatic policies, procedures, and guidelines.
5. Provide quantitative data on racial disparities within current services and program outcomes. Qualitative data may also be used to supplement the information provided. If applicable, detail how this project will address these disparities. If current local data and research systems do not accurately identify these disparities, how can this project supplement or improve data collection?

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6. Describe the project's role in the local crisis response system to include how referrals are received through local coordinated entry and how the proposed project would work in conjunction with existing permanent housing resources.
7. Describe how persons with lived experience, community stakeholders, and other homeless service providers are involved in the development and implementation of this project.
8. Detail the intended outcomes of this project including the number of households that will be served with the requested funds. If the proposed project was previously funded through the Virginia Housing Trust Fund, how is this proposal continuing or building upon existing efforts?
9. Describe how the project will implement housing stabilization services and leverage mainstream resources to ensure that households are quickly and stably moved into permanent housing.
10. Describe any current or developing strategies for transitioning households out of permanent supportive housing and into mainstream housing (ex. Move On strategies, voucher programs, etc.) Provide examples of partnerships with other programs or mainstream supports that would assist in this transition.
11. How is your organization uniquely positioned to serve the target population and meet the community need for this project? Include organizational experience, staff skills, and partnerships. In addition, how is your organization able to meet the requirements of this grant to include program, reporting, and financial requirements?
12. Has the agency's programs been monitored by state or federal funders? Please detail any significant issues or concerns and if funds have been returned as a result of that monitoring.
13. Detail how the proposed project will be sustained and program services will continue once the grant cycle has ended.

Need, Approach, + Capacity (Underserved Population Innovation Projects Only)

Underserved populations are defined by a lack of resources targeted towards providing culturally appropriate and trauma-informed services for a vulnerable population.

1. Provide a description of the underserved population this program will aim to serve and a summary of the funding request for the proposed project that meet the requirements established within the HSNH-HTF-HRG program guidelines. This should include but is not limited to the activities, target population, goals, and timeline for implementation and hiring of staff (if applicable) for this project.
2. Provide a clear description of how this application meets at least one of the core components and a description of the planning/coordinating body as stated in the HSNH-HTF-HRG guidelines.
3. Provide quantitative and qualitative data that demonstrates the community need for this project and describe how this data was or will be used to inform the project design. If

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current local data and research systems do not accurately identify this need how will this project supplement or improve current data collection efforts?

4. Describe how households will access this project and engage with services. How will the project work to ensure households facing specific barriers (i.e., language, mobility, or limited personal phone or internet access) will be able to access and engage with services through this project?
5. Identify specific barriers faced by the underserved population to obtaining and/or maintaining permanent housing through existing programs and services within the community. How will this proposed project address these barriers?
6. Describe in detail how the organization implements a Housing First approach. Include specific examples such as organizational or programmatic policies, procedures, and guidelines.
7. Describe the interaction of race and the experience of homelessness within the underserved population targeted by the proposed project. Do racial disparities exist in the incidence of homelessness, access to services, and outcomes of services? Provide quantitative and/or qualitative data in the response. How will the proposed project aim to address or reduce these disparities?
8. Describe the project's role in the local crisis response system to include how referrals are received through local coordinated entry and how the proposed project would work in conjunction with existing permanent housing resources. If planning project-only, what efforts will be made to ensure any resulting programs or services are integrated within the local crisis response system?
9. Describe how persons with lived experience, community stakeholders, and other homeless service providers are involved in the development and implementation of this project.
10. Detail the intended outcomes of this project. Include the intended outcomes of the planning effort and the number of households to be served with the requested funds (if applicable). If the proposed project was previously funded through the Virginia Housing Trust Fund, how is this proposal continuing or building upon existing efforts?
11. Detail how this project will produce a new model of service or inform best practices that can be replicated in other communities to serve the target underserved population.
12. Describe how the project will implement housing stabilization services and leverage mainstream resources to ensure that households are quickly and stably moved into permanent housing.
13. Detail how the proposed project will be sustained and program services will continue once the grant cycle has ended. Planning Projects, please detail the next steps or the process for determining the continuation of the efforts initiated by this project.
14. How is your organization uniquely positioned to serve the target population and meet the community need for this project? Include organizational experience, staff skills, and

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partnerships. In addition, how is your organization able to meet the requirements of this grant to include program, reporting, and financial requirements?

15. Has the agency’s programs been monitored by state or federal funders? Please detail any significant issues or concerns and if funds have been returned as a result of that monitoring.

Attachments

There are a number of attachments required for the Homeless Reduction Grant application. Some of these attachments require the use of a DHCD-provided template. The Certifications and Assurances is an example where the applicant will be required to download a template, complete, and upload the completed templates. All attachments are listed on the attachment tab. The attachments with required templates have a link next to the name of the attachment and instructions to download.

Some attachments do not require DHCD templates. Applicant Financials is an example of an attachment where the applicant will not be required to download and complete a DHCD template. In these cases the applicant would simply upload an electronic version of the document under the appropriate attachment.

Please see the [CAMs User Guide](#) for more detailed instructions (file types and size limits).

Required application attachments include the following:

Application Attachments	
<i>Name of Attachment</i>	<i>Requirement</i>
<u>Certifications and Assurances*</u>	DHCD template; required for all projects
<u>Applicant Financials</u>	Required for all projects – current and prior year organizational budgets to include revenue sources and expenses
<u>Letter of Support (signed by the CoC/LPG governing board chair)</u>	Required for all projects.
<u>CoC/LPG approved Homeless Services Flow Chart</u>	Required for all projects
<u>Job Descriptions</u>	Required for projects proposing staff costs
<u>MOUs</u>	If applicable
<u>Board of Directors</u>	Required for non-profit applicants
<u>Additional Attachments</u>	Optional

*DHCD required template

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Manage Downloads Program Search Apply Application Status Projects And Reports Remittances User Guide

Application Submission

Application ID: 85209242021085842 Project Name: Test [Edit?](#) Program Name: HTF-HRG Rapid Rehousing Projects
Application Start Date: 09/24/2021 Application End Date: 11/01/2021 Status: Incomplete

[Project Information](#) [Project Budget](#) [Narrative Information](#) [Attachments](#) [Additional Information](#)

[Save This Tab](#)

Please submit/upload following required documents:

Applicant Financials

Letter of Support (signed by the CoC/LPG governing board chair)

Homeless Services Flow Chart

Job Descriptions (for projects proposing staff costs)

MOUs (if applicable)

Board of Directors (required for non-profits)

Additional Attachments

Additional Attachments

Additional Attachments

Certifications and Assurances
(Click [HERE](#) for template)

Additional Information

The Additional Information tab allows the applicant to provide additional information not previously requested in the other sections of the application.

CAMS Administration x DHCD CAMS Portal x

https://dmz1.dhcd.virginia.gov/CAMSPortal/Applications/Application.aspx?App=2241

Welcome Nichele R. Carver, Profile Manager
Virginia Department of Housing and Community Development [Log Out](#)

Profile Search Programs Downloads Apply Application Status View And Manage Projects User Guide

Application Submission [Print](#)


Application ID: 39509232016135912 Project Name: DHCD Application Test [Edit?](#) Program Name: Housing Trust Fund Homeless Reduction Grant
Application Start Date: 09/23/2016 Application End Date: 11/04/2016 Status: Incomplete

[Project Information](#) [Project Budget](#) [Narrative Information](#) [Attachments](#) [Additional Information](#)

[Save This Tab](#)

Enter optional comments regarding your application in the space below:

[Contact Us](#) | [FAQ](#) | [DHCD Site](#)
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 Virginia Department of Housing and Community Development
600 East Main Street, Suite 300
Richmond, VA 23219

2:15 PM 9/23/2016

Application Status

Applicants may allow multiple users to edit and review application materials. Applicants are solely responsible for controlling security access to CAMS.

Once the applicant begins work on the application CAMS will save the application as Incomplete. The applicant may return repeatedly to CAMS to work on this application. Please be sure all work on the application is saved in CAMS. The application will remain as an incomplete application until the applicant chooses to submit the application. Once the application is submitted the status will change from Incomplete to Pending.

DHCD Review Process

Applicants with unresolved DHCD findings, audit findings, or other compliance issues will not be eligible for a funding commitment.

DHCD conducts panel reviews of all applications submitted by eligible applicants through CAMS.

Applications will be accepted on or before 11:59 PM, November 1, 2021 and ***must*** be submitted to DHCD through the online application and project management system, **CAMS** (Centralized Application and Management System). Please allow up to two business days for responses to CAMS help desk requests.

Applications received by the deadline will be reviewed against established criteria to identify those projects best positioned to meet priority needs within Virginia.

Applications must meet minimum requirements including scoring at least 60 points in order to be considered for funding. Scoring criteria are need, approach, local coordination, and capacity.

Fifteen percent of the score will be based on Part I of the Homeless and Special Needs Housing 2020-2022 application.

Applications will be reviewed and scored by a panel. Offers will be extended to those applications scoring at least 60 points based on availability of funds. Any remaining balance of funds may be allocated through a subsequent application process.

Project applications selected through the Homeless Reduction Grant application process will receive funding notification in writing. Additional information and negotiations may be required prior to grant agreement execution. Applicant awards are tentative pending an executed grant agreement. Applicants are expected to respond in a timely manner to all information requests.

Additional information may be found in the **HSNH Program Guidelines** and during the How-to-Apply webinars. Information for accessing webinars may be found on the **DHCD website**.