Grant Name:_____

Applicant Name:_____

Grant Working Group Member Name:_____

Application Scoring Criteria	Possible points	Points	Scored Points
1. Executive Summary - Provide a picture that reflects the scope / benefits of these funds for homeless.	**5**		
What is your Project's overview, including all project funding sources and in-kind (volunteer hours or services or materials)?		1	
What are your Project's quantifiable goals, including your monthly review process to ensure early modification identifiers?		1	
What is your Project's design, scope of services, and similar project history, outcomes, unit costs, and Equity in *severity groups?*		1	
How will your Project meet the grant NOFA requirements?		1	
How will your Action Plan (who, what, timetable, costs) contribute to project completion, including issues and resolutions?		1	
2. Housing First and Housing Types	**15**		
What did you learn from using your Evidence-Based Model? What did you use and what in the model was helpful?		1	
Which "best practice" elements will you use to track your performance, and how will these align with California's Housing First Policy?		2	
What activities will you complete that align with providing immediate emergency assistance for under-served populations?		2	
What is the rate of persons being housed at your facility with children? What/How are you doing toward permanent housing for this group?		2	
What/How are you doing to meet HMIS data entry time requirements? What data do you use from that system and why?		2	
What/How are you managing Coordinated Entry referrals processes and how do they help you make decisions?		2	
How will services you are providing assist participants' moves toward permanent housing?		2	
What changes will you make to improve past weaknesses and overcome barriers? What reports or research facilitated these changes, including specific improvement strategies and a monitoring plan, and what actions did you initiate to facilitate implementation?		2	
3. Equity - Population Served	**15**		
How will you define the project's efforts to promote culturally-inclusive services, including underserved Lake County populations?		3	
What are the barriers to underserved populations' participation, particularity those over-represented in the homeless population?		1	
What are your outreach action plan components that will ensure ethnic cultural communication in Lake County?		3	
What monthly tracking system will you use to evaluate and ensure all community segments are receiving service under this Grant?		2	
What are your outreach action plan strategies to serve chronically homeless groups, including current minority service gaps?		2	
What are your % target populations served, and % for each severity needs groups?		3	
Who and how is your staff bilingual or available to support major Lake County languages and cultures?		1	

LCCoC
Lake County Continuum of Care

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4. Performance Measures	20		
If you have had a similar project, what were the project's performance figures for: 1. homeless persons served & number of nights, 2. persons at imminent risk of being homeless, 3. number of recurring persons served, 4. number of unsheltered homeless persons intake rate, and 5. number of persons transitioning to permanent housing?	4		
What education life skill programs do you provide to support your clients to achieve on-going housing stability?	3		
What were the number of days new unsheltered people stayed? What number were placed in permanent housing?	3		
What was the number of homeless persons who returned to the streets? What steps are you taking to mitigate continued homelessness?	2		
What is your current quarterly report status of 2021/22 to LCCoC contract performance compliance?	3		
What is your past unit cost rate? What action with milestones for improvement are you taking to control cost?	2		
For your at-risk-of-becoming homeless clients, what is the average per-person household income?	3		
5. Budget and Cost Effective Services	**15**		
Detail the Project's funding summary time line for expenditures both capital and expenses; define other project funding sources.	2		
How did you decide the project costs in these categories: Client Services, Personnel (& outreach), Office space, Utilities, Supplies, Equipment, Mileage, etc.? How are you performing toward meeting your estimates?	3		
How did you decide funding targets for outreach to severity of needs populations (Mentally Ill, Chronic Substance Abuse, Veterans, Unaccompanied Youth, Domestic Violence) plus minorities to focus on?	2		
Does the funding plan support proposed services in a clear and measurable way? (individuals housed; days, weekly & monthly occupancy rates)	3		
If this is a service that has been provided in the past, what cost efficiency improvement changes do you plan to implement?	2		
What factors did you use to identify staffing hours anticipated for key areas of service. Include outreach - homeless, direct client service, administration and volunteer hours?	2		
How did you identify the roles and responsibilities of project staff? How many hours / days of service will this grant's funding cover?	1		
Written Score requires an 80% point minimum Total points available 70			0
6. Interview with Scoring Panel Interview Score also requires an 80% point minimum Total points available 30			
Total Score			0

You are looking for a 4 Star Quality Answer- Go Team!   LCCoC GST   12-22-21   SBAlmon (Excel)