

**City of Winston-Salem
 HUD Continuum of Care Program
 FFY2019 (FY21) New Project SCORECARD**

Please note that you can score the projects in Neighborly Software. This document is just for reference.

		Points Available
Sections A: ORGANIZATION INFORMATION		1
Section B: BASIC REQUIREMENTS-- Generally, answers to question 1-6 should be Yes and the agency should not owe money to the IRS (question 7).		2
Section C: PROJECT SUMMARY-- Is the project summary complete and does it give a concise but complete picture of the proposal?		2
Section D: ORGANIZATIONAL CAPACITY		
1	Mission—Does the project support the mission of the organization? 3 points—clearly defined connection to mission 1 point-- the project may have potential to support the mission 0 points—this project does not support the agency’s mission	3
2	Experience—Will the experience of the organization contribute to the project success? 6 points—clearly states relevant experiences and length of time 3 points--agency can do it, with training and assistance 0 points—it isn’t clear there’s a way for them to do this project successfully	6
3	Structure—Are organizational structure and human resources appropriate to support the project? a) (2 points) Clearly describes strong structure b) (2 points) Provides job descriptions if applicable c) (2 points) Organizational chart is provided.	6
4	Capacity and timing—Does the organization have the capacity and resources to start and finish the project in a timely and effective manner? 6 points—Yes 4 points—Mostly 2 points—Probably 0 point—No	6
5	Collaboration—Will collaboration contribute to project success? 6 points—Yes 4 points—Mostly 2 points—To some degree 0 points—No	6

Section E: STRATEGIC PRIORITY—Does the project help the community meet strategic objectives? (see Appendix 1 of application)		Points Available
1	<p>Need—Does the proposal establish the need and potential benefits?</p> <p>5 points—describes the population and needs clearly 4 points--describes the population and provides some information on needs 0 points—no clear statement of population or need</p>	5
2	<p>Strategies—Is the proposal consistent with the strategies listed the application?</p> <p>5 points—Yes 3 points—To some degree 0 points—No</p>	5
3	<p>Performance Measures</p> <p>5 points--Indicated 2 measures with target numbers and percentages 4 points--indicated at least one measure with target numbers or percentages 0 points—failure to list measures or target numbers or percentages</p>	5
4	<p>Performance Results</p> <p>5 points—Indicated successful performance on 2 goals 4 points—Indicated success on at least 1 goal 1 point—Described goals, but results not indicated 0-points—No clearly measured goals are indicated</p>	5
5	<p>HMIS Data</p> <p>4 points—Agency participates in HMIS (or is a domestic violence agency)</p> <p>1 point—Agency is not in HMIS and is not a domestic violence agency, but presents a plan and timeline to join HMIS</p> <p>0 points-agency does not participate in HMIS and is not a domestic violence agency and presents no plan and timeline to join HMIS</p>	4

Section F: PROJECT APPROACH AND DESIGN		Points Available
1	<p>Coordinated Intake and Assessment</p> <p>4 points—Project will participate in the Community Intake Center, including such activities as participation on the Assessment Team, completing assessments, and making and accepting referrals.</p>	4

	0 points—no participation indicated	
2	<p>Services—Are services appropriate to help participants meet the objectives of the funding program?</p> <p>a) (1 point)—describes type, frequency and duration of services, as well as a follow-up plan and all appear to be appropriate and sufficient to meet needs and to succeed on performance measures.</p> <p>b) (1 point)—describes policies and procedures to meet the rights and needs of homeless children related to education</p> <p>c) (1 point)—indicated amenities are accessible</p> <p>d) (1 point)—indicates assistance with SSI/SSDI is provided</p> <p>e) (1 point)—indicates staff has SOAR training</p> <p>f) (1 point)—table is completed</p> <p>g) (1 point)—Transportation assistance is provided.</p> <p>h) (1 point)—A single application form is used.</p> <p>i) (1 point)—Regular follow-up will be provided.</p> <p>j) (1 point)—Frequency of follow up is described.</p>	10
3	<p>Housing First—</p> <p>a) (4 points) Agency checked all or most of the boxes in the Housing First Survey</p> <p>b) (4 points) Agency checked all or most of the boxes in the Program-Specific Survey that is applicable to their program type.</p> <p>c) If the agency did not check some of the boxes in a or b, they should use this section to provide explanations for a and b.</p>	8
4	<p>Duplication—The proposed project does not duplicate services, or if services are duplicated, a reasonable justification is provided.</p>	2

Section G: COST EFFECTIVENESS		Points Available
1	<p>CoC Proposed Funds Requested</p> <p>6 points—lists all the activities and the funds requested.</p> <p>0 points—does not list all the activities or funds requested</p>	4

2	Budget is submitted.	2
2	Matching Funds—Does the project meet or exceed the 25% match requirement? 6 points—fills out all information and match is at least 25% 0 points—information missing and/or match less than 25%	6
3	Average Cost 4 points—all information is provided 0 points—all information is not provided	4
4	Sustainability 2 points—a plan is described and appears to be reasonable 0 points—a reasonable plan is not described	2

Section H: Required Documents	Points Available
Required Documents are submitted or a plan and timeline are provided to submit documents that are missing.	2

Total Possible Points = 100

Winston-Salem/Forsyth County Continuum of Care
 Local Project Application Threshold Review for Project Applicants and Subrecipients

Agency:	
Project:	

Criterion	Yes	No	N/A
Application is complete and accurate, including required attachments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Match documentation was submitted for prior year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quarterly Financial Drawdowns/Spend Rate/Funds Recaptured Reviewed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APR filed on time and e-snaps APR matches HMIS APR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No unresolved HUD Monitoring Findings on grant-funded project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has documentation of having served HUD-eligible homeless persons or families, through CoC-eligible activities during the twelve months prior to the deadline stated in the Request for Proposals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proposes an eligible activity for an eligible homeless population, pursuant to HUD requirements (including eligibility under the NOFA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is an eligible contractor for federal funds per https://www.sam.gov/ , has a current tax exempt status as verified by the IRS and does not owe any overdue tax debts, as documented on IRS 990 submissions to the IRS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does not propose to use HUD funds to supplant current funding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identified matching funds prior to application submission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has satisfactory organizational status, experience and capacity to submit, implement and operate the proposed project, as determined by the City of Winston-Salem, and has submitted all required organizational documents (see below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted authorization to apply for CoC Funding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted most recent IRS 990, as submitted to the IRS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted most recent audit report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted by-laws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted Articles of Incorporation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted IRS 501(c)3 designation letter, with status in place for at least one year prior to application deadline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted current board roster	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted copies of budgets for last year, current year and next year (if available)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted copies of Code of Conduct, Personnel Policies, Procurement Policies, and Accounting Procedures for the Organization (as applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project application was reviewed by WS/FC CoC Rating Panel members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explanation for N/A items: _____

Review completed by (print and sign name): _____

Date: _____