Metro Denver Homeless Initiative (MDHI)
Youth Homelessness Demonstration Project (YHDP)
Request for Proposals (RFP)
Issued April 29, 2024

CONTENTS

INTRODUCTION

The Continuum of Care (CoC) for the seven-county Metro Denver region, led by Metro Denver Homeless Initiative (MDHI) is accepting proposals for Youth Homeless Demonstration Project (YHDP) Funding. The YHDP, an initiative by the U.S. Department of Housing and Urban Development (HUD), aims to prevent and end youth homelessness across the United States. This is an exciting opportunity to develop innovative projects to address and meet the needs of young people experiencing homelessness in our community. Grantees will become part of a national movement, collaborating with youth and young adult leaders and agencies across the country to advance sustainable solutions to end youth homelessness.

OVERVIEW

In September 2023, Metro Denver received $2.58 million in funding to improve youth homelessness in our community. Throughout the Coordinated Community Plan process, the Young Adult Leadership Committee (YALC) led and facilitated our efforts, ensuring that the mission and vision authentically reflect the needs and aspirations of those most impacted by youth homelessness. We need programs that prioritize youth first. Together with our community, we are building a brighter tomorrow where ALL youth thrive, grounded in the principles of empathy, justice, and harmony.

We are seeking applicants who can empower and engage homeless youth by recognizing and utilizing their lived experience. Our goal is to partner with passionate individuals and organizations that will collaborate closely with young people, ensuring their voices are heard and their perspectives are valued. MDHI is looking for candidates who are committed to creating meaningful opportunities for youth to actively participate in this work, acknowledging that their insights and experiences are invaluable in the fight to end youth homelessness.

PREFERRED QUALITIES AND VALUES FOR APPLICANTS

- **Passion for Helping Young People:** Demonstrated commitment to supporting youth and young adults, especially those experiencing homelessness, with a person-centered approach.
- **Local Impact:** Must be located and operate with the Metro Denver CoC region to effectively address local needs.
- **Collaborative and Integrative Approach:** Willingness to partner with community resources for a comprehensive response to youth homelessness.
- **Trauma-Informed and Holistic Care:** Implementation of strategies that address the unique challenges of young people, emphasizing trauma-informed care, equity, and holistic support.
- **Youth Engagement, Leadership, and Continuous Learning:** Proven ability to involve youth and young adults in leadership and decision-making, with a strong commitment to ongoing training and program adjustment. Applicants should demonstrate how they have effectively used feedback from unhoused young people to continuously improve services and outcomes.
- **Specialized Expertise:** Experience or skills in substance abuse and recovery, cultural competency, and an understanding or interest in the neuroscience of adolescent behavior and risk-taking.

These qualities will guide our team in selecting applicants who are aligned with the goals of the YHDP and the specific needs of the young people we aim to serve.

SUBMISSION INSTRUCTIONS AND DEADLINE

- **Nonbinding letter of intent to apply**
  - A non-binding letter of intent to apply be submitted via email to YHDP@mdhi.org no later than 5pm MDT on Friday, May 10, 2024. Subject line of email: "YHDP LOI"
  - Include the following: a) name of organization applying, b) project component type Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Supportive Services Only (SSO), and c) approximate amount of funding to be requested.
- **Proposals**
  - Proposals must be submitted via email to YHDP@mdhi.org with the subject line "YHDP Proposal" no later than 12pm MDT on Tuesday, May 28, 2024.
  - Subject line of email: "2024 YHDP Proposal"
  - Full instructions are provided below.

SELECTION TIMELINE

RFP Released	Monday, April 29, 2024
Grantee Meeting (will be recorded)	Monday, May 6, 2024
Non-binding Letter of Intent (requested)	Friday, May 10, 2024, no later than 5:00pm MDT
RFP Submissions Due	Tuesday, May 28, 2024, no later than 12:00 (noon) MDT
Follow up questions/Budget and program adjustments (if applicable)	MDHI may request additional information from grantees as needed to make a funding decision. MDHI may ask applicants to make program or budget adjustments prior to a final funding decision. MDHI may request a site visit for top candidates based on scoring of written applications. Site visits questions/discussion are conducted by the YHDP Working Group. The working group will score the interviews to make the final decision.
Notification to Applicants of Preliminary Funding Recommendation	Week of June 3, 2024
Appeals Due to MDHI	TBD based on notification date
Notification to Applicants of Final Finding Recommendation	Week of June 10, 2024
Selected Applicants Must Submit Final Application to U.S. Department of Housing and Urban Development (HUD) via esnaps. *Note: This step will only apply if a project is recommended for funding. Additional instructions will be provided following the notification to applicants.*	Notification date to Wednesday, June 26, 2024, no later than 5:00pm MDT
YHDP Grant Agreements Executed Between YHDP Recipients and HUD	September 30, 2024

FUNDING AND PROJECT TYPES

The total amount of funds available over a two-year period is $2,500,000.

Selected projects will be eligible to apply for renewal funding via the annual Continuum of Care (CoC) Notice of Funding Opportunity (NOFO).

Project Type	Approximate Amount of Funding and Units Per Year
Supportive Service Only (Diversion and/or Access Point)	$300,000 (25 caseload spots)
Permanent Supportive Housing	$500,000 (13 units)
Rapid Rehousing	$450,000 (15 units)

Please reference the "Project List", page 12, in the Coordinated Community Plan for summary and description of each project type (Supportive Services Only – Diversion and/or Access Points, Permanent Supportive Housing, and Rapid Rehousing).

Resources

Youth Homelessness Demonstration Project (YHDP) Website

FY 2022 YHDP Round 7 Application Resources

Resources for Homeless Youth Service Providers

PROPOSALS

The following components must be included in each proposal and submitted via email to YHDP@mdhi.org with the subject line "2024 YHDP Proposal" no later than 12:00 (noon) MDT on Tuesday, May 28, 2024.

Clearly label all attachments, using the attachment number given.

Attachment Number	Description	Attached (X)
1	**Agency Contact and Threshold Worksheet (see Appendix A)**	
2	**Narrative (see instructions below and Appendix B for information on Special YHDP Activities)**	
3	**Proposed project budget (see Appendix C for budget template)**	
4	**Most recently completed organizational financial audit**	
5	**Organizational budget for current fiscal year**	

APPLICATION QUESTIONS FOR NARRATIVE

1. **Please submit your narrative in a PDF named as follows: "2024 YHDP Proposal. Organization Name. Project Name"**
2. **Label each narrative section with the corresponding number and section header**
3. **12pt Aptos, Arial, or Calibri font, single spaced, one-inch margins**
4. **Not to exceed 15 pages (narrative)**
5. **If you are applying for funding for multiple project types:**
   - Please ensure you complete a separate program budget attachment for each type.

- Include one narrative attachment but complete a distinct narrative section for 'Project Detail' and 'Housing and Services' for each project type. Clearly label each section with the project type to which it corresponds.
- If your application covers more than one project type, you are permitted to extend the narrative page limit to a maximum of 20 pages to provide sufficient detail for each project.

SUBRECIPIENT AND RECIPIENT INFORMATION AND EXPERIENCE

1. **You must identify the following information for your organization and for each subrecipient (if applicable).**
   a. **Organization Name:**
   b. **Organization Type:**
   c. **Employer Tax Identification Number (EIN):**
   d. **Organization's Data Universal Numbering System (DUNS):**
   e. **Organization's Unique Entity Identifier (UEI):**
   f. **Organization's Physical Address:**
   g. **Organization's Congressional District(s):**
   h. **Is the subrecipient a Faith-based organization:**
   i. **Has the subrecipient ever received a federal grant, either directly from a federal agency or through a state/local agency?**
   j. **Expected Subaward Amount;** and
   k. **Contact Person.** The name and contact information of the person within the subrecipient organization who has the authority to act on the organization's behalf as it relates to carrying out the actions contracted by your organization.

EXPERIENCE OF APPLICANT, SUBRECIPIENT(S) AND OTHER PARTNERS

1. **Describe your organization's (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.** Describe your organization, subrecipient(s) if applicable, and partner organizations (e.g., developers, key contractors, subcontractors, service providers) have successfully utilized federal funds in other projects. *Provide examples that illustrate experience such as:*
   a. *working with and addressing the target population(s) identified housing and supportive service needs*
   b. *developing and implementing relevant program systems, services, and/or residential property construction and rehabilitation*
   c. *identifying and securing matching funds from a variety of sources; and*

d. *managing basic organization operations including financial accounting systems*

2. **Describe your organization's (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.**

3. **Describe your organization's (and subrecipient(s) if applicable) financial management structure.** Include how your organization has a functioning accounting system that is operated in accordance with accepted accounting principles or has designated a fiscal agent that will maintain a functioning accounting system for your organization in accordance with accepted accounting principles. If your project application includes a subrecipient(s), include the subrecipient(s) fiscal control and accounting procedures to assure proper dispersal of and accounting for federal funds in accordance with the requirements of 2 CFR part 200.

4. **Are there any unresolved HUD monitoring or OIG audit findings for any HUD grants (including ESG) under your organization? Required***. Select:*
   - ❑ **Yes,** your organization has unresolved HUD Monitoring **or** OIG Audit findings
   - ❑ **No,** there are no unresolved HUD Monitoring **or** OIG Audit findings. The HUD monitoring or OIG audit findings are not limited to just CoC Program funds, but to any funds that are in use from other HUD programs, (e.g., HOPWA, ESG).

   4a. **Describe the unresolved monitoring or audit findings.** If "**Yes**" was selected for question

   4b. **Provide a detailed explanation** as to why the monitoring or audit finding(s) remain unresolved and the steps that have or will be taken towards resolution (e.g., responded to the HUD letter, but no final determination received).

5. **Describe the experience of the applicant and potential subrecipients (if any) in providing housing and services to Black, Indigenous, People of Color (BIPOC) experiencing homelessness?**

PROJECT DETAIL

1. **Project Name:**
2. **Component Type:**
   - ❑ Permanent Housing-Permanent Supportive Housing (PH-PSH)
   - ❑ Permanent Housing-Rapid Rehousing (PH-RRH)
   - ❑ Supportive Services Only (SSO) *(If applying for SSO please indicate if you are applying to support)***:**
     - o Diversion
     - o Access Points
     - o Both Diversion AND Access Points

3. **Only youth 18-24 are eligible to be served with this funding. In addition, does your project serve any other specific subpopulations?**

4. **Please provide a brief overview of your proposed project (up to 500 words).**

5. **Provide a description that addresses how this project will follow Positive Youth Development (PYD).**
   a. **Please describe in detail how your organization will adhere to the principles of Trauma-Informed Care.** This should include how you plan to integrate trauma-informed training for all staff members, ensuring that each member is not only trained but also capable of applying the principles of trauma-informed care in all aspects of their work. **Note:** *Trauma Informed Care (TIC) Model. An approach that recognizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system, responds by fully integrating knowledge about trauma into policies, procedures, and practices and seeks to actively resist re-traumatization. TIC models generally include a focus on the following: Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment; Voice and Choice; and Cultural, Historical, and Gender Issues.*
   b. **How does this project help the community meet the shared vision, goals, and objectives of the Coordinated Community Plan (CCP)?**
   c. **Describe how this project will ensure that all participants (including BIPOC, LGBTQIA+, etc.) have equitable outcomes in the project and how the project will monitor these outcomes.**

6. **For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur.** You must enter information in at least one field on the table. If your project includes multiple structures, you will complete one column for each structure. You will estimate the number of days from grant execution for the first four questions, as applicable, for the requested project application.

   Nonapplicable fields can remain blank, or you can enter "**0**" or "**NA**".

   Note: *To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award. The one exception is PH-PSH projects with sponsor-based and project-based rental assistance. These conditional award recipients will have 24 months (2 years) to execute a grant agreement; however, HUD encourages all recipients to begin assistance within 12 months. The estimated schedule should reflect these statutorily required deadlines.*

Note: *Please copy and paste the table below with your responses into your proposal narrative.*

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	**B**	**C**	**D**
New project staff hired, or other project expenses begin?				
Participant enrollment in project begins?				
Participants begin to occupy leased or rental assistance units or structure(s), and supportive services begin?				
Leased or rental assistance units or structure, and supportive services near 100% capacity?				

7. **Will your project participate in the CoC's Coordinated Entry (CE) Process <u>or</u> recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements?** Participation in a CE process is a requirement for all applicants for YHDP funds.
   - ❑ **Yes**, *if this project will participate in the CoC's CE process or applicant organization is a victim service provider and uses an alternate CE process that meets HUD's minimum requirements.*
   - ❑ **No,** *if this project will not meet these criteria.*

8. **Housing First.** *Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as, sobriety or a minimum income threshold). This approach quickly connects individuals and families experiencing homelessness to permanent housing:*
   - *no barriers to entry (e.g., sobriety, treatment, or service participation requirements);*
   - *no preconditions (e.g., sobriety, income); and*
   - *does not terminate program participants from the project for lack of participation in the program (e.g., supportive service participation requirements or rules beyond normal tenancy rules).*

Supportive services are voluntary but are offered to maximize housing stability and prevent returns to homelessness. The questions in this section help identify whether your project operates consistent with a Housing First approach.

8a. Will the project quickly move participants into permanent housing?

- ❑ **Yes,** *if your project will rapidly move program participants into permanent housing and will not require additional steps (e.g., a required stay in transitional housing or a certain number of days of sobriety). If this is a Domestic Violence (DV) project application including survivors of human trafficking, sexual assault, stalking, and dating violence, select* ***"Yes",*** *if the project will rapidly move program participants into permanent housing after their immediate safety needs have been addressed (e.g., survivor(s) believe they are still in danger and not ready to move into their own permanent housing).*
- ❑ **No,** *if the project does not remove all barriers to move program participants quickly into permanent housing or requires additional steps prior to helping a program participant obtain permanent housing.*

8b. Will the project enroll program participants who have the following barriers? Select all that apply. Required. Checking the box next to each item listed confirms your project does not have the listed barriers for entering the project at the time of completing this application. If these barriers exist at the time of application, select "**None of the above**."
- ❑ Having too little or little income
- ❑ Active or history of substance use
- ❑ Having a criminal record with exceptions for state-mandated restrictions
- ❑ History of victimization (e.g. domestic violence, sexual assault, childhood abuse)
- ❑ None of the above

8c. Will the project prevent program participant termination for the following reasons? Select all that apply. Required. Checking the box next to each item listed confirms your project does not terminate program participants for the reasons listed at the time of completing this project application. If a program participant can be terminated from the project for any of these reasons at the time of application, select "**None of the above**."
- ❑ Failure to participate in supportive services
- ❑ Failure to make progress on a service plan

- ❑ Loss of income or failure to improve income
- ❑ Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area
- ❑ None of the above

9. **How will you work to remove barriers such as landlord's unwillingness to accept CoC assistance or provide housing to people experiencing homelessness? If project uses RRH units, additionally describe your landlord engagement to ensure there are RRH units available for persons enrolled in your project.**

10. **Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation?** *Required. Select:*
    - ❑ **Yes,** *if any portion of the project will be site-based or require program participants to live in a specific locality, city, or specific area.*
    - ❑ **No,** *program participants will not be required to live in a specific locality, city, or area.*

    10a. **If yes, explain how and why the project will implement this requirement.** *Describe why the project applicant has chosen to implement this program design for your project program participants. For example, if a project applicant owns a building to provide PSH for program participants or program participants will be required to meet with a case manager at least monthly in their first year of the project and the case managers offices are in the identified locality. For project applicants requesting TRA, it is particularly important to explain why implementing this requirement is necessary for facilitating the provision of supportive services.*

11. **Will more than 16 people live in one structure? ("Yes" or "No") If yes, describe the location and the reason for utilizing a single location.**

EFFECTIVELY SERVING YOUTH POPULATIONS

1. **Can the organization provide evidence of data/research regarding youth homelessness, including insights into best practices, statistics, and policy barriers?**

    1a. Describe the racial composition of the persons or households expected to benefit from your proposed grant activities, including how you analyzed the local population to determine this. *Provide a detailed description of who this project will be serving.*

    1b. Identify any potential barriers to persons or communities of color equitably benefiting from your proposed grant activities. *Provide a detailed description of any potential barriers to communities of color.*

    1c. Detail the steps you will take to prevent, reduce, or eliminate these barriers.

Provide a detailed description of how this project will prevent, reduce, or eliminate barriers.

1d. Describe the measures in place to track progress and evaluate the effectiveness of efforts to advance racial equity through the grant activities. *Provide a detailed description of how this project will track progress.*

YOUTH DEMO PROJECTS

1. **Does this project carry out housing problem solving activities to divert or rapidly exit households from homelessness?? Required for YHDP projects.**
   - ❑ **Yes,** this project carries out housing problem-solving activities or diverts households to rapidly exit homelessness.
   - ❑ **No,** this project does not carry out any of those activities.

   1a. Describe the intervention strategy to engage families and how community partnerships such as child welfare agencies, schools, youth providers, and other community service and homeless providers are incorporated into the intervention strategy? Required if "Yes" to question 1 above.

   1b. What services are provided to engage the family and youth? Required if "Yes" to question 1 above, select one or more of the available options. If a focus for your project is not listed, check the box next to "Other" and enter in the text box provided.

   - ❑ Assessment of Service Needs
   - ❑ Assistance with Moving Costs
   - ❑ Case Management
   - ❑ Childcare
   - ❑ Education Services
   - ❑ Employment Assistance and Job Training
   - ❑ Food
   - ❑ Housing Search and Counseling Services
   - ❑ Legal Services
   - ❑ Life Skills Training
   - ❑ Mental Health Services
   - ❑ Outpatient Health Services
   - ❑ Outreach Services
   - ❑ Substance Abuse Treatment Services
   - ❑ Transportation
   - ❑ Utility Deposits

❑ Other:

2. **How will this project continue to involve the CoC's Youth Action Board (YAB), known as the Young Adult Leadership Committee (YALC), in the development and implementation of YHDP projects?**
3. **Will your project offer any specialized services for youth living with HIV/AIDS, and if yes, describe?**

SPECIAL YHDP ACTIVITIES (unscored section—information only)

Please review Appendix B and indicate if you would like to explore special activities with MDHI and indicate which activities you are interested in below.

HOUSING AND SERVICES

Supportive Services for Participants

1. **Describe how program participants will be assisted to obtain and remain in permanent housing.** For projects that include housing as a component (even if housing is not provided using YHDP funds): An acceptable response will acknowledge the needs of the target population and include a plan that addresses the types of assistance that will be provided by the project applicant, or other partners, to ensure program participants served by this project will move into appropriate permanent housing as well as either remain in or move to other permanent housing once assistance is no longer needed. Additionally, if you coordinate with other partners, include their role in meeting this criterion. The description should include:
   - *how you will determine the right type of housing that fit the needs of program participants*
   - *if you will use rental assistance or leasing assistance, how you will work with landlords to address possible issues and challenges.*
   - *the type of assistance and support you will provide to program participants to overcome challenges to permanent housing (e.g., case management; housing counseling, employment resources); and*
   - *how you will work with program participants to set goals towards successful retention of permanent housing.*

Finally, if this project will exclusively assist victims of domestic violence, the description must include safety planning addressing the needs of this particular homeless population towards meeting the goal of obtaining and maintaining permanent housing. If applying for a Diversion or Access Points project, describe how participants will be assisted to

quickly exit homelessness by obtaining or retaining housing.

2. **Describe specific efforts to ensure BIPOC, LGBTQIA+, and people with disabilities experiencing homelessness will be connected to housing of their choice and supported in housing after the assistance has expired.**

3. **Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible. Describe how this project will help program participants obtain the benefits for which they are eligible. Additionally, if you choose to coordinate with other partners, include their role in meeting this criterion. The description should include:**

    - *Assisting program participants with obtaining and increasing employment income that will lead to successful exits from homelessness (e.g., local employment programs, job training opportunities, educational opportunities).*
    - *The type of mainstream services you will assist program participants with obtaining to increase non-employment income (e.g., SSI; SSDI; Food Stamps, Veterans benefits).*
    - *The type of social services you will provide access and help program participants obtain (e.g., childcare, food assistance, TANF, early childhood education).*
    - *Access to healthcare benefits and resources (e.g., Medicaid, Medicare, healthcare for the homeless, FQHCs).*
    - *Address how youth will be assisted to obtain education and life skills training.*

Refer to "Youth Demo Projects" section checklist to answer the following questions:

1. **Describe all supportive services available to participants, indicate who will provide them and how often they will be provided.**

2. **Describe how the project will allow youth the ability to choose providers and interventions that fit their needs?**

3. **Describe how the project will respond to the unique needs for service type, intensity, and length of support for youth?**

4. **Identify whether the project includes the following activities (indicate "yes" or "no" for each):**

    a) **Transportation assistance to program participants to attend mainstream benefit appointments, employment training, or jobs?**
        - ❑ Yes
        - ❑ No

    b) **Transportation assistance to clients to attend Youth Action Board (YAB) meetings and other community events?**

- ❑ Yes
- ❑ No

c) **Annual follow-up with program participants to ensure mainstream benefits are received and renewed?**
- ❑ Yes
- ❑ No

d) **Will program participants have access to SSI/SSDI technical assistance provided by this project, subrecipient, or partner agency?**
- ❑ Yes
- ❑ No

e) **Has the staff person providing the technical assistance completed SOAR training in the past 24 months?**
- ❑ Yes
- ❑ No