COUNTY OF LEXINGTON

EMERGENCY SOLUTIONS GRANT - CV

APPLICATION

2020-2021 PROGRAM YEAR

EQUAL HOUSING OPPORTUNITY

FUNDING INFORMATION

On April 3, 2020, Lexington County received notification from the United States Department of Housing and Urban Development (HUD) that special Emergency Solutions Grants (ESG) Program funds in the amount of $542,375, as authorized by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) were being allocated to Lexington County. These ESG-CV funds are to be used to **prevent, prepare for, and respond to the coronavirus pandemic (COVID-19**) among individuals and families who are homeless or receiving homeless assistance; and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19. \

All selected programs/projects are subject to the availability of funding and the County of Lexington's review process.

The County of Lexington maintains the right to reject or accept proposals, to fund or not to fund, or to reduce the amount of funding requested.

All proposed programs/projects must meet applicable federal regulations.

Organizations should not incur any costs, perform any work, purchase any goods or services, nor make any commitments or sign any contracts with any person, organization, or company related to the project for which ESG-CV-CV funds are being requested until the funds have been released from HUD, the Environmental Review has been completed, and an agreement has been executed by the County of Lexington.

Eligible ESG-CV Program Costs for Infectious Disease Preparedness

March 5, 2020

Individuals experiencing homelessness are at greater risk of exposure to a variety of infectious diseases including influenza and coronavirus. Taking effective sanitation measures can reduce the spread of infectious disease for people who are unsheltered or living in emergency shelters. ESG-CV Program recipients may use ESG-CV Street Outreach and Emergency Shelter funds for essential supplies and services to reduce the spread of infectious disease in their programs.

Examples of Eligible Activities to Support Coronavirus and Infectious Disease Preparedness

Emergency Shelter – Shelter Operations: Maintaining a sanitary shelter environment will help to keep staff and participants healthy. Listed below are supplies and equipment that are eligible Shelter Operations costs.	
Supplies	Cleaning supplies such as bleach, disinfectant wipes, scrubbers, mops
	Protective equipment such as masks, disposable gloves
	Program participant needs such as bed linens, towels, hand sanitizer, soap, tissue packets
Furnishings	Cots, room dividers
Equipment	Washers, dryers, portable handwashing stations
Transportation	Train or bus tokens, taxi or rideshare for program participant travel to and from medical care
Street Outreach	
Engagement – Urgent physical needs	Hand sanitizer, soap, tissue packets, masks
Engagement - Equipping staff	Masks, disposable gloves, hand sanitizer, other personal protective equipment
Case management – Referrals	Coordinating medical care
Transportation	Train or bus tokens, taxi or rideshare for program participant travel to and from medical care
Expanded Staffing	
Hiring additional staff to support infectious disease preparedness. *Note: Be sure to provide staff with training about precautions they can take to stay healthy, stop the spread of germs, and to stay home if they are feeling sick.*	

INELIGIBLE ACTIVITIES

ESG-CV

- acquisition, construction or reconstruction of buildings for the general conduct of government
- political activities
- certain income payment
- construction of new housing

ELIGIBLE APPLICANTS

- Must serve the County of Lexington
- Non-profit organizations with IRS 501(c)(3) or 501(c)(6) status
- Faith based organizations (non-religious purposes)

APPLICATION CALENDAR (approximate):

June 15, 2020	ESG-CV Grant Applications available Lexington County Community Development Department
July 1, 2020	Deadline for applications: at 5:00 p.m. (maybe extended)
Week of July 6, 2020	Staff review of applications
July 10, 2020	Virtual Public Hearing , 2:00 pm
July 27, 2020	Preliminary Award Notification to Participants
Week of July 27, 2020	Final approved document submitted to HUD for approval

APPLICATION INSTRUCTIONS

The County of Lexington solicits applications from organizations requesting funds to carry out Consolidated Plan projects. The attached application is required if your organization is requesting funding from the Emergency Solutions Grant Covid-19 Program for the period July 1, 2020 through June 30, 2022.

Only one copy of the application is required. This copy should be on 8 ½ x 11" white paper and clipped in the upper left hand corner. *Do not staple pages*. An **ORIGINAL** signature is required. The completed application and all supporting material should be sent to:

County of Lexington
201 S. Lake Drive, Suite 401
Lexington, South Carolina,
29072

Available Funding

Funding from the Emergency Solutions Grants Program Covid-19 is very limited. Federal funding for Year 2020-2021 is in the amount of $542,375.

Review Process

Applications will be reviewed by Lexington County Grants. Staff may have additional questions and may want to interview a representative of your organization before making a recommendation on funding.

Applicants are advised that funds cannot be committed until after HUD has approved the 2020-2024 Consolidated Plan. Once the applications are received and Preliminary Award Notifications are sent to the participants, a substantial Amendment to the Consolidated Plan will be completed and submitted to HUD for final approval.

Evaluation Criteria

The following is the basis that will be used for the 2020-21 Plan Year for recommending applications for funding under the Emergency Shelter Grants Covid-19 Program.

Applicant capacity

The application must demonstrate that the agency staff has adequate credentials and experience to carry out the proposed project. This means that the organization carrying out the project, its employees, or its partners, must have the necessary experience and qualifications to carry out the specific activities proposed.

Factors to be considered will include: prior agency experience and results in the type of work being proposed; suitable agency fiscal capacity and organizational infrastructure to implement the project; and employee experience and credentials in the area to be implemented.

Project quality

The proposed services/project must be appropriate to the needs of the persons to be served. The application must demonstrate a clear understanding of the needs of the clients, the services to be offered (if any), and the effectiveness of the services in meeting those client needs.

In addition, a project may be considered to be of good quality if:

1. The type and scale of housing, shelter and/or services proposed clearly fit the needs of the proposed participants.
2. The project is cost-effective and all costs are reasonable, and do not deviate substantially from the norm in Lexington.
3. The application shows evidence of collaboration with other existing programs and services; letters evidencing collaboration may be attached.
4. If applicable, the building proposed for use meets local codes, health, or safety standards.

Need for Project

It must describe the need for the specific project via existing services or resources. The project may be judged to adequately describe the need if it addresses the following points:

1. The need for the project is documented by use of waiting lists, references to similar programs, etc.
2. The project is consistent with the priorities described in The County of Lexington's five-year Consolidated Plan;
3. The project does not unnecessarily duplicate existing programs and services for the same clients.

Operational Feasibility

The application must include:

1. Clear and complete plans for implementing and completing the project;
2. Adequate committed funding to implement the project. Include letters of commitment.
3. An adequate strategy for securing additional support and commitment;
4. Adequate number of qualified staff to carry out the proposed project;
5. Indicators that demonstrate that the project is ready to be implemented;

You may direct questions about the application to Sandy Fox, Grants Administrator, at (803) 785-8523 or sfox@lex-co.com.

County of Lexington
ESG-CV Program
Application for Assistance
2020-2021 Program Year

Emergency Solutions Grant Program Application
July 1, 2020 through June 30, 2021

1. Project Information

Project Title: _____

Project Address:_____Zip: _____

Project Census Tract(s):_____

2. Applicant Information

Legal Name of Agency Requesting Funding: _____

Mailing Address of Agency:_____Zip: _____

Year incorporated:_____ **501c(3)? Yes**____ **No** _____ **Other**_____

Taxpayer Identification Number:_____ **DUNS Number:** _____

Registered with SC Secretary of State? ☐

Major Sources of Agency Funding: _____

_____

3. Project Contact Person (This is who will correspond with the Grants Administrator)

Name:_____ **Title:** _____

Phone:_____ **Email:** _____

4. Agency's Authorized Signee and Signature (This is the person who has legal authority to sign the application such as the President of the organization.)

Name:_____**Title:** _____

Phone:_____**Email:** _____

Signature_____**Date** _____

5. **Amount of Funds Requested** (*Please round numbers to the nearest dollar*)

6. **Timeline**

Projected Starting Date:_____Expected Date of Completion: _____

7. **Population Served –** Select which population your project will be serving.

☐ Men ☐ Women ☐ Families ☐ Youth (under 25) ☐ Children

8. **Emergency Shelter Facilities** Not Applicable

Shelter Address:_____

Maximum Bed Capacity per night:_____ Average Length of Stay: _____

Annually, how many individuals do you expect to serve in the Emergency Shelter using ESG-CV funds? ___

9. **Transitional Housing** ☐ Not Applicable

Shelter Address:_____

Total Number of Units:_____ Average Length of Stay: _____

Annually, how many individuals do you expect to serve in the Transitional Housing using ESG-CV funds? _____

10. **Homelessness Prevention** ☐ Not Applicable

Annually, how many individuals do you expect to serve with ESG-CV Homelessness Prevention Funds? ___

11. **Rapid Re-Housing Programs** ☐ Not Applicable

Annually, how many individuals do you expect to serve with ESG-CV Rapid Re-Housing Funds? _____

12. Eligible Project Activities - Check the eligible activity(ies) to be undertaken by this project:

- ☐ **Street Outreach Component —**ESG-CV funds may be used for costs of providing essential services necessary to reach out to unsheltered homeless people; connect them with emergency shelter, housing, or critical services; and provide urgent, non-facility-based care to unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility.
- ☐ **Emergency Shelter Component—**ESG-CV funds may be used for costs of providing essential services to homeless families and individuals in emergency shelters, renovating buildings to be used as emergency shelter for homeless families and individuals, and operating emergency shelters.
- ☐ **Homelessness Prevention Component--** ESG-CV funds may be used to provide housing relocation and stabilization services and short- and/or medium-term rental assistance necessary to prevent an individual or family from moving into an emergency shelter or another place
- ☐ **Rapid Re-Housing Assistance Component--**ESG-CV funds may be used to provide housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.
- ☐ **HMIS Component**-- ESG-CV funds may be used to pay the costs of contributing data to the HMIS designated by the Continuum of Care for the area. **All applicants for ESG-CV funds must be licensed and correctly inputting client data into the HMIS system.**

13. Services – Describe the essential services that will be offered if this application is funded.

14. **Need and Relationship to the five-year strategic plan** - Describe how your agency determined the local needs your program will address. Include local data substantiating your decision to serve the population you are serving

Examples of priorities include: Youth Services, Homelessness Prevention, Rapid Re-Housing, etc.

15. Target Population - Describe the client target population for the project.

Provide a brief history of your agency's experience in serving this target population.

Target Population – continued. Explain how you will identify/admit clients and how you will document their eligibility.

What will your project accomplish to address the needs of homeless persons in your community?

16. **Capacity and Experience -** Using the chart below, please name all other grant and/or housing programs your agency has successfully implemented within the past three years, and identify the number of times your agency has received that type of funding during that time.

Activity	Funding Source	# of Allocations in past 3 years	Type(s) of Funding (identify program name and avoid using just acronyms when possible)
Shelter Operations			
Rental Assistance			
Case Management/ Services			
HMIS			
Other:			

Please complete this table to identify all staff at your agency who will be involved with your ESG-CV program for which you are requesting ESG-CV funds.

Position	Name(s)	Start date with agency (mo/year)	**List Federal housing programs name** - administered in last 2 years – even if administered at a different agency
Exec. Dir./CEO			
Program Manager or Other Key Leadership Position			
ESG-CV Program Finance Staff			
Case Manager or Other Key Program Staff Position			
Lead HMIS or Data Collection Staff			

Please complete the following table.

Experience and Capacity	Response	Explanation
Has your organization or one of its staff persons administered one or more federally funded programs in the last 3 years?		
Has there been staff turnover or reorganization that has negatively or positively impacted your capacity?		
Does your organization have effective procedures and controls for program/project management?		
Have your audits identified any issues in the last 3 years?		
If previously funded by the County of Lexington, have you been timely in your response to requests for documentation?		
Does your organization have a system in place to accurately track receipts, expenditures, and budgets? Please note that applicants must have capacity on their own without the use of a fiscal agent.		

17. **Previously Funded** – If you have previously received federal funding from the County of Lexington, please describe the status of your most recently funded project and whether or not you have expended all of your funding.

18. **Sustainability -** Describe budgetary plans for future needs (three years). Describe your operating plan if ESG-CV funds are not available. Please list your efforts to secure other funds. If this project is approved for funding, only one year of funding can be guaranteed.

19. **Collaboration with Other Agencies -** Describe your agency's relationship and collaborative partnerships with other community partners. You **may** attach letters. Label them as **Attachment 7 – Collaboration Letters.**

20. Project Budget

Essential Services (in shelters)	ESG-CV Request	Total
Case Management		0
Other		0
SUBTOTALS	0	0
Shelter Operations	**ESG-CV Request**	**Total**
Maintenance		0
Rent		0
Security		0
Equipment (greater than $1,000)		0
Insurance		0
Utilities		0
Food		0
Supplies		0
SUBTOTALS	0	0
Housing Relocation & Stabilization Services	**ESG-CV Request**	**Total**
Security Deposits		0
Utility Deposits		0
Utility Payments		0
Case Management		0
Utility Arrears		0
Other (explain)		0
SUBTOTALS	0	0
Medium-Term Rental Assistance	**ESG-CV Request**	**Total**
Medium-Term Rental Assistance		0
Payment of Rental Arrears		0
SUBTOTALS	0	0
HMIS	**ESG-CV Request**	**Total**
HMIS Participation Fees		0
SUBTOTALS	0	0
TOTAL:	0	0

Budget Narrative – Please itemize costs for each category indicated on the budget.

- For personnel costs, indicate the position title (s), the name of the staff member(s), hourly wage, and number of hours per week on the proposed activity. For Fringe Benefits, identify all benefits and how they were calculated.
- Supplies and Equipment should be itemized and need should be justified.
- Itemize and justify all travel.
- If proposing renovation activities (including rehabilitation or conversion), describe the renovations to be completed and the rationale for undertaking these activities at this time. For example, if you are proposing to replace a roof, identify the age and condition of the current roof.)
- Explain anything included in "other."
- Attach pages as necessary and **Label as Attachment 8 – Budget Narrative**.

21. Source of Other Funds

To complete the chart, list all sources of project funds below. Indicate whether they are firmly committed or tentative. All non-ESG-CV project funds require written verification submitted with the proposal. Unverified sources will not be counted as committed.

The total ESG-CV funds and non-ESG-CV funds must be adequate, as determined by Lexington County staff to complete the project. Projects that are financially infeasible will not be considered for funding. Attach the letters of financial commitment to the proposal and label as **Attachment 7 - Commitment Letters.**

Source	Cash Resources	In-Kind Contribution	Status of Commitments	Date Available
TOTAL	$ 0	$ 0		

Emergency Solutions Grants Program funds represent_____% of the total project

Provide explanation of tentative commitments. EXAMPLE: You have made application for additional funds from an additional source, but have not been informed of approval of funds.

ESG-CV APPLICATION CHECKLIST

The following items must be included in this application for funding unless noted otherwise.

ITEM	ATTACHED	NOT APPLICABLE
Attachment 1: Organization's most recent financial audit	☐	☐
Attachment 2: Articles of Incorporation & Bylaws	☐	☐
Attachment 3: South Carolina Secretary of State - proof of current active status	☐	☐
Attachment 4: IRS 501c (3) letter	☐	☐
Attachment 5: Organizational Chart and List of Board of Directors	☐	☐
Attachment 6: Budget Narrative, if applicable	☐	☐
Attachment 7: Commitment Letters or Reference Letters	☐	☐
Other:	☐	☐