

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$219,797

Organization	Type	Type	Sub-Award Amount
YWCA of Western Massachusetts	M. Nonprofit with 501C3 IRS Status		\$167,150
Womanshelter Companeras Inc.	M. Nonprofit with 501C3 IRS Status		\$52,647

2A. Project Subrecipients Detail

a. Organization Name: YWCA of Western Massachusetts

b. Organization Type: M. Nonprofit with 501C3 IRS Status

c. Employer or Tax Identification Number: 04-2103858

	* d. Organizational DUNS:	066994534	PLUS 4	0000
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e. Physical Address

Street 1: One Clough Street

Street 2:

City: Springfield

State: Massachusetts

Zip Code: 01118

f. Congressional District(s): MA-001
(for multiple selections hold CTRL key)

g. Is the subrecipient a Faith-Based Organization? No

h. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? Yes

i. Expected Sub-Award Amount: \$167,150

j. Contact Person

Prefix: Ms.

First Name: Elizabeth

Middle Name: G

Last Name: Dineen

Suffix: J.D.
Title: Executive Director
E-mail Address: Idineen@ywworks.org
Confirm E-mail Address: Idineen@ywworks.org
Phone Number: 413-732-3121
Extension: 101
Fax Number: 413-747-0542

2A. Project Subrecipients Detail

a. Organization Name: Womanshelter Companeras Inc.

b. Organization Type: M. Nonprofit with 501C3 IRS Status

c. Employer or Tax Identification Number: 04-2716766

	* d. Organizational DUNS:	198837916	PLUS 4	
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e. Physical Address

Street 1: 208 Race St.

Street 2:

City: Holyoke

State: Massachusetts

Zip Code: 01040

f. Congressional District(s): MA-001
(for multiple selections hold CTRL key)

g. Is the subrecipient a Faith-Based Organization? No

h. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? Yes

i. Expected Sub-Award Amount: \$52,647

j. Contact Person

Prefix: Ms.

First Name: Karen

Middle Name:

Last Name: Blanchard

Suffix:

Title: Development Director

E-mail Address: kblanchard@womanshelter.org

Confirm E-mail Address: kblanchard@womanshelter.org

Phone Number: 413-538-9717

Extension: 170

Fax Number: 413-538-9411

3A. Project Detail

1. Project Identification Number (PIN) of expiring grant: MA0628

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2a. CoC Number and Name: MA-504 - Springfield/Hampden County CoC

2b. CoC Collaborative Applicant Name: City of Springfield MA

3. Project Name: DV Coordinated Entry

4. Project Status: Standard

5. Component Type: SSO

6. Does this project use one or more properties that have been conveyed through the Title V process? No

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

The City of Springfield will coordinate the work of the YWCA and Womanshelter/Companeras to operate a coordinated entry system that is designed specifically to meet the needs of domestic violence survivors. The project will incorporate a 24-hour-a-day bilingual helpline and coordinated entry staff who will respond to survivors seeking assistance, providing safety and housing planning together from the first contact, and working to quickly connect survivors experiencing homelessness with housing resources.

Helpline staff will screen all calls for diversion or prevention, vulnerability, and program eligibility, assisting callers in crisis to access emergency shelter, a plan for short-term relief until shelter is available, or diversion or rapid rehousing as is appropriate and safe. Helpline staff will facilitate connections to CoC and mainstream resources and safety-plan with each caller to minimize the risk of domestic violence, substance use, suicidality, or other threats to physical or emotional safety.

The Helpline will be available to dispatch trauma-informed on-call Outreach Workers to domestic violence survivors reporting homelessness or the intent to flee their abuser to street outreach workers or first responders at area hospitals, community health centers, police stations, or courthouses in the immediate aftermath of a domestic violence incident. Outreach Workers will be available to engage survivors in person, spend more time on the coordinated entry assessment, observe the survivor for nonverbal signs of misunderstanding or concern, and better build trust with survivors who may be experiencing too much anxiety, stress, or fear to effectively utilize a telephonic helpline.

Once the helpline or Outreach Worker has identified resources--including housing resources--with the survivor, the survivor will be referred to the SSO Case Manager for ongoing follow-up throughout the period leading up to resource access. With participants' permission, the Case Manager will follow up at least biweekly for three months following each helpline call to assure that participants have been able to access resources and to re-assess with each participant the need for any additional resources or referrals. The Case Manager will also perform outreach to providers and sites likely to encounter survivors fleeing domestic violence to assure equal access for survivors outside Springfield or for survivors who experience difficulty accessing resources due to limited mobility, language access, technology, or other barriers.

Coordinated entry staff will work closely with staff in DV shelters to assist survivors to access permanent housing.

2. Does your project have a specific population focus? Yes

2a. Please identify the specific population focus. (Select ALL that apply)

Chronic Homeless	<input type="checkbox"/>	Domestic Violence	<input checked="" type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

Other:

3. Housing First

3a. Does the project quickly move participants into permanent housing Yes

3b. Does the project ensure that participants are not screened out based on the following items? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" Yes

approach?

4. Please select the type of SSO Project: Coordinated Entry

4a. Will the coordinated entry process funded in part by this grant cover the CoC's entire geographic area? Yes

4b. Will the coordinated entry process funded in part by this grant be easily accessible? Yes

4c. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.

The DV-CE Program will provide marketing and outreach through distribution of bilingual flyers and posters at places accessible to low-income survivors, offer satellite office hours, and provide group presentations to potential participants at the sites of providers serving the homeless, housing-unstable, or domestic violence survivors. Community-based domestic violence workers will distribute discreet palm-sized information cards featuring the helpline telephone number for survivors to keep on their person and will partner with street outreach agencies to distribute information to homeless survivors living outdoors. The YWCA and Companeras will advertise the CE Program online through posting information at the CoC's website, listing the information at other DV survivor-serving sites, and regularly providing programmatic updates on social media.

The CE process will provide maximal choice to survivors with respect to type of housing or level of services. The CE Supportive Services Case Manager will also maintain engagement with, and minimize attrition for, homeless survivors seeking resources by supporting them until they successfully access resources. Feelings of hopelessness and isolation are a significant factor in survivors remaining with abusers, as they often perceive area resources as foreign, removed from existing systems of support, or difficult to access. The Case Manager will ensure that survivors are able to seamlessly access resources and programs identified by the helpline and provide ongoing assessment in the event that a survivor needs to modify the plan made at point of first contact.

The DV-CE Program will provide low-barrier access to resources, providing high-quality support to callers who have limited or no employment or income, active substance use, ongoing involvement with a domestic violence abuser, and/or prior criminal histories. All survivors will have fair and equal access to the CE process and to available housing resources through the Helpline's countywide referral network, the SSO Case Manager's outreach, and the project agencies' close relationships with providers and programs throughout Hampden County.

4d. Does the coordinated entry process use a comprehensive, standardized assessment process? Yes

4e. Describe the referral process and how the coordinated entry process ensures that participants are directed to appropriate housing and/or services.

Survivors can be referred to the DV-CE Program through participation in

domestic violence programming at the YWCA or Womanshelter/Comapneras, referral by an outside agency provider, or through self-referral. Survivors and their providers can access the CE Program by calling the Helpline 24/7/365 and will receive immediate assistance or a callback within one hour. First responders and street outreach workers may also call the CE Helpline to request that a CE Outreach Worker be dispatched to meet with a survivor in person immediately in person following a violent incident. Once a survivor is referred to the program, CE program staff will use trauma-informed interviewing techniques to screen for diversion, prevention, shelter, and/or housing needs; vulnerability/prioritization indices; and program eligibility. The process will be survivor-centered and will provide participants with information about all available resources so that survivors may exercise maximal choice over the level of services and type of housing (for which they are eligible) that meets their needs. CE staff will use the Hampden County CoC's identified systemwide assessment tool, the Family or Individual Vulnerability Index-Service Prioritization Data Tool (Vi-SPDAT), and provide scoring information with the survivor's written consent to the City of Springfield for de-identified entry into the CE list management system as appropriate. CE program staff will be fully trained in all available area housing and homelessness resources, including not only CoC-funded programs, but also family shelter and homelessness diversion programs funded by the Massachusetts Department of Housing and Community Development, the state-funded HomeBASE relocation and rental assistance program, relocation assistance available through the Massachusetts Department of Transitional Assistance, domestic violence shelter funded by the Department of Public Health, transitional housing funded by the Office for Victims of Crime or Department of Justice Office on Violence Against Women, and housing subsidies available through the Massachusetts Rental Voucher Program (MRVP), Housing Choice Voucher Program ("Section 8"), the New Lease public-private partnership offering project-based subsidies to families in DHCD-funded shelter, or other initiatives available through Public Housing Authorities and other agencies. They will receive detailed training documentation and regular in-person training, supervision, and support to assure timely, accurate, up-to-date information on all available regional housing and homelessness resources so that participants are seamlessly connected to appropriate housing resources.

4f. If the coordinated entry process includes differences in the access, entry, assessment, or referral for certain populations, are those differences limited only to the following four groups: Individuals, Families, DV, and Youth? Yes

6A. Funding Request

1. Do any of the properties in this project have an active restrictive covenant? No
2. Was the original project awarded as either a Samaritan Bonus or Permanent Housing Bonus project? No
3. Does this project propose to allocate funds according to an indirect cost rate? No
4. Renewal Grant Term: 1 Year
5. Select the costs for which funding is being requested:
- | | |
|---------------------|-------------------------------------|
| Leased Structures | <input type="checkbox"/> |
| Supportive Services | <input checked="" type="checkbox"/> |
| HMIS | <input type="checkbox"/> |

6D. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the  icon. To view or update a Matching source already listed, select the  icon.

Summary for Match

Total Value of Cash Commitments:	\$57,566
Total Value of In-Kind Commitments:	\$0
Total Value of All Commitments:	\$57,566

1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant? No

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	Cash	Government	MA Department of ...	09/23/2019	\$43,750
Yes	Cash	Government	MA Dept of Public...	09/23/2018	\$13,816

Sources of Match Detail

- 1. Will this commitment be used towards Match?** Yes
- 2. Type of Commitment:** Cash
- 3. Type of Source:** Government
- 4. Name the Source of the Commitment:** MA Department of Public Health
(Be as specific as possible and include the office or grant program as applicable)
- 5. Date of Written Commitment:** 09/23/2019
- 6. Value of Written Commitment:** \$43,750

Sources of Match Detail

- 1. Will this commitment be used towards Match?** Yes
- 2. Type of Commitment:** Cash
- 3. Type of Source:** Government
- 4. Name the Source of the Commitment:** MA Dept of Public Health
(Be as specific as possible and include the office or grant program as applicable)
- 5. Date of Written Commitment:** 09/23/2018
- 6. Value of Written Commitment:** \$13,816

6E. Summary Budget

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2018 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2018, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs	Total Assistance Requested for 1 year Grant Term (Applicant)
1a. Leased Units	\$0
1b. Leased Structures	\$0
2. Rental Assistance	\$0
3. Supportive Services	\$209,330
4. Operating	\$0
5. HMIS	\$0
6. Sub-total Costs Requested	\$209,330
7. Admin (Up to 10%)	\$20,933
8. Total Assistance plus Admin Requested	\$230,263
9. Cash Match	\$57,566
10. In-Kind Match	\$0
11. Total Match	\$57,566
12. Total Budget	\$287,829

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachmenbt	No	YWCA match commit...	09/23/2019
3) Other Attachment	No	Womanshelter matc...	09/23/2019



Womanshelter/Compañeras

P.O. Box 1099 • Holyoke • MA • 01041-1099
(413) 538-9717 • (413) 536-1629 • Fax (413) 538-9411

To: Geraldine McCafferty | Director of Housing
CITY OF SPRINGFIELD

From: Andrew Warner | Contract Compliance Manager
Womanshelter/Companeras

CC: Carmen Nieves | Executive Director
Womanshelter/Companeras

Date: September 23, 2019

Re: CoC grant match funds during the period of July 1, 2020 through June 30, 2021.

Womanshelter/Campaneras will provide matching funds in the amount of \$13,816 for the CoC DV Coordinated Entry grant. The source of these funds will be our Massachusetts Department of Public Health grant, and the funds will be used as match during the period July 1, 2020 through June 30, 2021. Match funds will contribute to staff costs for the project.

Signature: _____

Date:

9/23/2019



Womanshelter/Compañeras

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Signature: _____

Date: 9/23/2019