

State of Georgia  
**HOME-ARP**  
**NCS NOFA Training**  
*Application Narrative*

Department of Community Affairs  
Housing Finance & Development Division  
Office of Community Housing Development



# Agenda

- Submission Feedback
- Application Narrative
- Key Take-Aways

# Submission Feedback

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# Narrative Training

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# Submission Checklist

## SUBMISSION CHECKLIST - NCS NARRATIVE & TIMELINE

NCS ORG <<ORG NAME>>

### Application Submission

NCS Narrative & Timeline Excel Spreadsheet

### Required Documentation Submission

Proposed NCS Operating Policies and Procedures, including organizational chart, brief job descriptions, and written personnel policy.

# Program Description

## Service Area

Describe the project service area.

Include a list of all cities, towns, counties and tribal jurisdictions that will be served by the project.

Describe the factors that have contributed to the need for the project, including the number of sheltered persons in the most recent point-in-time count and McKinney-Vento count.

## Shelter Operations

What basic necessities will be provided to participants (i.e. food, toiletries, clothing, bedding, etc.)?

How will participants gain access to food/meals?

How will dietary restrictions be addressed?

Where will the food be prepared and who will prepare it?

What is the cost?

Is a food and/or food prep contract in place or under negotiation? And if so, what are the proposed terms of the contract?

# Program Description

## Shelter Programming

Describe program strategies, collaborations or resources for ensuring adequate housing or post-transitional placements are available for person exiting the project.

Describe any legal, physical, programmatic or fiscal concerns not identified elsewhere that may impact the implementation of the proposed program and that require additional clarification or consideration. This would be from your SWOT Analysis.

Describe what a program participant/occupant should expect from their NCS experience from entrance to exit.

Describe proposed staffing levels (number of staff, coverage, hours).

## Program Entrance and Exit

Describe your NCS project's entry/exit policies, including the times of day residents will be permitted to access their units and the rationale, if any, behind limited access policy. Please include if your NCS project allow residents 24-hour access to their NCS unit.

Please detail your NCS project's proposed termination policy, including specific circumstances that would constitute grounds for termination. Your termination policy **MUST** be included in your NCS project's proposed Operating Policies and Procedures that are uploaded to this application.

# Program Description

*The NCS project must be housing-focused, therefore, immediate basic needs met, and the shelter also serves as a pathway to permanent housing. Describe how your NCS project will work with participants to help them obtain permanent housing as quickly as possible.*

## Housing Focus

Describe the process your staff will use, including evidence-based case management practices and specific assessment/planning tools.

How will your NCS project work with the local Coordinated Entry System?

What is the frequency and strategy with which your NCS project will engage with participants?

How will your NCS project help participants obtain permanent housing when ESG or CoC-funded housing is not available or appropriate?

If your NCS project will have a maximum length of stay, please note what that time period is and explain if and how you are able to accomplish the activities you listed in parts 1-4 of this question. If your shelter does not have a maximum length of stay, please write N/A.

## Confidentiality

Does the Organization/Agency have written procedures to ensure that records containing personally-identifying information of any individual or family who applies for and/or receives HOME-ARP assistance will be kept secure and confidential.



# Program Description

## Program and Funding Alignment+

What is your agency's mission statement?

Does the NCS project align with your mission?

Is your agency the local leader in your service area - both geographically and with the population you will be serving? What are your nonprofit's core competencies to serve the area where the NCS will be located? Are you the local leader in this particular area of service?

It is important for organizations to have close relationships in the community. List and describe your top 3 interagency relationships (ie. partnerships, state agencies, etc.).

Do they usually fund your type of program?

Are you in their geographic area?

Are you asking for the right amount?

If there are no development plans – what is the timeline to start building within 12 months?

## Drug-Free Workplace

Does the Organization/Agency have a written drug-free workplace policy?

## Conflict of Interest

Does the Organization/Agency have written standards of conduct covering conflicts of interest and organizational conflicts of interest?

# Logic Model

Inputs	Activities
<p><i>Inputs or resources or infrastructure. The raw materials used to conduct the effort or initiative. (ie. materials, volunteers, agreements with participating agencies, finances) Inputs can also include constraints on the program, such as regulations or funding gaps, which are barriers to your objectives.</i></p>	<p><i>Activities, or interventions. Explain how are the inputs and resources are used to direct the course of change. (ie. volunteer training, participant classes, building a NCS.) Your intervention should be guided by a clear analysis of risk and protective factors.</i></p>
<p>PTA Planning Sessions Community Volunteers</p>	<p>After school program activities</p>

# Logic Model

Outputs	Outcomes
<p><i>Outputs and the evidence that the activities were performed as planned including numbers. (Indicators might include the number of mentors trained and youth referred, and the frequency, type, duration, and intensity of mentoring contacts.)</i></p>	<p><i>Effects, results, consequences, and outcomes. The kinds of changes that came about as a direct or indirect effect of the activities. (ie. Bonding between adult mentors and youth and increased self-esteem among youth.)</i></p>
<p>10 Volunteers work with 20 children afterschool for 4 months</p>	<p>Less disruptions in the classroom from the children in the program. Higher grades and participation by the children</p>

# Logic Model

Impact
<i>Long term results of the efforts with numbers (ie. Increased graduation rates, decreased drop out rates, less homelessness, etc.</i>
All the participants graduation from the school and are on track to excel at their next level.

# Self-Scoring

## Program Description & Narrative

### Service Area

The project service area is clearly described.

N/A

0

The choice of service area is clearly justified by data.

N/A

0

Compare and contrast the Point In Time County and the McKinney Vento data.

N/A

0

### Shelter Operations

The description of shelter operations is clearly defined and the cost of defined operations is clearly stated.

N/A

0

### Shelter Programming

Program strategies, collaborations, or resources are clearly explained and the scope is reasonable and complete.

N/A

0

There is evidence that the organization/agency has completed the SWOT process and clearly identified barriers to success.

N/A

0

The participant entrance to exit process is clearly defined and articulated.

N/A

0

Proposed staffing levels are clearly defined and match the operations budget.

N/A

0

### Program Entrance and Exit

Clear policy on waitlist management by chronological order or population preference. Policy is attached. (Max 1 pt.)

N/A

0

1 pt = Participants will be allowed 24 access to their non-congregant unit. 2 pts = Participants will be allowed 24-hour access to common areas including kitchen facilities.

N/A

0

Termination policy is detailed and included as an attachment. (Max 1 pt.)

N/A

0

The Termination policy demonstrates an integration of low-barrier principles.

N/A

0

Currently use HMIS or willing to integrate it into HOME-ARP funded unit operations. (Max 1 pt.)

N/A

0

# Self-Scoring

<b><u>Housing Focus</u></b>				
Case management demonstrates it is evidence-based with specific planning tools.			N/A	0
The organization/agency agrees to work with coordinate entry.			N/A	0
There is a clear and specific process for helping participants attain permanent housing if ESG or COC funding is not available.			N/A	0
<b><u>Confidentiality</u></b>				
1 pt = Included written procedures for participant data security and confidentiality, 2 pts = If participant data security and confidentiality is included in the organization/agency's Personnel Policy and policy is included.			N/A	0
<b><u>Program and Funding Alignment</u></b>				
Agency's mission statement is clearly articulated. (Max 1 pt.)			N/A	0
NCS project aligns with mission. (Max 1 pt.)			N/A	0
Community Leadership in their service area is clearly demonstrated in the answers based on funding, service area, and partnerships. (Max 1 pt.)			N/A	0
Drug-Free Workplace policy is included (Max 1 pt.)			N/A	0
Conflict of Interest policy is included (Max 1 pt.)			N/A	0
The Board of Directors signs an ethics/conflict of interest statement as a condition of board service. Signed statement is included. (Max 1 pt.)			N/A	0
<b><u>Experience with Federal Grant Funding &amp; Commitment to DCA</u></b>				
The applicant shows an overall commitment to active involvement in DCA's efforts to end homelessness			N/A	0

# Self-Scoring

**Project Readiness**

PLAN REASONABLENESS: Is the infrastructure and operational capacity of the organization prepared to take on the additional program and building once constructed and placed in service? (Ex. common space, bathrooms, and meeting rooms can manage the additional people and use? The staffing plan is reasonable? Services proposed are reasonable?)			N/A	0

**Cost Effectiveness**

The Applicant's proposal allows for the most efficient and cost-effective use of HOME-ARP funds			N/A	0

**Leveraging**

The applicant must demonstrate how the proposed program will leverage other funding or resources to serve more clients or provide additional services beyond HOME-ARP funded services			N/A	0

<b>SELF SCORE TOTAL</b>	<b>0</b>
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# Take-Aways

- Read each question and make sure you understand. If you have any questions, please reach out.
- Answer each question thoroughly and clearly. Have several people read it.
- Please do not assume DCA knows what you are explaining. Limit acronyms and organizational-specific language.
- Use the Logic Model to get clear on your final goals and how to get there.
- Ask questions – it helps everyone in this process





**State of Georgia  
HOME-ARP  
Allocation Plan**

Read the plan  
On the DCA website:  
<https://bit.ly/GaHOME-ARP-Plan>



Sign up for our Listserv:  
<https://bit.ly/GaHOME-ARPListserv>

# Thanks!



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