



**CONTINUUM OF CARE NOTICE OF FUNDING OPPORTUNITY
PROPOSAL RATING FORM**

(4) RENEWAL PROJECTS: HMIS

Criteria	Corresponding Item Numbers*	Rating 0-5	X Weight	Maximum Points
<i>Minimum Qualifications: Applicant meets minimum threshold requirements.</i>		<i>Yes/No Per Technical Review</i>	N/A	<i>This section will be evaluated by MWWHA consultants</i>
SECTION 1 – RECIPIENT PERFORMANCE				
1. APR TIMELINESS <ul style="list-style-type: none"> • Did the applicant submit the previous year’s APR on time? (5 for yes, 0 for no, if no satisfactory explanation) • 	Recipient Performance Screen	<i>Technical Review</i>	4	20
2. DRAWDOWNS <ul style="list-style-type: none"> • Did the applicant draw funds quarterly for the current renewal project? 	Recipient Performance Screen	<i>Technical Review</i>	3	20
3. FUNDS REMAINING <ul style="list-style-type: none"> • Are there any funds remaining for recapture by HUD for the most recently expired grant term related to this renewal project request? (5 for no, 0 for yes, if no satisfactory explanation) 	Recipient Performance Screen	<i>Technical Review</i>	3	20
4. UNRESOLVED AUDIT FINDINGS		<i>Technical Review</i>	3	20

Criteria	Corresponding Item Numbers*	Rating 0-5	X Weight	Maximum Points
<ul style="list-style-type: none"> Are there any unresolved monitoring or OIG audit findings that are not explained to the satisfaction of the Continuum of Care? 	Recipient Performance Screen			
SECTION 2 - PROJECT DESCRIPTION				
5. PROJECT DESIGN <ul style="list-style-type: none"> Project design is fully described, including addressing community needs. Applicant provides a detailed description of the design of the HMIS system. Applicant provides a detailed description of the implementation of the HMIS System. Application clearly describes how CoC funding will be used. 	Screen 3B		5 4 4 2	<u>TOTAL 75</u> 25 20 20 10
6. COORDINATION WITH OTHER ORGANIZATIONS <ul style="list-style-type: none"> Applicant describes how proposed project will collaborate with other providers or agencies in the Marion-Polk region, and how the applicant will participate with community partners through the Continuum of Care. 	Screen 3B		5	25
7. OUTCOMES AND PERFORMANCE MEASURES <ul style="list-style-type: none"> Applicant describes proposed project outcomes that are objective, measurable, trackable, and meet or exceed any established HUD benchmarks for System Performance Measures. 		<i>Part of Technical Review</i>	20	100 <i>This section will be evaluated by MWVHA consultants</i>

Criteria	Corresponding Item Numbers*	Rating 0-5	X Weight	Maximum Points
<ul style="list-style-type: none"> Applicant describes relevant experience using HMIS to capture data and report program outcomes. 				
<p>8. HMIS STANDARDS (PART 4). Based on the current HMIS configuration, does the HMIS system:</p> <ul style="list-style-type: none"> a. Collect all Universal Data Elements b. Produce HUD-required reports and needed data c. Generate reports required by federal partners (VA, HHS) d. Provide the CoC with an unduplicated count of program participants receiving services e. Have a staff person responsible for security standards f. Conduct background checks for employees with access to view HMIS data g. Conduct Security Training and regularly follow up on standards h. Have a process in place to remove licenses from former users; removes licenses within one week 	Screen 4A, #1-8a			<p style="text-align: center;"><u>TOTAL 85</u></p> <p style="text-align: center;">10</p> <p style="text-align: center;">15</p> <p style="text-align: center;">10</p> <p style="text-align: center;">10</p> <p style="text-align: center;">10</p> <p style="text-align: center;">10</p> <p style="text-align: center;">10</p>
SECTION 3 – BUDGET				
<p>9. BUDGET</p> <ul style="list-style-type: none"> Budgeted costs are allowable by HUD. Budget is cost effective and adequate to implement and sustain project activities over the grant period. Budgeted costs are reasonable, given the proposed number of clients to be served. Budgeted costs are justified. Match and indirect costs (if any) are calculated correctly. 	Screen 6	<i>Part of Technical Review</i>	10	50
<i>This section will be evaluated by MWVHA consultants</i>				

Criteria	Corresponding Item Numbers*	Rating 0-5	X Weight	Maximum Points
SECTION 4 – SUPPLEMENTAL EQUITY QUESTIONS				
10. EQUITY <ul style="list-style-type: none"> Applicant describes meaningful involvement in program development by stakeholders with different identities. Applicant describes positive equity and inclusion impacts for people with different identities resulting from the project proposal. 	Supplemental Questions		5	<u>TOTAL 50</u> 25
			5	25
TOTAL			90	450

RATING KEY:

5 = Excellent 4 = Very good 3 = Average 2 = Fair 1 = Poor