

## HOMELESS SHELTER CITIES MITIGATION GRANT (EXISTING)

### I. PROPOSAL COVER SHEET

**Instructions:** Please use the provided space and PDF form fill format for responses.

<b>ENTITY</b>	
Applicant Entity <u>Salt Lake City Corporation</u>	
Federal Tax ID #: <u>87-6000279</u>	DWS Vendor #: <u>10369GT</u>
This entity is an eligible: <input checked="" type="checkbox"/> City <input type="checkbox"/> Metro Township <input type="checkbox"/> Town <b>-OR-</b> <input type="checkbox"/> Department of Public Safety	
<b>Entity Signature Authority:</b>	
Name: <u>Jacqueline M. Biskupski</u>	Title: <u>Mayor</u>
Address: <u>Office of the Mayor, P.O. Box 145474, Salt Lake City, Utah, 84114-5474</u>	
Phone: <u>801-535-7704</u>	Email: <u>jackie.biskupski@slcgov.com</u>
Electronic Signature: <u><i>Jacqueline Biskupski</i></u>	Date: <u>10-17-19</u>

<b>ENTITY CONTRACT ADMINISTRATOR</b> - If different from Entity Signature Authority	
Name: <u>Lani Eggertsen-Goff, MS, AICP</u> Position Title: <u>Director, Housing and Neighborhood Development</u>	
Address: <u>Division of Housing and Neighborhood Development, P.O. Box 145487, Salt Lake City, Utah, 84114-5487</u>	
Phone: <u>801-535-6240</u>	Email: <u>lani.eggertsen-goff@slcgov.com</u>

<b>ENTITY FINANCE CONTACT</b>	
Name: <u>Melyn Osmond</u> Position Title: <u>Payroll Accounting Manager</u>	
Address: <u>Department of Finance, P.O. Box 145451, Salt Lake City, Utah, 84114-5451</u>	
Phone: <u>801-535-6671</u>	Email: <u>melyn.osmond@slcgov.com</u>

<b>ENTITY PRIMARY CONTACT</b> - For report and monitoring coordination	
Name: <u>Michelle Hoon</u> Position Title: <u>Homeless Engagement and Response Team Project and Policy Manager</u>	
Address: <u>Division of Housing and Neighborhood Development, P.O. Box 145487, Salt Lake City, Utah, 84114-5487</u>	
Phone: <u>801-535-7941</u>	Email: <u>michelle.hoon@slcgov.com</u>

<b>PURPOSE FOR REQUESTED GRANT FUNDING</b> - Select all that apply	
<input type="checkbox"/> Personnel for public safety services in and around a homeless shelter	Amount Requested: \$ <u>0</u>
<input checked="" type="checkbox"/> Development of a community and neighborhood program	Amount Requested: \$ <u>146,991</u>
<input checked="" type="checkbox"/> Provision of social services	Amount Requested: \$ <u>60,574</u>

APPROVED AS TO FORM  
Salt Lake City Attorney's Office

Date: 10/15/19  
Sign: *Jaysan Oldroyd*  
Print: Jaysan Oldroyd

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### I. PROPOSAL COVER SHEET

**Instructions:** Please use the provided space and PDF form fill format for responses.

<b>ENTITY</b>	
Applicant Entity _____	
Federal Tax ID #: _____ DWS Vendor #: _____	
This entity is an eligible: <input type="checkbox"/> City <input type="checkbox"/> Metro Township <input type="checkbox"/> Town <b>-OR-</b> <input type="checkbox"/> Department of Public Safety	
<b>Entity Signature Authority:</b>	
Name: _____ Title: _____	
Address: _____	
Phone: _____ Email: _____	
<b>Electronic Signature:</b> _____ <b>Date:</b> _____	

<b>ENTITY CONTRACT ADMINISTRATOR</b> - If different from Entity Signature Authority	
Name: _____ Position Title: _____	
Address: _____	
Phone: _____ Email: _____	

<b>ENTITY FINANCE CONTACT</b>	
Name: _____ Position Title: _____	
Address: _____	
Phone: _____ Email: _____	

<b>ENTITY PRIMARY CONTACT</b> – For report and monitoring coordination	
Name: _____ Position Title: _____	
Address: _____	
Phone: _____ Email: _____	

<b>PURPOSE FOR REQUESTED GRANT FUNDING</b> – Select all that apply	
<input type="checkbox"/> Personnel for public safety services in and around a homeless shelter	Amount Requested: \$ _____
<input type="checkbox"/> Development of a community and neighborhood program	Amount Requested: \$ _____
<input type="checkbox"/> Provision of social services	Amount Requested: \$ _____

## II. COMMUNITY AND NEIGHBORHOOD PROGRAM NARRATIVE

**A. SUMMARY AND OUTLINE (20 points possible)**

- i. Provide a summary of the impact that the current community and neighborhood program being funded (July 1, 2019 – Current)
- ii. Outline, in detail, the components of programming and how they reduce the negative impacts of the shelter
- iii. Describe the need for continued mitigation funding

**B. FUNDING GAP AND LEVERAGING (15 points possible)**

- i. Outline the funding gap to justify the need for additional funding through the Homeless Shelter Cities Mitigation Restricted Account.
- ii. Describe how the entity is integrating services into existing programs and leveraging other city resources.

**C. REPORTING MEASURES AND OUTCOMES (20 points possible)**

Identify the intended outcomes related to the funding purpose and project. Narrative must include:

- i. Attachment B: Community and Neighborhood Programs outcomes
- ii. A description of how data is being collected and plans to improve data collection
- iii. Other reporting measurements that your agency believes illustrates the impact of these funds on shelter safety

### III. SOCIAL SERVICES NARRATIVE

**A. SUMMARY AND OUTLINE** (20 points possible)

- i. Provide a summary of the current social service resources in the community.
- ii. Outline the need for additional resources for this purpose in SFY20 (July 1, 2019 – June 30, 2020).
- iii. Include data to support the need for additional resources.

**B. FUNDING GAP AND LEVERAGING (15 points possible)**

- i. Outline the funding gap to justify the need for additional funding through the Homeless Shelter Cities Mitigation Restricted Account.
- ii. Describe how the entity is integrating services into existing programs and leveraging other city resources.

**C. REPORTING MEASURES AND OUTCOMES (20 points possible)**

Identify the intended outcomes related to the funding purpose and project. Narrative must include:

- i. metrics used to evaluate the effective use of funding;
- ii. baseline data; and
- iii. a description how data will be collected and tracked.

**DWS Housing and Community Development - Homelessness Programs Office (HPO)**  
**HPO Grant Budget Narrative and Itemization Form**  
 July 1, 2019 - June 30, 2020

<b>Organization:</b>	Salt Lake City Corporation
<b>Funding Source:</b>	Utah Legislative Allocations for Homeless Shelter Cities Mitigation Restricted Account
<b>Requested Amount:</b>	\$207,565.00

**All planned expenses must be itemized, detailed and described for each line item.**  
**Cells may be expanded as necessary in order to provide all required information.**

**Category I - Indirect Expenses:**

- a) NICRA - If the organization has a federally approved Negotiated Indirect Cost Rate Agreement (**NICRA**), the NICRA **must** be used in Category I, unless the organization voluntarily chooses to waive indirect costs or charge less than the full indirect cost rate. Any administrative costs that are not part of the basis of the NICRA and are direct charged can be listed in Category II.
- b) De Minimis - If the organization **does not** have a NICRA and chooses a **de minimis rate**, Category I **must** be used. The de minimis rate can be charged at 10% of Modified Total Direct Costs (MTDC). MTDC is defined as being: **\*\*All direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward.** No expenses should be entered into Category II.

<b>Category I *Indirect Expenses</b>	<b>Itemized Details of Grant Funds Requested</b>	<b>Grant Funds Requested</b>
Indirect Costs	\$0 in requested in Indirect Costs for Indirect Expenses.	\$ -

*\*Cannot exceed the entities federally approved indirect cost rate (NICRA) - OR - the entities 10% de minimis rate certificate based upon eligible Category III expenses.*  
*\*\*\*Indirect costs may be modified after funding sources have been determined so not to exceed federal regulations of the federal funds awarded.*

**Category II - Direct Administrative Expenses:**

If the organization **DOES NOT** have a NICRA and chooses not to use the deminimis rate, the organization **must** use Category II if charging Direct Administrative Expenses.

<b>Category II Direct Administrative Expenses</b>	<b>Itemized Details of Grant Funds Requested</b> <i>Include very specific details - e.g. specific number of FTE's attached to the title of the position, specific number of hotel/motel vouchers at price per voucher, etc. Expand rows as needed.</i>	<b>Grant Funds Requested</b>
Salaries	\$0 is requested in Salaries for Direct Administrative Expenses.	\$0.00
Fringe Benefits	\$0 is requested in Fringe Benefits for Direct Administrative Expenses.	\$0.00
Communications <i>(e.g. Consistent monthly charges including and not limited to: printing, copying, phone, internet, postage)</i>	\$0 is requested in Communications for Direct Administrative Expenses.	\$0.00
Equipment <i>(e.g. computers, laptops, printers, furniture, etc.)</i>	\$0 is requested in Equipment for Direct Administrative Expenses.	\$0.00
Insurance	\$0 is requested in Insurance for Direct Administrative Expenses.	\$0.00
Space Costs <i>(e.g. rent, lease, etc.)</i>	\$0 is requested in Space Costs for Direct Administrative Expenses.	\$0.00
Utilities <i>(consistent monthly utility charges - gas, water, etc.)</i>	\$0 is requested in Utilities for Direct Administrative Expenses.	\$0.00
Professional Development & Training	\$0 is requested in Professional Development and Training for Direct Administrative Expenses.	\$0.00
Professional Fees & Contract Services <i>(e.g. consultants, security, etc.)</i>	\$0 is requested in Professional Fees and Contract Services for Direct Administrative Expenses.	\$0.00

Material and Supplies (e.g. consumable goods)	\$0 is requested in Material and Supplies for Direct Administrative Expenses.	\$0.00
Travel & Transportation	\$0 is requested in Travel and Transportation for Direct Administrative Expenses.	\$0.00
***Direct Administrative costs may be modified after funding sources have been determined so not to exceed federal regulations of the federal funds awarded.		
<b>Total Category I/Category II Administrative Expenses</b>		<b>\$0.00</b>
<b>Category III Project Expenses</b>		
	<b>Itemized Details of HPO Grant Funds Requested</b>	<b>HPO Grant Funds Requested</b>
**Salaries	\$50,451 is requested in Salaries to continue the full-time salary for the Community Engagement Coordinator. The salary is calculated from an hourly rate of \$24.26, which includes a 2% cost of living adjustment anticipated for the position in fiscal year 2020-2021 calculated from the position's fiscal 2019-2020 salary.	50,451.00
**Fringe Benefits	\$18,262 is requested for the full-time employee fringe benefit package for the Community Engagement Coordinator. Costs include \$3,860 for FICA/Medicare calculated at 7.65% of annual salary, \$8,420 for State of Utah pension calculated at 16.69% of annual salary, \$632 for 501( c)(9) annual costs, \$86 for life insurance annual cost, and \$5,264 for health insurance annual costs projected for fiscal year 2020-2021.	18,262.00
**Staff Travel & Transportation	\$870 is requested for local mileage reimbursement based on an estimated 1,611 miles traveled by the Community Engagement Coordinator calculated from a local mileage reimbursement rate of \$0.54 per mile set by Salt Lake City Corporation's travel policy.	870.00
**Material and Supplies (e.g. consumable goods)	\$8,490 is requested for Materials and Supplies for outreach supplies, promotional collateral, and participant feedback tools used at four HEART community-based programming events hosted at two homeless resource centers calculated at a cost of \$2,123 per event.	8,490.00
**Communications (e.g. Consistent monthly charges including and not limited to: printing, copying, phone, internet, postage)	\$518 is requested for mobile phone service calculated from a rate of \$43 per month for 12 months. The mobile phone is used by the Community Engagement Coordinator for communication and interaction with Volunteers of America staff, Shelter the Homeless staff, and host neighborhood representatives and stakeholders to mitigate the impacts of the resource centers and respond to neighborhood concerns.	518.00
**Utilities (consistent monthly utility charges - gas, water, etc.)	\$0 is requested for Utilities.	0.00
**Staff Development & Training	\$5,955 is requested in Staff Development & Training for the Community Engagement Coordinator to attend three out-of-state conferences: 1) National Alliance to End Homelessness: Solutions for Individuals Homeless Adults 2021 at cost of \$1,666.25 estimated from air fair, lodging, ground transportation, and per diem for three days/three nights of travel to San Diego, California; 2) National Human Services Data Consortium Fall 2020 at a cost of \$1,886.25 estimated from air fair, lodging, ground transportation, and per diem for five days/four nights of travel to Austin, Texas; and 3) National Human Services Data Consortium Spring 2021 at a cost of \$2,402.50 estimated from air fair, lodging, ground transportation, and per diem for five days/four nights of travel to Nashville, Tennessee. Destination cities were use solely for cost estimation purposes and do not indicate where each out-of-state conference will be held in 2020-2021.	5,955.00
**Insurance	\$0 is requested for insurance.	0.00
**Professional Fees & Contract Services (e.g. consultants, security, etc.)	\$0 is requested in Professional Fees & Contract Services	0.00

***Subawards - limited to the first \$25,000 (e.g. pass-through)	\$121,148 is requested in Subawards to direct \$121,148 to Volunteers of America, Utah for the Community Engagement Project 2020-2021. A subward budget and budget narrative is provided as Attachment A.	121,148.00
Client Services (e.g. education services, employment & training, legal services, client transportation, etc.)	\$0 is requested for Client Services.	0.00
Client Housing Payments (e.g. rent, utilities, application fees, arrears, deposits, etc.)	\$0 is requested for Client Housing Payments.	0.00
Hotel/Motel Vouchers	\$0 is requested for Hotel/Motel Vouchers.	0.00
Equipment (e.g. computers, laptops, printers, furniture, etc.)	\$1,871 is requested in Equipment for laptop and MS Office software used by the Community Engagement Coordinator.	1,871.00
Space Costs (e.g. rent, lease, etc.)	\$0 is requested for Space Costs.	0.00
<b>Total Category III Project Expenses</b>		<b>\$207,565.00</b>
<b>Total Expenses Category I/II and Category III</b>		<b>\$ 207,565.00</b>

**DWS Housing and Community Development - Homelessness Programs Office (HPO)**

**HPO Grant Budget Narrative and Itemization Form**

July 1, 2020 - June 30, 2021

**Organization:** Salt Lake City Corporation | **SUBAWARD** to Volunteers of America, Utah

**Funding Source:** Utah Legislative Allocations for Homeless Shelter Cities Mitigation Restricted Account

**Requested Amount:** \$121,148.00

**All planned expenses must be itemized, detailed and described for each line item.  
Cells may be expanded as necessary in order to provide all required information.**

**Category I - Indirect Expenses:**

a) NICRA - If the organization has a federally approved Negotiated Indirect Cost Rate Agreement (**NICRA**), the NICRA **must** be used in Category I, unless the organization voluntarily chooses to waive indirect costs or charge less than the full indirect cost rate. Any administrative costs that are not part of the basis of the NICRA and are direct charged can be listed in Category II.

b) De Minimis - If the organization **does not** have a NICRA and chooses a **de minimis rate**, Category I **must** be used. The de minimis rate can be charged at 10% of Modified Total Direct Costs (MTDC). MTDC is defined as being: **\*\*All direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward.** No expenses should be entered into Category II.

Category I *Indirect Expenses	Itemized Details of Grant Funds Requested	Grant Funds Requested
Indirect Costs	\$8,875 per employee is requested in Indirect Costs based on Volunteers of America's NICRA of 25.10% of salary.	\$17,750

*\*Cannot exceed the entities federally approved indirect cost rate (NICRA) - OR - the entities 10% de minimis rate certificate based upon eligible Category III expenses.*

*\*\*\*Indirect costs may be modified after funding sources have been determined so not to exceed federal regulations of the federal funds awarded.*

**Category II - Direct Administrative Expenses:**

If the organization **DOES NOT** have a NICRA and chooses not to use the deminimis rate, the organization **must** use Category II if charging Direct Administrative Expenses.

Category II Direct Administrative Expenses	Itemized Details of Grant Funds Requested <i>Include very specific details - e.g. specific number of FTE's attached to the title of the position, specific number of hotel/motel vouchers at price per voucher, etc. Expand rows as needed.</i>	Grant Funds Requested
Salaries	\$0 per employee is requested in Salaries for Direct Administrative Expenses.	\$0.00
Fringe Benefits	\$0 per employee is requested in Fringe Benefits for Direct Administrative Expenses.	\$0.00
Communications <i>(e.g. Consistent monthly charges including and not limited to: printing, copying, phone, internet, postage)</i>	\$0 per employee is requested in Communications for Direct Administrative Expenses.	\$0.00
Equipment <i>(e.g. computers, laptops, printers, furniture, etc.)</i>	\$0 is requested in Equipment for Direct Administrative Expenses.	\$0.00
Insurance	\$0 is requested in Insurance for Direct Administrative Expenses.	\$0.00
Space Costs <i>(e.g. rent, lease, etc.)</i>	\$416 per employee per month is requested in Space Costs for Direct Administrative Expenses.	\$9,984.00
Utilities <i>(consistent monthly utility charges - gas, water, etc.)</i>	\$0 is requested in Utilities for Direct Administrative Expenses.	\$0.00
Professional Development & Training	\$0 Professional Development and Training for Direct Administrative Expenses.	\$0.00
Professional Fees & Contract Services <i>(e.g. consultants, security, etc.)</i>	\$0 is requested in Professional Fees and Contract Services for Direct Administrative Expenses.	\$0.00

Material and Supplies (e.g. consumable goods)	\$0 is requested in Material and Supplies for Direct Administrative Expenses.	\$0.00
Travel & Transportation	\$0 requested Travel & Transportation for Direct Administrative Expenses.	\$0.00
***Direct Administrative costs may be modified after funding sources have been determined so not to exceed federal regulations of the federal funds awarded.		
<b>Total Category I/Category II Administrative Expenses</b>		<b>\$27,734.00</b>
<b>Category III Project Expenses</b>	<b>Itemized Details of HPO Grant Funds Requested</b>	<b>HPO Grant Funds Requested</b>
**Salaries	\$70,720 is requested in Salaries for \$35,360 in salary for a full-time Community Engagement Liaison and \$35,360 in salary for a full-time Homeless Outreach Case Manager. Each position dedicates 100% full-time effort to implementation activities for the Community Empowerment Project 2020-2021..	\$70,720.00
**Fringe Benefits	\$8,486 is requested in Fringe Benefits for FICA/Medicare at a cost of \$5,410 calculated at 7.65% of annual salary for the Community Engagement Liaison and Homeless Resource Outreach Case Manager and \$11,562 for health insurance based on VOAUT's full-time benefit plan cost of \$5,781 per full-time position.	\$16,972.00
**Staff Travel & Transportation	\$2,818 is requested in Staff Travel & Transportation for mileage reimbursement for an estimated 203 local miles traveled by the Community Engagement Liaison and an estimated 203 local miles traveled by the Homeless Outreach Case Manager calculated from a local mileage reimbursement rate of \$0.54 per mile stated in the travel policy of Volunteers of America, Utah	\$2,812.00
**Material and Supplies (e.g. consumable goods)	\$0 is requested in Materials and Supplies.	0.00
**Communications (e.g. Consistent monthly charges including and not limited to: printing, copying, phone, internet, postage)	\$840 is requested in Communications for mobile phone service calculated at a rate of \$35 per month for 12 months for two mobile phones. One mobile phone is used by the Community Engagement Liaison and one mobile phone is used by the Homeless Resource Outreach Case Manager for communication with Shelter the Homeless staff, Salt Lake City staff, social and human service providers, individuals experiencing homelessness, and representatives from host neighborhoods.	\$840.00
**Utilities (consistent monthly utility charges - gas, water, etc.)	\$0 is requested in Utilities.	\$0.00
**Staff Development & Training	\$2,070 is requested in Staff Development & Training for the Community Engagement Liaison and Homeless Outreach Caseworker to attend the Utah Substance Abuse Conference and to complete a locally-provided trauma informed care training at a cost of \$1,035 each for both training events.	\$2,070.00
**Insurance	\$0 is requested in Insurance.	\$0.00
**Professional Fees & Contract Services (e.g. consultants, security, etc.)	\$0 is requested in Professional Fees & Contract Services.	\$0.00
***Subawards - limited to the first \$25,000 (e.g. pass-through)	\$0 is requested in Subawards.	\$0.00

Client Services (e.g. education services, employment & training, legal services, client transportation, etc.)	\$0 is requested in Client Services.	\$0.00
Client Housing Payments (e.g. rent, utilities, application fees, arrears, deposits, etc.)	\$0 is requested in Client Housing Payments.	\$0.00
Hotel/Motel Vouchers	\$0 is requested in Hotel/Motel Vouchers.	\$0.00
Equipment (e.g. computers, laptops, printers, furniture, etc.)	\$0 is requested in Equipment.	\$0.00
Space Costs (e.g. rent, lease, etc.)	\$0 is requested in Space Costs.	\$0.00
<b>Total Category III Project Expenses</b>		<b>\$93,414.00</b>
<b>Total Expenses Category I/II and Category III</b>		<b>\$ 121,148.00</b>

## FY 21 Mitigation Grant Program Outcomes

<b>Goal</b>	<b>FY21 Target</b>
<b><i>Public Safety Services</i></b>	
# of police/emt calls in city related to persons experiencing homelessness	0
# of police/emt calls within 1/2 mile of Miller HRC	0
# of police/emt calls within 1/2 mile of King HRC	0
# of police/emt calls at Miller HRC	0
# of police/emt calls at King HRC	0
# of officer initiated homelessness related cases in city	0
<b><i>Community and Neighborhood Program</i></b>	
# of host neighborhood residents and business operators trained on use of CitySourced as first point of contact	60
# of citizen/business-initiated homelessness related cases in host neighborhoods	212
# of citizen/business-initiated homelessness related cases in host neighborhoods with a resolution response within 7 days	190
# of attendees at community-based programming conducted at the King HRC and Miller HRC	50
<b><i>Social Services</i></b>	
# of single service calls to persons experiencing homelessness in the host neighborhoods	100
# of repeat service calls (2+ calls same person during program year) to persons experiencing homelessness in the host neighborhoods	70