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**CITY OF SPOKANE
COMMUNITY, HOUSING, AND HUMAN SERVICES (CHHS) DEPARTMENT
NEW SHELTER**

**Deadline: Ongoing, Based on Need and Available Funding**

**Warming Center Project Application**

**Description:** The City of Spokane, through its Community, Housing, and Human Services (CHHS) Department is initiating this Request for Proposals (RFP) to solicit Applications from social service agencies serving the City of Spokane and Spokane County to operate a Warming Center 24 hours a day/7 days a week to serve homeless adults (both men and women) throughout the 2020-2021 winter season.

**PROPOSAL SUBMITTED BY:**

**AGENCY** Click or tap here to enter text.

**POINT OF CONTACT** Click or tap here to enter text.

**PHONE** Click or tap here to enter text.

 **E-MAIL** Click or tap here to enter text.

 **SIGNATURE** \_\_\_\_\_\_\_\_

***Signature here will confirm compliance with all instructions, terms, and conditions of Funding Notice.***

Applicants that wish to be considered for funding under the City of Spokane CHHS Department warming center opportunity must respond to the following questions in writing and meet all conditions and requirements as stated in the Warming Center RFP. Submission of this application does not guarantee that a proposal will be approved.

**General Instructions**

Please complete a single narrative application for the proposal. If a proposal represents a partnership between multiple agencies, please list the name of the lead agency in the Proposal Summary boxes and detail additional partners below.

Please be concise but complete in your responses.

**Proposal Summary**

**Organization** **Leadership Contact Information**

Contact Person:

Mailing Address:

Telephone:

E-mail:

**Organization Project Contact Information**

Contact Person:

Mailing Address:

Telephone:

E-mail:

Submission Date:

Project Title: [Click or tap here to enter text.]

Applicant Organization / Lead Agency Name: [Click or tap here to enter text.]

Dollar Amount Requested from City of Spokane: [Click or tap here to enter text.]

Partner Agency Name(s) (If Applicable): [Click or tap here to enter text.]

Dollar Amount Requested from City of Spokane: [Click or tap here to enter text.]

**Homeless Crisis Response System**

1. Describe your experience operating a shelter.
2. Describe collaborative relationships your organization holds across systems. Please include the following:
3. How you will collaborate with key partners to deliver the program.
4. How your organization interfaces with other services/resources to provide a referral network for your clients.

**Project Overview and Description**

1. Describe the scope of work to be performed and the services to be provided. Please include the location and capacity of proposed warming center. For capacity, use the maximum persons, based on 6ft distancing.
2. Which population(s) will be served? Check all that apply.

 [ ]  Individual Adult Men [ ]  Couples [ ]  Young Adults (18-24)

 [ ]  Individual Adult Women [ ]  Other (please specify):

1. Describe the staffing model of the project. Include the ratio of staff to participants and the trainings required of staff and/or volunteers.
2. Describe the experience of key staff who will be administering the project.
3. Please outline your timeline and plan for getting the warming center operational as soon as possible.
4. Describe the plan to create a safe and secure environment for all clients accessing services, particularly for those who are typically marginalized or require culturally specific services (DV survivors, transgender individuals, limited English speakers, individuals with disabilities). How will you ensure access to your service is equitable?
5. Describe the accessibility of the proposed project in relationship to the population you plan to serve. What steps are you taking to ensure it is low-barrier and accessible to this group?

**Warming Center Technical Questions**

1. What criteria must participants meet before receiving services and what would cause someone to be denied entry?
2. What project rules do participants have to follow? And what happens if a participant does not follow the rules?
3. If a participant is asked to leave the project, what steps are taken to ensure they do not exit to homelessness?
4. How does the project support participants to exit towards permanent housing?

**Emergency and Incident Response Questions**

1. Describe the applicant’s emergency and/or disaster preparedness protocol, including any plans for response during health outbreaks or other emergencies and how participants are made aware of emergency scenario plans.
2. Is an incident log maintained? Does your organization have standardized incident reporting forms and practices? Please describe.
3. Describe your plan to prevent, prepare for, and respond to the spread of COVID-19 within the Warming Center.
4. How will you ensure you stay current on COVID-19 prevention and response protocol?

**Project Performance and Evaluation**

1. How does the applicant ensure quality data collection, data entry, and reporting for homeless services programs in the Homeless Management Information System (HMIS)? If the proposed project is not currently participating in HMIS, describe the applicant’s plan for increasing the applicant’s capacity to quickly begin collecting and entering data. Describe any factors that may affect the quality of the proposed project’s HMIS data during the award period.
2. How does your organization ask for and incorporate participant feedback about services into the project design, policies, and/or procedures? Please provide examples.

**Budget Narrative**

Applicants will be required to complete and submit a Detailed Budget Workbook, which outlines the total annual budget for the period of operation of the proposed project (inclusive of all funding sources). The Detailed Budget Workbook must have an accompanying budget narrative and justification that provides, in detail, the total amount for implementation of the project your organization is proposing. If multiple agencies will be partnering on this proposal, provide a cost breakdown of the expenses that will be incurred by each individual agency.

1. Does the applicant have other committed sources of funding that will support this program? If so, please detail the source and the terms for when the funds will be available for this project.
2. In a budget narrative below, please explain how the requested funds will be used to support the participants served by this project. For each line item listed with a dollar figure (except expense category subtotals), provide a brief narrative detailing: (a) how the item relates to the proposed service and (b) the method used to determine the cost. The budget narrative should be laid out in the same format relative to the budget categories as provided in the budget worksheet and provide information regarding the basis of estimation for each line item, including reference to sources used to substantiate the cost estimate (e.g. organization’s policy, payroll document, and vendor quotes, etc.).
3. If the budget includes indirect costs, please provide an explanation of the proposed indirect cost method.