

Michigan State Housing Development Authority (MSHDA)
Emergency Solutions Grant (ESG)
FY2024-2025
Macomb County Narrative Questionnaire

Please answer all the following questions as clearly and completely as possible. This questionnaire is intended to ensure that selected organizations have the capacity to receive and administer MSHDA ESG funds.

Legal Name of Organization: _____

Experience

1. Describe your organization’s experience in serving homeless populations and/or the residents of Macomb County in general.

2. Describe your organization's experience with utilizing a Housing First approach. Include the following:
 - a. Eligibility Criteria
 - b. Process for Accepting New Program Participants
 - c. Process and Criteria for Exiting Program Participants

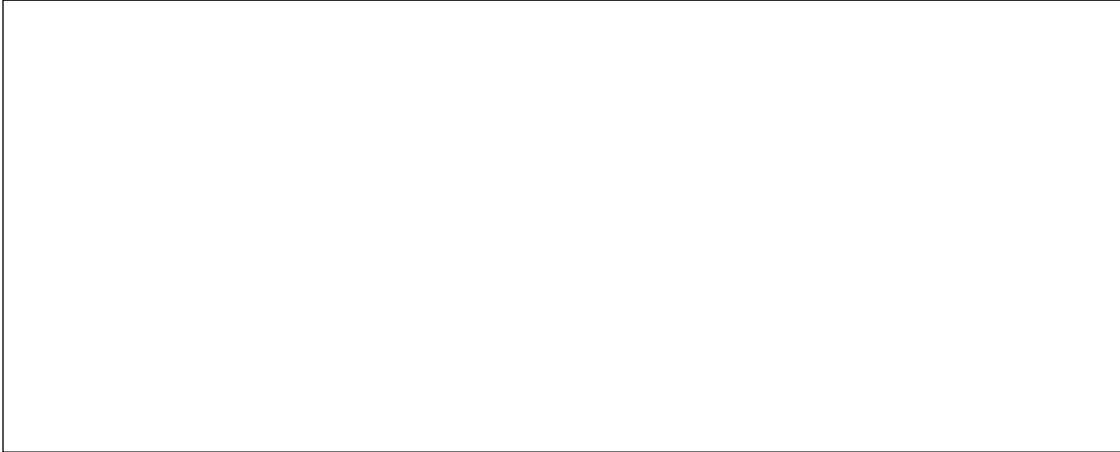
3. Describe your organization's experience in effectively utilizing MSHDA funds and other public funding, including satisfactory and timely submissions of financial status reports (FSRs) timely resolution of monitoring findings, and timely submission of required reporting on existing grants.

Project Design

4. Describe your organization's proposed use of MSHDA ESG funds and detail the specific services to be provided. Lists objectives, outcomes, and performance indicators that are objective, measurable, trackable, and meet or exceed any established MSHDA or CoC benchmarks.

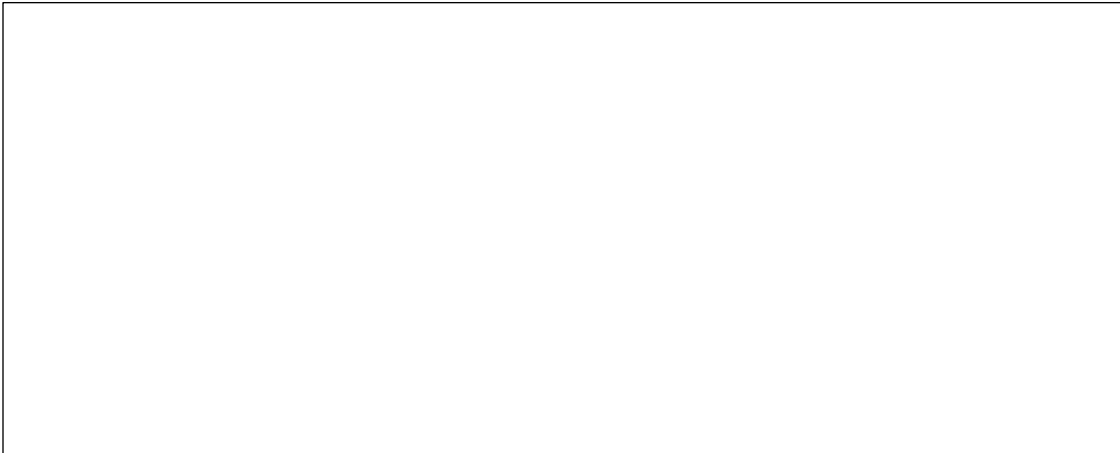
5. Describe your organization's plan to assist program participants to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.

6. Describe how your organization will link program participants with mainstream benefits in our community to maximize their ability to live independently.



Equity Factors


7. Describe roles, responsibilities, and types of involvement for persons with lived experiences within your organization's activities.



8. Describe your organization's process for receiving and incorporating feedback from program participants.



9. Describe your organization's process for reviewing internal policies and procedures with an equity lens and developing and implementing equitable policies that do not impose undue barriers that exacerbate disparities and outcomes.



Other Local Criteria

10. Describe the capacity of your organization to begin this project immediately and ensure that all grant funds are spent by the end of the term.



11. Is your organization currently utilizing or willing to utilize HMIS?

YES NO

12. Is your organization currently utilizing or willing to utilize the Coordinated Entry System?

YES NO

13. Does your organization currently participate or is willing to participate in the annual Point-in-Time (PIT) count?

YES NO

14. Is your organization is an active member of the CoC?

YES NO