

**Appendix A**  
**HB 5019-RRH Notice of Funding Opportunity**  
**Application**

**Applicant Name/Organization** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_ **Website** \_\_\_\_\_

**Email** \_\_\_\_\_ **Taxpayer ID Number** \_\_\_\_\_

**Business Designation:**  Non-profit     Community Based Organization     Government

**Application Questions:**

(Responses are not limited to the space provided. Please feel free to attach additional pages to your application as needed. Labelling any attachments with the question numbers they refer to is greatly appreciated.)

**1. Please identify the Service Components you organization is proposing:**

**Street Outreach:** Outreach to people experiencing homelessness in locations where structured connections to services do not currently exist, with a focus on building relationships and service engagement through person-centered, trauma-informed and strengths-based practices. Services include completing coordinated entry assessments, linking people with services to promote connections to stable housing, and connecting people to the FHSP system of care. Funded services may also include:

- Providing services and supplies to meet basic needs, such as food support, hygiene services, restrooms, survival gear, storage, etc.
- Providing connections to safety-off-the-street services, such as emergency shelter, motel vouchers, day centers, safety planning, peer support, and crisis lines.
- Behavioral health and addiction recovery outreach, and culturally specific outreach services.
- Emergency on-call services in the event of severe weather, natural disasters, public health, or other emergencies. May include outreach, information sharing, distribution of basic needs supplies, transportation, and service connections.
- Other:

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**Case Management and Wrap Around Supports:** The FHSP will have participants navigating out of unsheltered homelessness to living in a variety of housing settings, including, but not limited to scattered-site settings, project-based settings, and residential facility settings, using FHSP funded rent subsidies or a federal voucher. Flexible and person-centered case management that provides ongoing wraparound supports before, during, and after housing placement is an essential component of the FHSP and will be delivered in close coordination and collaboration with the entire system of care.

Case management supports in the FHSP help to meet the housing stability needs of FHSP participants and are expected to align with other Service Components of the FHSP provided by multiple organizations. Funded Case Management activities may include:

**Health services:** Community-based (on-site and off-site) mental health services, addiction and recovery supports, community health workers, peer support services, strategies that support harm reduction, health care navigation, wellness programs, assistance applying for medical benefits, nonclinical behavioral health supports, behavioral health outreach services, crisis intervention, pregnant and parenting support services, and support with navigating the behavioral health system and accessing clinical services as needed. (Clinical services that can be funded through Medicaid will not be funded through this NOFO, but support to assist clients to access those services will be funded.)

**Peer support services:** Support specialists that use the therapeutic value of lived experience to provide support for individuals with substance use or mental health issues. Peer support specialists are often from the communities with which they work, creating systems of support which are relevant to the community, trauma informed, culturally specific and culturally responsive.

**Education, training, and employment services:** Services aimed at increasing incomes by providing access to education, training and public and private workforce resources, with a focus on meeting the needs of individuals who face barriers to employment and/or are experiencing barriers to employability.

**Benefits navigation and legal services:** Assistance with accessing benefits such as Supplemental Security Income, Social Security Disability Income, Medicaid/Medicare benefits and Veterans benefits. Assistance with accessing or providing civil legal services that facilitate housing access and stability, including assistance to enforce tenants' rights, expungement rights, and rights guaranteed under civil rights laws.

**Other:**

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2. The HB 5019-RRH Initiative as implemented through the FHSP relies on a structure of strong partnership and coordination within Benton County’s entire system of care serving people experiencing and at risk of homelessness. This coordination is crucial to reduce barriers and streamline pathways to housing for people experiencing unsheltered homelessness.

a. Explain how your current or proposed delivery of services will coordinate among partners within this system of care.

b. What partnerships do you already have?

c. How do these partnerships support your proposed and/or current service component and delivery in successfully rehousing people experiencing unsheltered homelessness?

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3. The goal of the HB 5019-RRH Initiative as coordinated by the FHSP is to **rehouse 31 households** experiencing unsheltered homelessness by **June 30, 2025**. Explain how your proposed service component and delivery will contribute to achieving this goal?

a. How does your organization propose to support households navigating out of unsheltered homelessness and/or support them in long-term stable housing?

b. How will this support be responsive to a range of support needs presented by participants of the FHSP?

c. What is the expected response time for regular communication between your organization, FHSP participants, and its partners?

d. What is your organization's approach and expected response time to a crisis that could jeopardize the housing stability of FHSP participants?

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4. Local data gathered during the development of the HB 5019 Homeless Response Plan shows an overrepresentation of certain subpopulations in Benton County’s sheltered and unsheltered populations experiencing homelessness who encounter inequitable access to housing due to overwhelming barriers. These overrepresented groups include people who are Black and/or Native American/Alaskan Native, Indigenous, or Tribal affiliated; families with children; and people with high and complex needs that may be behavioral and/or physical. In addition to reducing barriers for these overrepresented populations, Benton County and the Coordinated Homeless Response Office prioritize equity, diversity, and inclusion as fundamental principles to support equitable access to shelter and housing.

- Please describe how your organization’s proposed Service Component will reduce barriers to accessing housing for the HB 5019 RRH Initiative priority populations and other marginalized communities disproportionately impacted by housing instability and homelessness.

- What experience does your organization have in providing culturally specific and responsive services?

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5. Recipients of the HB 5019 RRH Initiative funding will be required to ensure that data collection and reporting be conducted through the use of data systems approved by Benton County or its partnering agencies. This data collection and reporting may include personally identifiable information. These systems include HMIS and/or HMIS comparable systems for Victim Service Providers.
- Please describe your organization’s experience using these systems, and any additional technical assistance that would be needed to support your organization’s utilization of these systems.

6. Is there anything else you would like us to know about your organization and your current and or proposed service component and delivery?

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**CERTIFICATION**

To the best of my knowledge and belief, all information on this application is complete, true, and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the proposal is awarded funding.

\_\_\_\_\_  
Agency Director

\_\_\_\_\_  
Board Chair, President, or Other Authorized Official

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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