



## 2024-2025 City of Denton Street Outreach Grant Application

### Application Overview

#### Street Outreach Grant

**The City has prioritized investment in the Housing Crisis Response System (HCRS) as a collaborative and coordinated system response to address homelessness in our community. The HCRS is designed to achieve the community's shared goal of Making Homelessness Rare, Brief, and Nonrecurring. The HCRS is built on a continuum of services working together to meet the diverse set of needs in our community.**

**Through local outreach experience, review of research on best practice, and learning from other communities about evidence-based strategies, increased outreach has been identified as an effective tool associated with successful housing outcomes and connection to supportive services, such as behavioral health treatment.**

**Street Outreach (SO) is a vital program in the HCRS continuum of services and in the City's response to unsheltered homelessness. Street Outreach provides services to unhoused people through information and referrals, using diversion problem-solving skills to resolve homelessness quickly when possible, and connecting to the Coordinated Entry assessment for placement in a supportive housing program when openings become available.**

**The City's approach to Street Outreach is a cross sector collaboration of internal City departments, the Denton Police Department's (DPD) Homeless Outreach Team, and nonprofit agencies. This collaborative approach identifies unhoused individuals and families living in a place not meant for habitation and uses trauma-informed care to build rapport and increase access to temporary shelter, permanent housing, and other supportive services, specifically behavioral health treatment.**

**The \$125,450 grant funds provided annually, over a two year period, supports a multidisciplinary outreach team approach. Specifically, having a dedicated non-profit agency coordinating with DPD's Homeless Outreach Team and Community Services Homeless Programs Manager to reach unhoused people and connect them to shelter, behavioral health treatment, and/or permanent housing.**

**This grant may be used for qualified salaries and/or in support of services addressing housing barriers (critical documents, emergency medication or medical treatment, etc.), behavioral health (mental health and substance use) treatment, and financial costs that support diversion. Grant applicants are encouraged to propose a project and detail how it could meet the needs for street outreach in Denton. All organizations interested in meeting this need and applying for the Street Outreach**

**grant must submit a grant application to Community Development.**

- **All application information and additional requested information must be submitted to Community Development on or before the deadline of June 30, 2024 by 11:59 p.m. Agency must be available for a brief presentation to the Community Services Advisory Committee Friday, July 12th at 12:00pm.**

- **No late applications will be accepted**

**For questions regarding the application contact:**

**Megan Ball  
Homeless Programs Manager  
(940) 349-7234  
Megan.Ball@CityofDenton.com**



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**Applicants must be eligible and be able to comply with program limitations as described below.**

#### **AGENCY ELIGIBILITY**

- **Agency must be a 501(c)3 in operation for more than two years and providing services to people/households experiencing homelessness.**
- **Agency must be willing to have, or hire, staff trained and experienced in addressing housing barriers, referrals to behavioral health treatment, data collection and entry, and using a trauma informed outreach approach. Agency should be able to provide documentation of training and qualifications.**
- **Agency must be currently using HMIS and actively participating in Denton's Coordinated Entry process including participating in Monthly Case Conferencing.**

#### **PROGRAM LIMITS & REQUIREMENTS**

- **Maximum request is \$125,450 annually.**
- **Funding term is October 1, 2024 through September 30, 2026 available for reapplication bi-annually, contingent upon Council annual budget approval.**
- **Grant funds will be provided as reimbursement to grant recipients after expenses have been incurred.**
- **Status of homelessness living unsheltered must be verified and documented in HMIS.**
- **Funds may only be used for qualified salaries and/or in support of street outreach for addressing housing barriers (critical documents, emergency medication or medical treatment, etc.), behavioral health treatment (mental health and substance use), and financial costs that support diversion.**
- **Clients served through the program MUST be enrolled in the HMIS and CE.**



## 2024-2025 City of Denton Street Outreach Grant Application

### Application Contents

#### Street Outreach Grant

##### Section 1: General Information

- Fill in each listed item

##### Section 2: Project Information

- Fill in project name
- Provide a detailed description of the project to meet the identified needs

##### Section 3: Performance Measures (30 points total)

Provide anticipated performance outcomes and an explanation for achieving the outcomes for the six performance measures (0-5 points for each measure) that will be used to assess whether the project or program is successful.

##### Section 4: Financial Management (10 points total)

###### Income/Revenue

- State amount of funds requested for the project up to maximum grant amount
- List additional funding sources, including any Federal, State or Local funds that will also support the proposed project

###### Expenditures

- List expenditures for each category

###### Project Management

- Describe the organization's experience in managing and operating projects or activities funded with other Federal, State, Local funds. (0-5 points)
- Please provide the names and qualifications of the person(s) that will be primarily responsible for the implementation of the proposed project. Include experience/education/certifications of relevant staff. (0-5 points)

###### Attach Agency's YTD Profit and Loss Statement

##### Section 5: Timeline (5 points total)

Provide a project schedule that specifically details how the organization plans to accomplish the proposed project/plan, including a timeline and how funds would be expended by September 30, 2025. (0-5 points)

**Section 6: Project Narratives (25 points total)**

**Provide a brief narrative in response to each of the items listed below. Please use no more than 200 words per item.**

- 1. Discuss how this project directly benefits those who experience homelessness; living unsheltered or in places not meant for human habitation. (0-5 points)**
- 2. Describe how the proposed project involves community collaboration. (0-5 points)**
- 3. Briefly describe your program's approach and plan to working with clients to address and eliminate housing barriers. (0-5 points)**
- 4. Describe how the organization plans to continue the project/work after the General Fund dollars are expended. (0-5 points)**
- 5. Has your organization ever had unexpended or recaptured funds from grants awarded (examples: local grant funding awards not fully expended, state/federal grant funds recaptured)? Explain.(0-5 points)**

**Total Points: 70 points**



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**Section 1: General Information**

\* 1. Organization Information

**Legal Agency Name**

**Doing Business As (DBA)**

**Organization Address**

**City**

**State**

**Postal Code**

**Main Phone Number**

**Organization EIN/Tax ID Number**

\* 2. CEO or Executive Director Contact Information

**CEO First Name**

**CEO Last Name**

**CEO Direct Phone Number**

**CEO Email Address**

\* 3. Primary Contact for Application

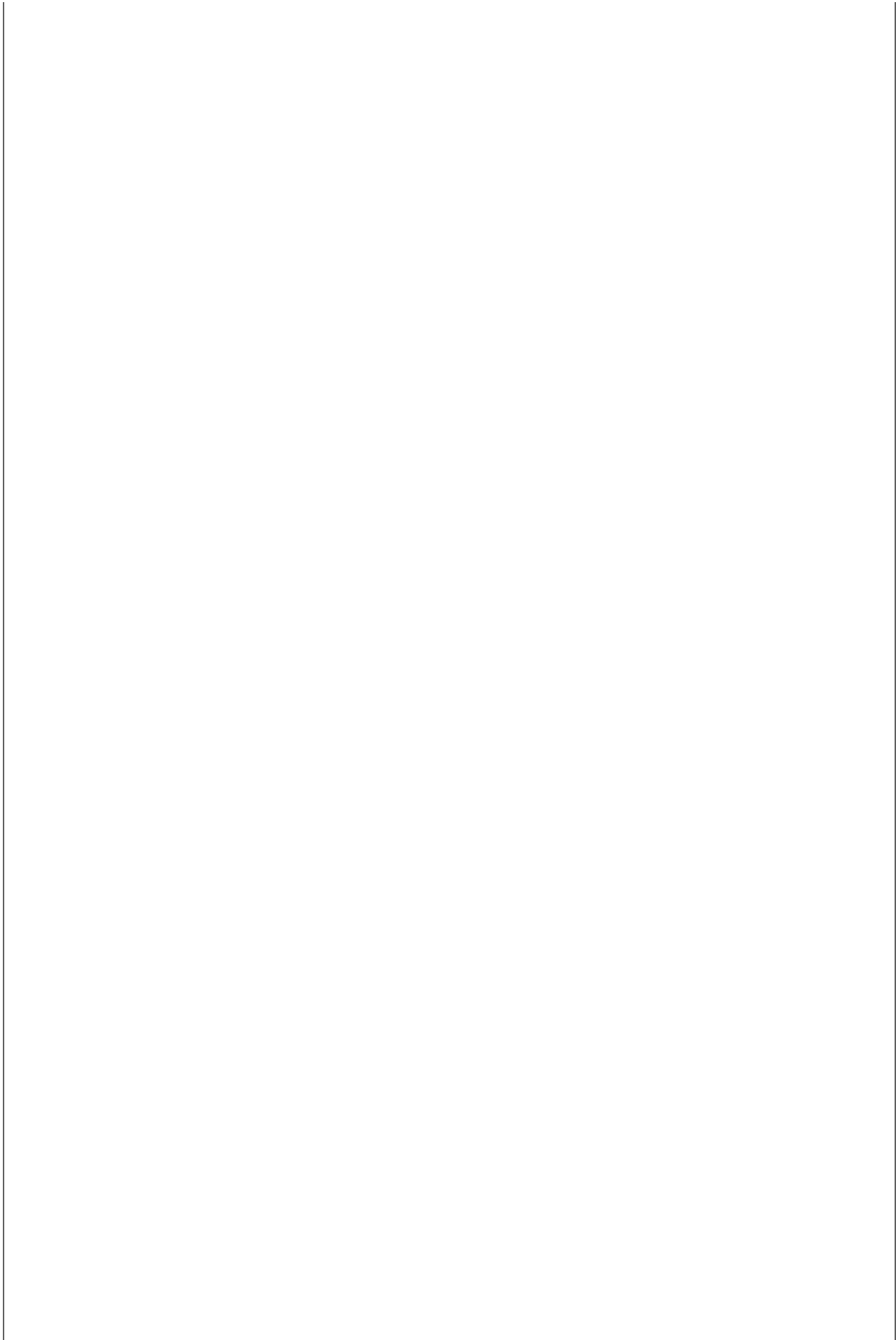
**Primary Contact First Name**

**Primary Contact Last Name**

**Primary Contact Phone Number**

**Primary Contact Email Address**

**Primary Contact Job Title**





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**Section 2: Project Information**

\* 4. Name of Project

\* 5. Project Funds (\$) Requested \*Must not exceed \$125,450

\* 6. Project Description: (needs, location, partnerships, expected results, and benefits to the community/city at-large)

\* 7. Does your organization currently have staff with HMIS License(s) for Denton County's HMIS database?

Yes

No

8. If you answered 'yes' to Question 7, how many staff members who would be working on the Street Outreach program have HMIS licenses?



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**Section 3: Performance Measures**

**9. Performance Measures**

Anticipated number of outreach visits to unsheltered locations (monthly).

Explanation

Anticipated number of people assessed through Coordinated Entry (monthly).

Explanation

Anticipated number of people exiting Street Outreach program to temporary housing (annually).

Explanation

Anticipated number of people exiting Street Outreach program to permanent housing (annually).

Explanation

Anticipated number of people assisted with Diversion (annually).

Explanation

Anticipated number of people assisted with behavioral health treatment (mental health and substance use) (annually).

Explanation



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**Section 4: Financial Management**

**\* 10. Income/Revenue**

Amount of funds requested for the project up to maximum grant amount

Additional funding source (Federal, State or Local funds used to support the project)

Additional funding source (Federal, State or Local funds used to support the project)

Additional funding source (Federal, State or Local funds used to support the project)

\* 11. EXPENDITURES: List expenditures for each category. ('Other' categories not required, if including 'Other', please be specific)

Salaries (Number of staff/\$)

Mental Health Treatment Costs (Item/\$)

Substance Use Treatment Costs (Item/\$)

Diversion costs (minimum \$20,000) (Item(s)/\$)

Other Street Outreach/Housing Barriers Costs (Item(s)/\$)

Other Street Outreach/Housing Barriers Costs (Item(s)/\$)

Total Expenditures

12. EXPENDITURES: List the salary amount for each staff salary that will be supported by the grant.

\* 13. Project Management: Describe the organization's experience in managing and operating projects or activities funded with other Federal, State, Local funds.

14. Project Management: Please provide the names and qualifications of the person(s) that will be primarily responsible for the implementation and administration of the proposed project. Include experience/education/certifications of relevant staff.

\* 15. YTD Profit and Loss Statement

Please upload a copy of the agency's YTD Profit and Loss Statement

No file chosen



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**Section 5: Timeline**

**Provide a project schedule that specifically details how the organization plans to accomplish the proposed project/plan, including a timeline and how funds would be expended by September 30, 2025.**

\* 16. Project Schedule



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**Section 6: Project Narratives**

**Provide a brief narrative in response to each of the items listed below. Please use no more than 200 words per item.**

\* 17. Discuss how this project directly benefits those who experience homelessness; living unsheltered or in places not meant for human habitation.

\* 18. How does the proposed project involve community collaboration? Please include the City of Denton and any agencies your organization plans to collaborate with and the service(s) the partnering agency would provide.

\* 19. Describe your program's approach and plan to working with clients to address and eliminate housing barriers.

\* 20. Describe if and how the organization would plan to continue the project/work after the General Fund dollars are expended.

21. Has your organization ever had unexpended or recaptured funds from grants awarded (examples: local grant funding awards not fully expended, state/federal grant funds recaptured)? Explain.(0-5 points)