

Frequently Asked Questions

General Topics:

Why is it necessary for Grant and Per Diem (GPD) Providers to apply for this NOFA?

Funding for currently operational grants will end on September 30, 2017. During the past few years, many communities have greatly expanded their ability to house homeless veterans. Additional resources and programs have been added, and permanent housing has become more available in many areas. Some GPD projects were funded many years ago, and may be providing services that are out of date, or duplicative of other community resources. This provides an opportunity for GPD providers to update or re-envision their programs, to work alongside other VA and community resources in a more flexible way.

Can anyone apply for this funding?

No. Applicants must be current operational GPD providers.

I am a current GPD Provider and wish to add a Service Center to the program. Can I apply for additional funds?

No. This NOFA allows for only currently operational Service Centers to apply for the Service Center model.

Does geography play a role in which projects get funded?

Ideally, the National GPD Office seeks to have fair geographical dispersion of all of the five housing models at every medical center which currently supports GPD, based upon need, the number of providers and beds, and the willingness of the providers to apply for the various models.

I am a current GPD Provider and wish to increase program beds. Can I do this?

No. This NOFA allows for providers to apply for the number of beds which they currently have, as a maximum.

Can I write an application for fewer beds?

Yes. Applicants can elect to apply for fewer beds than they currently have.

Will there be partial awards in the event that not all of the beds in an application can be funded?

This can be considered on a case-by-case basis, if the provider is conditionally selected.

If my agency's application is not selected in this NOFA, what will happen to the veterans?

If your agency applies and is not selected, in the interest of transitioning Veterans remaining in those non-selected programs, the current grants will be terminated no later than December 31, 2017. It is encouraged that non-selected applicants will continue their mission to serve veterans

using other funding sources. If this is not possible, non-selected applicants are strongly encouraged to work with their local VA staff for appropriate discharge planning.

Does my agency have to come up with new goals and objectives for this grant?

No. To ensure that goals are measurable and targeted to the population served, the VA has outlined performance metrics for the various models in the NOFA.

Will past performance and utilization of beds figure into who will get these grants?

Yes, this is a competitive process. Applicants should highlight their successes in the application. Applicants should be aware VA may use historical program documents of past performance both VA and non-VA when scoring (38 CFR 61.13(f)).

Are there any GPDs that are exempt from having to apply for this NOFA?

Yes. Current providers of Transition in Place and Special Needs grants do not have to apply. These grant awards are time-limited and are covered under separate NOFAs.

If my agency gets funded through this NOFA, how long will funding be provided?

This funding is for one year. VA has the option to renew for two additional periods, based upon the availability of funds in future years and performance. Grantees *will not* have to re-submit an application for each option year.

If funding is for one year, how are veterans going to stay for 2 years?

There is no requirement for veterans to remain in GPD for two years. In fact, the average length of stay in GPD is about 6 months. GPD providers are expected to transition Veterans into permanent housing expediently by keeping on task with life plan or treatment plan goals. If funding is not renewed from one year to the next, there would be a transition period, ending on December 31.

My agency operates multiple GPD sites. Can I change sites under this NOFA?

Capital grantees, as well as recipients of the 2013 Rehabilitation Grants, must use the site for which they received their original grant. Other grantees, which have Per Diem Only awards, have options to move to new locations which must be specified in the grant application. The housing is expected to be similar or better quality than what is currently provided.

Will the project numbers change?

Yes, awardees will receive new project numbers and Per Diem Activation letters from the VHA National Grant Per Diem Office.

I currently have multiple projects from different years. Do I have to write more than one application?

No, projects can be combined into one application (refer to the NOFA for details). However, different models will require separate applications.

Will there be an opportunity to apply for additional funds?

This NOFA only provides funding for per diem payments for a period of one year with two (2) year options for current operational GPD projects. There are no additional funds available for capital development or expansion of GPD transitional housing or service center through non-capital (Per Diem Only) awards.

How does it work if my GPD facility services two different medical centers?

Providers currently servicing more than one medical center will have to write a separate application for each one. The number of beds cannot exceed the total number of beds designated to each medical center currently.

Does my local VA Medical Center have to agree with my application?

Applications will be scored nationally by a team from outside of the applicant's local area. There is a requirement in the application to demonstrate coordination with the local Medical Center. This is especially true with the Hospital to Home (Respite) Model, which requires a Memorandum of Understanding in which the medical center would be providing follow-up care post hospitalization for homeless Veterans in these programs. Applicants must also demonstrate coordination with local Continuums of Care or other community entities who serve the homeless.

Can the GPD Liaison assist with the application?

No. This is not allowed. However, the Liaison can provide Performance Measure data and help obtain a Letter of Support from the local Medical Center Director.

Housing Models:

Does my transitional housing application have to fall into one of the five models described in the Notice of Funding Availability? (Bridge Housing, Low Demand, Hospital to Housing, Clinical Treatment, Service-Intensive Transitional)

Yes. Programs will complete a separate application for each model that they wish to offer, with the total amount of beds not exceeding the current number of beds assigned to that program/medical center.

Can my project agency obtain funding for more than one model?

Yes, multiple awards to the same provider are possible. Separate applications must be written for each model being proposed by the applicant.

Do any of these models take priority over the others?

Yes. VA will prioritize for funding one application for each of the following models: Bridge Housing, Low Demand, Clinical Treatment and Respite Care (Hospital to Housing) at each VA medical center that has a GPD project. The highest scoring application for each of the four selected models, at each VA medical center that are legally fundable will be conditionally selected for funding first. VA will then continue to conditionally select applications from the

remaining applications in their ranked order until funding is no longer available or the number of beds has been reached, whichever comes first.

If a provider applies for one of the priority models, are they guaranteed funding?

No, this is a competitive process. The highest scoring application for each model within a medical center catchment area will be funded. The rest will be rolled into the second-tier funding opportunity. Applications must score at least 750 out of 1000 points to be funded.

What if my GPD only provides Service Intensive Transitional?

Service Intensive Transitional applications will be reviewed as a second-tier after the priority models have been funded.

If I provide a total of 30 beds, and want to offer 10 Clinical Treatment, 10 Bridge Housing and 10 Service Intensive, do I have to write three grants?

Yes. Separate applications will be required. This allows providers to re-design and commit resources to specific programs within GPD.

Will the per diem be higher for the priority models?

No. Per Diem payments are set by law according to the state home domiciliary bed rate, the maximum rate, currently at \$45.79.

What if I commit beds to a particular model but then can't fill them?

The terms of this grant allow providers to be able to "flex" up to five beds or 15% of the beds (whichever is greater) toward a different model. For example, if a provider was granted 10 Bridge Housing beds, and could not fill them all, the provider could use up to five of those beds for another model, for which they applied and were funded. If a provider was granted 100 Service-Intensive Transitional beds, the provider could flex 15% toward another model, for which they applied and were funded.

What does a low barrier approach entail?

In a low barrier approach, a veteran would be able to enter GPD expediently and without a long assessment process or period of sobriety. Providers are expected to help Veterans access services quickly and in a manner that is flexible and understanding of their needs. It means that providers are willing to work with veterans who relapse, without immediate discharge from the program. With this NOFA, a low barrier approach to housing is expected for all applicants. This is not to be confused with the Low Demand Model, outlined in the NOFA.

Does low barrier mean that I can't discharge someone for drinking or using street drugs?

It means that providers should be able to provide safe space for Veterans who are vulnerable and to work with relapse issues with veterans in a manner that preserves the safety of others in the program. When discharge is necessary, appropriate arrangements should be made to minimize the chance of re-creating homelessness for that individual.

Capital Grants:

I am a current provider with a capital grant. What if I don't want to apply for this NOFA?

By law, the VA must initiate recapture and real-property disposition requirements (38 CFR 61.67; 2 CFR 200.311). Capital grantees have business obligations to the federal government that Per Diem Only grantees do not have.

My GPD has a capital grant. What if I apply and don't get selected?

Non-selected applicants who are capital grantees may be granted a waiver which would absolve them of their recapture and real property disposition liabilities. Providers in this situation will receive individualized notification from the National GPD Office.

Application Process:

How will applications be scored?

Applications will be scored in accordance with current regulations, which can be found on the GPD Provider website. http://www1.va.gov/HOMELESS/GPD_ProviderWebsite.asp. Applications must score 750 out of 1000 points to be funded.

How soon will grantees hear back from the Department of Veterans Affairs on the status of their awards?

Applicants should be contacted during the third quarter of Fiscal Year 2017 after an official announcement is published and posted on the VA's Grant Per Diem webpage, www.va.gov/homeless/gpd.asp. Time frames are subject to change.

When is the grant application due?

The application must be received by the GPD Program Office by 4:00 PM Eastern Standard Time on April 4, 2017.

Who do I send this to?

VA Homeless Providers GPD Program
Department of Veterans Affairs
10770 N 46th Street, Suite C-200
Tampa, FL 33617