CONTRACT BETWEEN FULTON COUNTY, GEORGIA AND PARTNERS FOR H.O.M.E., INC.

THIS CONTRACT entered this __3rd____ day of __April__ 2025, is between FULTON COUNTY, a political subdivision of the state of Georgia ("Fulton County"), and Partners for H.O.M.E, INC. a Georgia Nonprofit Corporation ("Partners for H.O.M.E.")(each individually a "Party" and collectively referred to as the "Parties").

WHEREAS, pursuant to O.C.G.A. § 36-1-19.1, Fulton County is authorized and empowered under the laws of the State of Georgia to enter contracts for services with individuals, organizations, and institutions, for purely charitable reasons to include health, education, or social welfare purposes, provided that the activities funded by any such contributions shall take place within the county making the contribution; and

WHEREAS, Partners for H.O.M.E. is a Domestic Nonprofit Corporation established in 2014 that works to end homelessness by bringing together government, nonprofit, business and community stakeholders to make homelessness rare, brief and nonrecurring; and

WHEREAS, Partners for H.O.M.E. serves as the Collaborative Applicant for the City of Atlanta Continuum of Care ("CoC"), a HUD program that promotes community-wide commitment to the goal of ending homelessness and provides funding for efforts by nonprofit providers and state and local governments to quickly rehouse people impacted by homelessness; and

WHEREAS, the Fulton County Department of Community Development strengthens people, families, and communities through partnerships with various community organizations and outreach programs, particularly non-profit, private sector, government, volunteer, and citizen advocates; and

WHEREAS, on August 21, 2024, pursuant to Agenda Item 24-0529, the Fulton County Board of Commissioners approved a \$2,000,000.00 Youth Homelessness Systems Improvement Grant ("YHSI") from the U.S. Department of Housing and Urban Development ("HUD"); and

WHEREAS, the HUD YHSI grant to Fulton County will support Fulton County's efforts to establish and implement a youth homelessness response system; and

WHEREAS, the HUD YHSI grant to Fulton County will focus on systemic change by funding projects that create and build capacity for Youth Action Boards; collect and use data on at-risk youth and youth experiencing homelessness; develop strong leaders within the local community; and improve the coordination, communication, operation, and administration of homeless assistance projects with specific community-based partners to better serve youth, including prevention and diversion strategies; and

WHEREAS, the HUD YHSI grant to Fulton County is designed to make and improve connections, coordination, and information-sharing within and between systems that serve at-risk youth, including education, child welfare, and juvenile justice; and

WHEREAS, as part of Fulton County's application for the HUD YHSI grant, Fulton

County identified specific community-based partners for the funding, including Partners for H.O.M.E., to help improve equity in youth homeless response systems and better address the social welfare needs of homeless youth; and

WHEREAS, in its application for the HUD YHSI grant, Fulton County specifically identified Partners for H.O.M.E. as a community partner that will establish community-based alliances among homeless youth service providers, including government agencies, through the creation of one innovative Youth Service Providers Consortium (YSP), serving both the City of Atlanta and Fulton County CoCs, that will meet quarterly, share best practices, and participate in the YHSI program evaluation and equity analyses; and

WHEREAS, Partners for H.O.M.E. guarantees, by and through this Contract, that it shall expend the funds under this Contract for services provided to individuals in Fulton County that are consistent with its mission and deriving no profit to the organization, and on activities within Fulton County consistent with the Contract provisions outlined in Section 1.0 and Attachment "A," Scope of Work, hereunder.

NOW, THEREFORE, in consideration of the mutual covenants contained herein, and for other good and valuable consideration, the parties hereunto agree as follows:

1.0 STATEMENT OF WORK

Fulton County shall provide financial assistance in an amount not to exceed \$517,314.24 to Partners for H.O.M.E. to help provide operational resources for certain programs and service-related activities as outlined in the Youth Homeless Systems Improvement Grant in Fulton County as further described in Attachment "A", Scope of Work.

2.0 COMPENSATION FOR SERVICES AND WORK

Funding for the services and work described in Section 1.0 herein, and in Attachment "A," Scope of Work, shall be as follows: The total amount payable to Partners for H.O.M.E. per the terms and execution of this Contract is not to exceed Five Hundred Seventeen Thousand Three Hundred Fourteen Dollars and Twenty-Four Cents (\$517,314.24). Such payment shall be made as invoiced by Partners for H.O.M.E. Invoices shall include documentation supporting the services performed as outlined in Attachment "A", Scope of Work.

3.0 TERM OF CONTRACT

Unless terminated by mutual agreement, or in accordance with other terms and provisions contained herein, the term of this Contract shall be thirty (30) months beginning on **October 1**, **2024** through **March 31**, **2027** unless otherwise terminated first by Fulton County. Partners for H.O.M.E. shall utilize Fulton County's funding only for services which are included within the scope of Sections 1.0 and 2.0 and Attachment "A", Scope of Work, of this Contract.

4.0 INDEPENDENT CONTRACTOR

The relationship of Partners for H.O.M.E. to Fulton County is that of an independent contractor and not of an employee/employer. Neither this Contract, nor any activities described herein, shall be construed as creating a partnership, joint venture, franchise, agency, or other such relationship, and neither Party shall have the right, power, or authority to obligate or bind the other Party in any manner whatsoever, without the other Party's prior written consent. It is expressly understood

that any individual performing services under this Contract on behalf of Partners for H.O.M.E. shall not be deemed to be an employee or independent contractor of Fulton County, and such individual shall not be entitled to tax withholding, workers' compensation, unemployment compensation or any employee benefits, statutory or otherwise, from Fulton County. Partners for H.O.M.E. agrees that it is solely responsible for the reporting and payment of income, Social Security and other employment taxes due to the proper taxing authorities with respect to such personnel.

5.0 SUBRECIPIENT REQUIREMENTS

The Parties agree that Fulton County is providing these funds to Partners for H.O.M.E., with Partners for H.O.M.E. having the obligation to comply with all applicable requirements where it is deemed a subrecipient, as subrecipient is defined in 2 CFR § 200.1, Definitions, including any federal reporting requirements that may apply, and 2 CFR § 200.331 (a). In addition, the Parties state that this subaward complies with 2 CFR § 200.332 by providing the information set forth in Attachment "B" of this Contract.

Partners for H.O.M.E. further acknowledges that it has reviewed the terms and conditions of the Department of Housing and Urban Development (HUD) grant funding for this project and will carry out all program activities and expenditures in accordance with those terms and conditions, in the manner provided by law. Partners for H.O.M.E. will comply with all applicable federal, state and local laws and regulations governing the receipt or use of the federal funding provided under this Contract, including but not limited to current and future rules and regulations issued by HUD or other federal agencies.

6.0 IMPROPER EXPENDITURES

Any item of expenditure by Partners for H.O.M.E. under the terms of this Contract which is found by auditors, investigators, and other authorized representatives of Fulton County to be improper, unallowable, in violation of federal or state law or the terms of this Contract, or involving any fraudulent, deceptive, or misleading representations or activities of Partners for H.O.M.E., shall become Partners for H.O.M.E.'s liability, to be paid by Partners for H.O.M.E. from funds other than those provided by Fulton County under this Contract.

7.0 INSURANCE

Partners for H.O.M.E. shall provide and maintain liability insurance, in accordance with the required amounts set forth in Attachment "B", appended hereto and incorporated by reference, covering its employees, agents or contractors for the term of this Contract. Partners for H.O.M.E. agrees to obtain, maintain, and furnish to Fulton County a Certificate of Insurance ("COI") showing the required coverage during the entire term of this Contract with Fulton County, Georgia added as an "Additional Insured". The cancellation of any policy of insurance required by this Contract shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

8.0 TERMINATION OF CONTRACT

8.1 TERMINATION OF CONTRACT FOR CAUSE

Either Fulton County or Partners for H.O.M.E. may terminate this Contract in the event the other party fails to perform in a timely and proper manner its obligations in accordance with the provisions of the Contract. Any party seeking to terminate this Contract is required to give thirty

(30) days prior written notice to the other party specifying the reasons for such intention to terminate or suspend the Contract. The party receiving such notice under this provision shall have thirty (30) days after receipt of service of the notice to correct the violation. If performance is not made, the Contract shall, upon expiration of said thirty (30) days from the date notice is delivered, be suspended, or terminated without further notice. Notice of termination shall be delivered by hand delivery, certified mail with receipt for delivery returned to the sender, or delivery by a nationally recognized overnight delivery service.

8.2 TERMINATION FOR CONVENIENCE OF FULTON COUNTY

Notwithstanding any other provisions, Fulton County may terminate this Contract for its convenience at any time by giving at least thirty (30) days prior notice in writing (hand delivery or certified mail with receipt) to Partners for H.O.M.E.

9.0 NOTICES

For purposes of this Contract, any notices required to be sent to the Parties shall be delivered by hand delivery, certified mail with receipt for delivery returned to the sender, or delivery by a nationally recognized overnight delivery service to the addresses provided below:

To Fulton County:

Fulton County Community Development Department 137 Peachtree Street Atlanta, Georgia 30303

Copy to:

Office of the County Manager 141 Pryor Street, Suite 10062 Atlanta, Georgia 30303

Office of the County Attorney 141 Pryor Street, Suite 4038 Atlanta, Georgia 30303

To Partners for H.O.M.E.: 818 Pollard Blvd., 3rd Floor

Atlanta, Georgia 30303

10.0 RECORDS, REPORTS AND AUDITS

Partners for H.O.M.E. shall maintain accounts and records, including personal property and financial records, adequate to identify and account for all costs pertaining to this Contract and such other records as may be requested by Fulton County to assure proper accounting for all funds, both public and private. Said records shall be made available for audit purposes to Fulton County or its representative(s) and shall be retained for at least three (3) years after expiration of this Contract or completion of the program unless permission to destroy them is granted by Fulton County. Partners for H.O.M.E.'s records and accounts shall at all times meet or exceed the applicable requirements of Federal, State and County laws, rules, and regulations.

11.0 INSPECTION OF FILES AND RECORDS

Fulton County shall at all reasonable times have access to the pertinent offices and books and records of Partners for H.O.M.E. for inspection of the activities performed and expenses incurred under this Contract.

12.0 PUBLICITY

Any favorable publicity given to the services provided in Attachment "A" following the execution of this Contract must identify Fulton County prominently as a sponsoring agency. Specifically, in all publications referencing the services funded under this Contract, Partners for H.O.M.E. agrees to display and make known that the services were assisted under the auspices of Fulton County.

13.0 ASSIGNMENT OF CONTRACT

Partners for H.O.M.E. shall not make any purported assignment of this Contract, any part thereof, or the funds, or delegate the duties herewith without prior written consent of Fulton County.

14.0 CONFLICT OF INTEREST

No member, officer, or employee of Fulton County or its designee or agents, no member of the governing body of Fulton County, and no other official of Fulton County who exercises or has exercised any functions or responsibilities with respect to Fulton County-assisted activities or who are in a position to participate in a decision-making process or gain inside information with regard to such activities covered by this Contract, may obtain a personal or financial interest or benefit in any contract, subcontract with respect thereto, or the proceeds thereunder, either for themselves or for those with whom they have family or business ties, during their tenure or for one (1) year thereafter.

15.0 HOLD HARMLESS/INDEMNIFICATION

Partners for H.O.M.E. hereby warrants, represents, covenants and agrees to indemnify and save and hold harmless Fulton County, its commissioners, officers, and employees, from any and all claims, losses, liabilities, damages, deficiencies or costs (including without limitation, reasonable attorney's fees and legal expenses) suffered or incurred by, or asserted against, such parties, whether arising in tort, contract, strict liability or otherwise, and including without limitation, personal injury, wrongful death or property damage, arising in any way from the actions or omissions of Partners for H.O.M.E., its agents, employees, officers and directors. Partners for H.O.M.E. does further hereby agree to release, indemnify, defend, and hold harmless Fulton County, its commissioners, officers, and employees, from any injury (including death resulting therefrom), loss, claim or damage sustained by Partners for H.O.M.E. agents and employees, without regard to negligence. The language of this indemnification clause shall survive the termination of this Contract.

16.0 VARIATIONS OR MODIFICATIONS TO CONTRACT

This Contract constitutes the entire arrangement between Fulton County and Partners for H.O.M.E., and there are no further written or oral contracts with respect thereto. No variation or modification of this Contract and no waiver of its provisions shall be valid unless in writing, approved by the Board of Commissioners, and signed by Fulton County and Partners for H.O.M.E. duly authorized representatives. Further, in the event of any material change or modification in Partners for H.O.M.E. Contract or any contract with any other funding source during the course of

this Contract, Partners for H.O.M.E. shall immediately notify the Director of the Department of Community Development of such change. Nothing herein shall preclude Partners for H.O.M.E. from pursuing contracts with Fulton County for subsequent years, with the approval of additional funding by the Board of Commissioners.

17.0 NON-DISCRIMINATION AND EQUAL OPPORTUNITY: §576.57(a)

Partners for H.O.M.E. agrees to comply with non-discrimination requirements under the Civil Rights Acts, Regulations, and Executive Orders as follows:

- a. The requirements of Title VII of the Civil Rights Act of 1968, 42 U.S.C. 3601 et seq., and implementing regulations; Executive Order 11063 and implementing regulations at 24 CFR Part 107; and Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.) and implementing regulations issued at 24 CFR Part 1.
- b. The prohibition against discrimination on the basis of age under the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.) and the prohibitions against discrimination against handicapped individuals under Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.794).
- c. The requirements under the Non-Discrimination in Employment by Government Contractors and Subcontractors per Executive Order 11246 and the regulations issued under the Order at 41 CFR, Chapter 60.
- d. The Provision of Training, Employment, and Business Opportunities under Section 3 of the Housing and Urban Development Act of 1968, 12 U.S.C. 1701.
- e. The requirements of Executive Orders 11625, 12432, and 12138. Consistent with HUD's responsibilities under these orders, the Partners for H.O.M.E. shall make efforts to encourage the use of minority and women business enterprises in connection with activities funded under this agreement; and
- f. The requirements that the Partners for H.O.M.E. make known that use of the facilities and services are available to all persons regardless of age, race, creed, color, religion, sex, national origin, ancestry, marital status, affectional or sexual orientation, or handicap on a nondiscriminatory basis.

18.0 DEBARRED, SUSPENDED, OR INELIGIBLE CONTRACTORS

Partners for H.O.M.E. agrees to comply with the provisions of 24 CFR Part 4 relating to the employment, engagement of services, awarding of contracts, or funding of any contractors or subcontractors during any period of debarment, suspension, or placement in ineligibility status.

19.0 DRUG-FREE WORKPLACE CERTIFICATION

The signature of the Partners for H.O.M.E. designee on the agreement certifies that the Subrecipient will comply with the Drug-Free Workplace Act of 1988 by maintaining a workplace that is free from manufacture, distribution, dispensing, possession, or use of controlled substances.

20.0 CHANGES

Fulton County may, from time to time, require changes in the scope of services of the Partners for H.O.M.E. to be performed here under. Such changes, including any decrease or increase in the amount of the Subrecipient's compensation and scope of work, which are mutually agreed upon by and between Fulton County and the Subrecipient, shall be incorporated in written amendments to this Contract and approved by the Fulton County Board of Commissioners.

21.0 MONITORING AND INSPECTIONS

At any time during the normal business hours, and as often as Fulton County may deem necessary, there shall be made available to Fulton County or to the federal government for examination, all of the Partners for H.O.M.E. records with respect to all matters covered by this Agreement. Partners for H.O.M.E. will permit Fulton County and the Federal government to audit, examine, and make excerpts or transcripts. Monitoring will be at minimum, annually.

- The areas for monitoring and oversight include the following:
- Eligible Activities Requirements: Ensure funds are expended as originally planned and for eligible activities. Determine if costs are properly classified and if spending limits on certain activities have been properly adhered to. Ensure that the funded activities are provided at a reasonable cost.
- Financial Regulations: Ensure that financial regulations follow financial management requirements.
- Procurement and Audits: Ensure compliance with such requirements.
- Conflict of Interest, Environmental Compliance, and Other Federal Requirements: Ensure that compliance with these requirements.
- Physical site inspections of the activity locations to observe and ensure compliance.
- Review onsite files.
- Interview with staff.
- Review of job titles and job descriptions for all funded positions, ensuring that the disbursed Youth Homelessness Systems Improvement Grant (YHSI) funds are being utilized while fulfilling all program policy guidelines.
- Monitoring Process: Formal advance notification of the visit; coverage of the areas outlined; and clear conclusions and recommendations provided to the grantee following the visit.

22.0 HATCH ACT

Partners for H.O.M.E. agrees that no funds provided under this Agreement, nor any personnel employed in the administration of this Agreement, shall be in any way or to any extent engaged in the conduct of the political activities in contravention of Chapter 15 Title V, United States Code.

23.0 COMPLIANCE WITH FEDERAL REGULATIONS

Partners for H.O.M.E. agrees to comply with all Federal laws and regulations governing the grant of money under which this Agreement is made available as they apply as of the date of this Agreement, and as such laws and regulations may be amended by the federal government or agencies.

24.0 LOBBYING AND DISCLOSURE REQUIREMENTS

Partners for H.O.M.E. agrees to comply with the disclosure requirements and prohibitions of 42 U.S.C. 3537a and 3545 and 31 U.S.C. 1352 (The Byrd Amendment), and the implementing regulations of 24 CFR Parts 4 and 87.

25.0 GOVERNING LAW

This Contract shall be governed in all respects, as to validity, construction, capacity, and performance or otherwise, by the laws of the State of Georgia.

IN WITNESS WHEREOF, each party attests that the individual(s) executing the Contract on its behalf has both express and apparent authority to bind the respective entity to the terms and conditions of the Contract and has hereto caused the Contract to be executed and delivered on this, the __3rd__day of _April_______, 2025.

[SIGNATURES CONTAINED ON THE FOLLOWING PAGE]

(Signature) Abby brown (Signature) Name (Typed or Printed) Will Executive (Coordinator) Title test:
Alby Brownell Name Typed or Printed) Service Executive Coordinator Title
Alby Processes Name (Typed or Printed) Senity Executive Coordinatory Title
Name (Typed or Printed) Will Executive Convolution Title
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ATTACHMENT "A"

SCOPE OF WORK

Partners for H.O.M.E., Inc.

In consideration of the not to exceed amount of FIVE HUNDRED SEVENTEEN THOUSAND THREE HUNDRED FOURTEEN DOLLARS AND TWENTY-FOUR CENTS (\$517,314.24) allocated to **Partners for H.O.M.E., Inc.** as part of the Fulton County Community Development Department's Youth Homelessness Systems Improvement ("YHSI") Grant Budget, **Partners for H.O.M.E., Inc.** agrees to perform the services outlined below and provide the following information:

- 1. Train Youth Action Board ("YAB") on self-governance, advocacy, and additional training for professional development.
- 2. Establish a youth service provider consortium to implement the best service provision practices.
- 3. Evaluate Youth CE assessment points to determine areas for accessibility improvement, including mobile access.
- 4. Conduct YAB-led focus groups within youth shelters to provide recommendations on needed policy changes to implement low-barrier shelters across the CoC.
- 5. Manage and improve youth data sharing across data management platforms including HMIS.

Timeline:

The proposed program will be implemented over a period of 30 (thirty) months with ongoing monitoring and evaluation to track progress and outcomes. Partners for H.O.M.E. shall submit invoices to Fulton County reflecting that Partners for H.O.M.E. has utilized Fulton County's funding to provide the services outlined above. All invoices submitted to verify eligible expenses are subject to review and approval by the Director of Community Development. Such invoices shall be provided to Stanley Wilson, Director, Fulton County Department of Community Development, 137 Peachtree Street, SW, 1st Floor, Atlanta, GA 30303.

ATTACHMENT "B" Required Insurance

Insurance and Risk Management Provisions

The following pages outlines the Fulton County Risk Management Provisions and provides a sample Certificate on Insurance.

Insurance and Risk Management Provisions

The following is the minimum insurance and limits that the Contractor/Vendor must maintain. **If** the Contractor/Vendor maintains broader and/or higher limits that the minimum shown below, Fulton County Government requires and shall be entitled to coverage for the higher limits maintained by the Contractor/Vendor.

It is Fulton County Government's practice to obtain Certificates of Insurance from our Contractors and Vendors. Insurance must be written by a licensed agent in a company licensed to write insurance in the State of Georgia. Respondents shall submit with the bid/proposal evidence of insurability satisfactory to Fulton County Government as to form and content. **Either** of the following forms of evidence is acceptable:

- A letter from an insurance carrier stating that upon your firm/company being the successful Bidder/Respondent that a Certificate of Insurance shall be issued in compliance with the Insurance and Risk Management Provisions outlined below. or
- A Certificate of Insurance complying with the Insurance and Risk Management Provisions outlined below (Request for Bid/Proposal number and Project Description must appear on the Certificate of Insurance), or
- A combination of specific policies written with an umbrella policy covering liabilities in excess of the required limits is acceptable to achieve the applicable insurance coverage levels.

Any and all Insurance Coverage(s) and Bonds required under the terms and conditions of the contract shall be maintained during the entire length of the contract, including any extensions or renewals thereto, and until all work has been completed to the satisfaction of Fulton County Government. Evidence of said insurance coverage shall be provided on or before the inception date of the Contract.

Accordingly the Respondent shall provide a certificate evidencing the following:

1. WORKERS COMPENSATION/EMPLOYER'S LIABILITY INSURANCE STATUTORY

(In compliance with the Georgia Workers Compensation Acts and any other State or Federal A Provisions in which jurisdiction may be granted. The State of Georgia requires any business that regularly employs three or more people to have workers' compensation insurance. "Regular" refers to any person who works for a business on a regular basis, even if it is part-time, regardless of any employee's average wage.) REQUIRED MINIMUM COVERAGE LIMITS LISTED BELOW:

Employer's Liability Insurance	BY ACCIDENT	EACH ACCIDENT	\$500,000
Employer's Liability Insurance	BY DISEASE	POLICY LIMIT	\$500,000
Employer's Liability Insurance	BY DISEASE	EACH EMPLOYEE	\$500,000

2. COMMERCIAL GENERAL LIABILITY INSURANCE (Including contractual Liability Insurance)

Bodily Injury and Property Damage Liability	Each Occurrence	\$100,000
(Other than Products/Completed Operations)	General Aggregate	\$100,000
Products\Completed Operation	Aggregate Limit	\$2,000,000
Personal and Advertising Injury	Limits	\$1,000,000
Damage to Rented Premises	Limits	\$100,000

3. BUSINESS AUTOMOBILE LIABILITY INSURANCE

Bodily Injury & Property Damage Each Occurrence \$1,000,000

(Including operation of non-owned, owned, and hired automobiles).

4. ABUSE AND MOLESTATION	Each Occurrence	\$1,000,000
(Coverage REQUIRED for agencies serving Children, Youth and Seniors)		
5. PROFESSIONAL E/O (Coverage REQUIRED for agencies with Health and Wellness programs)	Each Occurrence	\$1,000,000
6. UMBRELLA LIABILITY (In excess of above noted coverages)	Each Occurrence	\$1,000,000

Certificates of Insurance

Contractor/Vendor shall provide written notice to Fulton County Government immediately if it becomes aware of or receives notice from any insurance company that coverage afforded under such policy or policies shall expire, be cancelled or altered. Certificates of Insurance are to list Fulton County Government, Its Employees, Servants and Agents as an Additional Insured (except for Workers' Compensation), using ISO Additional Insured Endorsement form CG 20 10 (11/85) version, it's equivalent or on a blanket basis.

The Contractor/Vendor insurance shall apply as Primary Insurance before any other insurance or self-insurance, including any deductible, non-contributory, and Waiver of Subrogation provided in favor of Fulton County Government.

Additional Insured under the General Liability, Auto Liability, Umbrella Policies (with exception of Workers Compensation), with no Cross Suits exclusion.

If Fulton County Government shall so request, the Respondent, Contractor or Vendor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies.

Such certificates and notices shall be sent to:

Fulton County Government – Purchasing Department 130 Peachtree Street, S.W. Suite 1168 Atlanta, Georgia 30303-3459

Important:

The obligations for the Contractor/Vendor to procure and maintain insurance shall not be constructed to waive or restrict other obligations. It is understood that neither failure to comply not r full compliance with the foregoing insurance requirements shall limit or relieve the Contractor/Vendor from any liability incurred as a result of their activities/operations in conjunction with the Contract and/or Scope of Work.

USE OF PREMISES

Contractor/Vendor shall confine its apparatus, the storage of materials and the operations of its workers to limits/requirements indicated by law, ordinance, permits and any restrictions of Fulton County Government and shall not unreasonably encumber the premises with its materials (Where applicable).

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Professional Services Indemnification. With respect to liability, damages, costs, expenses (including reasonable attorney's fees and expenses incurred by any of them), claims, suits and judgments that arise or are alleged to arise out of the Consultant/Contractor's acts, errors, or omissions in the performance of professional services, the Consultant/Contractor shall indemnify, release, and hold harmless Fulton County, its Commissioners and their respective officers, members, employees and agents (each, hereinafter referred to as an "Indemnified Person"), from and against liability, damages, costs, expenses (including reasonable attorney's fees and expenses incurred by any of them), claims, suits and judgments only to the extent such liability is caused by the negligence of the Consultant/Contractor in the delivery of the Work under this Agreement, but such indemnity is limited to those liabilities caused by a Negligent Professional Act, as defined below. This indemnification survives the termination of this Agreement and shall also

survive the dissolution or to the extent allowed by law, the bankruptcy of Consultant/Contractor.

For the purposes of the Professional Services Indemnity above, a "Negligent Professional Act" means a negligent act, error, or omission in the performance of Professional Services (or by any person or entity, including joint ventures, for whom Consultant/Contractor is liable) that causes liability and fails to meet the applicable professional standard of care, skill and ability under similar conditions and like surrounding circumstances, as is ordinarily employed by others in their profession.

Consultant/Contractor obligation to indemnify and hold harmless, as set forth hereinabove, shall also include, but is not limited to, any matter arising out of any actual or alleged infringement of any patent, trademark, copyright, or service mark, or other actual or alleged unfair competition disparagement of product or service, or other tort or any type whatsoever, or any actual or alleged violation of trade regulations.

Consultant/Contractor further agrees to indemnify and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents from and against any and all claims or liability for compensation under the Worker's Compensation Act, Disability Benefits Act, or any other employee benefits act arising out of injuries sustained by any employees of Consultant/Contractor. These indemnities shall not be limited by reason of the listing of any insurance coverage.

PROTECTION OF PROPERTY

Contractor/Vendor will adequately protect its own work from damage, will protect Fulton County Government's property from damage or loss and will take all necessary precautions during the progress of the work to protect all persons and the property of others from damage or loss.

Contractor/Vendor shall take all necessary precautions for the safety of employees of the work and shall comply with all applicable provisions of the Federal, State and local safety laws and building codes to prevent accidents or injury to persons on, about, the premises where work is being performed.

Contractor/Vendor shall erect and properly maintain at all times as required by the conditions and progress of the work, all necessary safeguards for the protection of its employees, Fulton County Government employees and the public and shall post all applicable signage and other warning devices to protect against potential hazards for the work being performed (Where applicable).



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/01/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATIONIS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER The Insurance Company 12345678 The Insurance Company Service Center	CONTACT NAME: PHONE (A/C, No, E t): (8 8) 555-9 76 FAX (888) 555-9877 (A/C, No):	
10000 Good Street Anytown, GA 30301	E-MAIL ADDRESS.	
Allytown, GA 30301	INSURER(S) AFFORDING COVERAGE NAIC#	
INSURED	INSURER A: The Fire Insurance Company 12345	
INC	IN URER B:	
999 Any Street NW ATLANTA GA 30303: 234	IN MARICE:	
	IN URER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED.NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

NSR LTR	TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/Y YYY)	LIMITS	
LIK	COMMERCIAL GENERAL LIABILITY	INSIX			(MIN/DD/1111)	(WIW/DD/1111)	EACH OCCURRENCE	\$100,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED	\$100,000
		_					PREMISES (Ea occurrence)	
_							MED EXP (Any one person)	
A L		X		11 XXX ZI000	01/01/2025	01/01/2026	PERSONAL & ADV INJURY	\$1,000,00
-	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$100,00
-	POLICY PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
-	OTHER:						COMBINED SINGLE LIMIT	
	AUTOMOBILE LIABILITY						(Ea accident)	\$1,000,00
-	ANY AUTO						BODILY INJURY (Per person)	
Ą	ALL OWNED SCHEDULED			11 XXX ZI000	01/01/2025	01/01/2026	BODILY INJURY (Per accident)	
`	X AUTOS AUTOS NON-OWNED			11 XXX 21000	01/01/2023	01/01/2020	PROPERTY DAMAGE	
	X AUTOS X AUTOS						(Per accident)	
	X UMBRELLA LIAB X OCCUR	-					EACH OCCURRENCE	\$1,000,000
۹ [EXCESS LIAB CLAIMS- LAIMS- MADE			11 XXX ZI000	01/01/2025	01/01/2026	AGGREGATE	\$1,000,000
	DED X RETENTION							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A		0123456789	01/01/2025	01/01/2026	E.L. EACH ACCIDENT	\$500,000
	OFFICER/MEMBER EXCLUDED?						E.L. DISEASE -EA EMPLOYEE	\$500,000

(Mandatory in NH)
If yes, describe under
DESCRIPTION OF OPERATIONS below

0123456789

01/01/2025 01/01/2026

E.L. DISEASE - POLICY LIMIT

Each Claim Limit:

Aggregate Limit:

\$1,000,000 \$1,000,000

\$500,000

Abuse and Molestation (Children, Youth and Seniors programs)

Professional Liability (Health& Wellness programs)

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is a "Additionally Insured" per the Coverage Form attached to this policy.

CERTIFICATE HOLDER

CANCELLATION

Fulton County Government 141 PRYOR ST SW ATLANTA GA 30303-3408 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

SIGN HERE

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ACORD 25 (2016/03)

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***In additions to meeting the insurance limits outlined on pp.1-2, the highlighted areas must also be includedchecked box under "ADDL INSR", Fulton County Government listed as Certificate Holder and an Authorized

Certificate of Insurance (COI) Tip Sheet

This tip sheet will help navigate the various liability requirements to ensure successful completion of the contract development phase.

1. WORKERS COMPENSATION/EMPLOYER'S LIABILITY INSURANCE STATUTORY

The State of Georgia requires any business that regularly employs three or more people to have worker's compensation.

- <u>TIP:</u> If your agency has fewer than three (3) full-time employees, Workers' Compensation Insurance is NOT required by Georgia Law.
- TIP: An agency must submit an email to your assigned Fulton County Grant Point of Contact requesting a waiver stating the agency employs less than three (3) full-time employees. An approved email must be attached to the COI as one document.
- TIP: Limits provided are the minimum liability limits allowed by Fulton County Government

2. COMMERCIAL GENERAL LIABILITY INSURANCE (Including contractual Liability Insurance)

- TIP: Limits provided are the minimum liability limits allowed by Fulton County Government
- <u>TIP:</u> Fulton County must be listed as an "Additional Insured". The "additional insured" can be identified with a check in the designated box or listed in the "Description of Operations" box.

3. BUSINESS AUTOMOBILE LIABILITY INSURANCE

Bodily Injury & Property Damage (Including operations of non-owned, owned, and hired automobiles)

- TIP: Limits provided are the minimum liability limits allowed by Fulton County Government
- TIP: Auto liability is required for any organization that uses transportation for program/service delivery. If the agency's staff uses their personal vehicles to administer agency programming and services, proof of insurance coverage must be included with the COI document
- TIP: An agency must submit a waiver request via email to your assigned Fulton County Grant Point of Contact with an explanation of why Auto Liability coverage is not applicable. If the waiver request is approved, you will receive an approved email that must be attached to the COI as one document.

4. <u>UMBRELLA LIABILITY</u>

- <u>TIP:</u> Limits provided are the minimum liability limits allowed by Fulton County Government and is a required coverage in addition to the Commercial General Liability (CGL) coverages
- <u>TIP:</u> If the CGL coverage exceeds the minimum requirements to include the required umbrella liability amount, an agency may submit a waiver request stating this information via email to your assigned Fulton County Grant

Certificate of Insurance (COI) Tip Sheet

Point of Contact. Proof of the more than minimum CGL is required. If the waiver request is approved, the approved email must be attached to the COI as one document.

5. ABUSE AND MOLESTATION COVERAGE*

TIP: Limits provided are the minimum liability limits allowed by Fulton County Government

TIP: Coverage is <u>REQUIRED</u> for any awarded agency serving children, youth, or seniors

6. **PROFESSIONAL E/O**

TIP: Limits provided are the minimum liability limits allowed by Fulton County Government

TIP: Coverage is REQUIRED for any awarded agency with Health and Wellness programs

OTHER HELPFUL TIPS:

- ✓ The ACORD Certificate of Liability Insurance is the preferred document to use for the COI requirements (see "sample certificate" on the last page of the Insurance and Risk Management Provisions document)
- ✓ Documents that include insurance pricing (charges for coverage) are not approved COI documents and will NOT be accepted
- ✓ All COIs "Policy EFF" and "Policy EXP" must be current at the time of submission during the Scope Negotiations phase.
- ✓ Fulton County Government MUST be listed as the Certificate Holder using the address on the sample document
- ✓ An "Authorized Representative" MUST sign the COI document
- ✓ Any requested changes MUST be made by the authorized insurance provider and may NOT be altered by unauthorized individuals
- ✓ Reading the entire Insurance and Risk Management Provisions document and following the Sample Certificate will help to ensure a successful COI document and prevent further delay to the contract development phase.

- United States Liability Insurance
- Ohio Security Insurance Company
- Alliance of Nonprofits for Insurance
- GuideOne Elite Insurance Company
- Church Mutual Insurance Company

^{*}Below is a list of insurance companies funded agencies have utilized in the past for abuse/molestation coverage.

*Please note: Fulton County does not endorse any insurance company included on this list.

ATTACHMENT "C"

Federal Award Identification per 2 CFR § 200.332

- (i) Subrecipient name: Partners for H.O.M.E., Inc.
- (ii) Subrecipient's unique entity identifier: KENNWFX636U6
- (iii) Federal Award Identification Number (FAIN): GA00YHS122
- (iv) Federal Award Date: June 6, 2024
- (v) Subaward Period of Performance Start and End Date: October 1, 2024 through March 31, 2027
- (vi) Subaward Budget Period Start and End Date: October 1, 2024 through March 31, 2027
- (vii) Amount of Federal Funds Obligated in the subaward: \$517,314.24
- (viii) Total Amount of Federal Funds Obligated to the subrecipient by the pass-through entity, including the current financial obligation: \$517,314.24
- (ix) Total Amount of the Federal Award committed to the subrecipient by the pass-through entity: \$517,314.24
- (x) Scope of Work/Federal award project description: Partners for H.O.M.E., Inc. shall utilize the Award Amount to (1) Train Youth Action Board ("YAB") on self-governance, advocacy, and additional training for professional development; (2) Establish a youth service provider consortium to implement the best service provision practices; (3) Evaluate Youth CE assessment points to determine areas for accessibility improvement, including mobile access; (4) Conduct YAB-led focus groups within youth shelters to provide recommendations on needed policy changes to implement low-barrier shelters across the CoC; and (5) Manage and improve youth data sharing across data management platforms including HMIS.
- (xi) Awarding official:
 Fulton County, Georgia
 Chairman of the Board of Commissioners
 141 Pryor Street, SW
 Atlanta, GA 30303
- (xii) Assistance Listings title and number: #14.277 Youth Homelessness Systems Improvement (YHSI) Grant
- (xiii) Identification of whether the Federal award is for research and development: Yes
- (xiv) Indirect cost rate for the Federal award (including if the de minimis rate is used in accordance with § 200.414): The grant has indirect costs.

ATTACHMENT "D" YOUTH HOMELESSNESS SYSTEM IMPROVEMENT GRANT (YHSI) BUDGET

Partners for H.O.M.E., Inc.

Grant Application Detailed Budget Worksheet

OMB Number 2501-0044 Expiration: 2/28/2027

	Detailed Descr	ription of Budget	
Analy	sis of Total Estimated Costs	Estimated Cost	Percent of Total
1	Personnel (Direct Labor)	227,100.00	36.3%
2	Fringe Benefits	56,775.00	9.1%
3	Travel	0.00	0.0%
4	Equipment	0.00	0.0%
5	Supplies and Materials	0.00	0.0%
6	Consultants	0.00	0.0%
7	Contracts and Sub-Grantees	341,314.00	54.6%
8	Construction	0.00	0.0%
9	Other Direct Costs	625,189.00	100.0%
10	Indirect Costs	0.00	0.0%
	Total:	625,189.00	100.0%
	Federal Share:	517,314.00	83%
	Match (Expressed as a percentage of the Federal Share):	107,875.00	17%

Grant Application Detaile *.03									OMB Number 25 Expiration: 2/28/2		
	Partners for Home (A	tlanta CoC)							•		
Applicant Address:											
Category	T	T		Detailed Descrip	otion of Budget (fo		eriod) Other Federal Share	01.1.01	Local/Tribal	Other	D
1. Personnel (Direct Labor)	Estimated Hours	Rate per Hour	Estimated Cost	HUD Share	Applicant Match	Funds	Other Federal Share	State Share	Share	Other	Program Income
Project Manager- Leading the YSHI Project, 55K											
Annual salary for 30 Months. First 6 months will be covered by Match.	6,241	26.44	\$137,500.00	\$110,000.00	\$27,500.00						
Sr. Project Manager- Will provide project oversight/supervision for PM position, dedicating 30% of											
time to this project for 30 Months. Annual Salary											
\$72,800. All covered by match	1,560	35.00	\$54,600.00		\$54,600.00						
HMIS Project Manager-HMIS System Improvement and											
TA Support , dedicating 20% of time to this project Annual Salary 70K	1,040	33.65	\$35,000.00	\$35,000.00							
Allitual Salary 70K	1,040	33.03	\$33,000.00	\$35,000.00							
											1
Total Direct Labor Cost			\$227,100.00	\$145,000.00							
2. Fringe Benefits	Rate (%)	Base	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Project Manager Fringe	25.00%		\$34,375.00	\$27,500.00	\$6,875.00	Tulius			Silaie		lilicome
Sr Project Manager Fringe	25.00%		\$13,650.00	, , , , , , , , ,	\$13,650.00						
HMIS Project Manager	25.00%		\$8,750.00	\$8,750.00							
										<u> </u>	
											1
Total Fringe Benefits Cost			\$56,775.00	\$36,250.00	\$20,525.00						
3. Travel			φ30,773.00	φ30,230.00	\$20,323.00		1	1			1
	B#11	D-4 Mil-	Entire de d'Oceat		Applicant Match		Other Federal Share	State Share	Local/Tribal	Other	Program
3a. Transportation - Local Private Vehicle	Mileage	Rate per Mile	Estimated Cost	HUD Share		Funds			Share		Income
											1
										 	-
Subtotal - Trans - Local Private Vehicle											1
	T	-	Entire de d'Ocea	LILID OL.	Applicant Match	Other HUD	Other Federal Share	State Share		Other	Program
3b. Transportation - Airfare (show destination)	Trips	Fare	Estimated Cost	HUD Share		Funds			Share		Income
							-	1		 	
Subtotal - Transportation - Airfare											+
	_				Applicant Match		Other Federal Share	State Share		Other	Program
3c. Transportation - Other	Quantity	Unit Cost	Estimated Cost	HUD Share		Funds			Share		Income
		-						-	-	—	+

form HUD-424-CBW (2/2003)

Previous versions of HUD-424-CBW are obsolete

Grant Application Detaile *.03									OMB Number 250 Expiration: 2/28/2		
Applicant Name:	Partners for Home (A	vtlanta CoC)			1		1	1			
Subtotal - Transportation - Other											
3d. Per Diem or Subsistence (indicate location)	Days	Rate per Day	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Per Diem or Subsistence											
Total Travel Cost											
Equipment (Only items over \$5,000 Depreciated value)	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Total Equipment Cost											
5. Supplies and Materials (Items under \$5,000 Depreciated Value)				Applicant Match	Other HUD	Other Federal Share	State Share	Local/Tribal	Other	Program
5a. Consumable Supplies	Quantity	Unit Cost	Estimated Cost	HUD Share		Funds			Share		Income
Subtotal - Consumable Supplies					Applicant Match	Other HUD	Other Federal Share	Ctata Chara	Local/Tribal	Other	Program
5b. Non-Consumable Materials	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Water	Funds	Other rederar onare	State Share	Share	Other	Income
Subtotal - Non-Consumable Materials											
Total Supplies and Materials Cost											
6. Consultants (Type)	Days	Rate per Day	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Total Consultants Cost			-								
7. Contracts and Sub-Grantees (List individually)					Applicant Match	Other HUD	Other Federal Share	State Share	Local/Tribal	Other	Program
7a. Contracts	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Funds	Other Federal Share	State Share	Share	Other	Income
YAB Stipends \$100 per hour x 10 hours per month x 10 participants x 24 months											
	10	\$24,000.00	\$240,000.00	\$240,000.00							
Focus Group Incentives			\$5,250.00		\$5,250.00		1				

Grant Application Detaile *.03									OMB Number 25 Expiration: 2/28/2		
	Partners for Home (A	tlanta CoC)									_
Youth Training & Advocacy Support Services - funding from to conduct YHSI activities, HMIS integration through custom API solutions, and youth-specific mobile coordinated entry services. This funding will also support a Project Manager at 1 FTE (contracted position).											
			\$36,064.00	\$36,064.00	\$0.00						+
											Ŧ
Subtotal - Contracts			\$281,314.00	\$276,064.00	\$5,250.00						1
7b. Sub-Grantees (List individually)	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	
Mobile Coordinated Entry	1	\$60,000.00	\$60,000.00	\$60,000.00							‡
											‡
Subtatal Sub Crantage			20,000,002	000 000							‡
Subtotal - Sub-Grantees Total Contracts and Sub-Grantees Cost			\$60,000.00 \$341,314.00	\$60,000.00 \$336,064.00							1
Construction Costs Administrative and legal expenses	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Ī
											$rac{1}{4}$
											1
Subtotal - Administrative and legal expenses					Anniana Matak	Other HUD	Other Federal Share	Otata Obassa	Local/Tribal	Other	‡
8b. Land, structures, rights-of way, appraisal, etc	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Funds	Other Federal Share	State Share	Share	Other	+
Subtotal - Land, structures, rights-of way,											‡
8c. Relocation expenses and payments	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	1
											‡
Subtotal - Relocation expenses and payments											‡
8d. Architectural and engineering fees	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	1
											1
											1
Subtotal - Architectural and engineering fees 8e. Other architectural and engineering fees	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	t
<u> </u>											1
											‡
Subtotal - Other architectural and engineering fees					Applicant Mark	O#	Other Federal Ob	01.1.0	1 1/7-7-	OH	‡
8f:Project inspection feese obsolete.	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal form 10D-4	Other	1

Grant Application Detaile *.03									Expiration: 2/28/2	027	
Applica	ant Name: Partners for Home (Atlanta CoC)									
											4
											+
Subtotal - Project inspection fees											t
					Applicant Match	Other HUD	Other Federal Share	State Share		Other	T
8g. Site work	Quantity	Unit Cost	Estimated Cost	HUD Share		Funds			Share		4
											+
											Ť
Subtotal - Site work											I
8h. Demolition and removal	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	
on. Bemonton and removal	Quantity	Omit Gost	Estimated Gost	TIOD CHAIC		1 unus			Onare		T
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Cold to L. Dono 196 or or donor or l					1						+
Subtotal - Demolition and removal		+			Applicant Match	Other HUD	Other Federal Share	State Share	Local/Tribal	Other	+
8i. Construction	Quantity	Unit Cost	Estimated Cost	HUD Share		Funds		Otato Onaro	Share		
											4
		1	 		+		1				+
Subtotal - Construction					†			<u> </u>	†		\dagger
					Applicant Match	Other HUD	Other Federal Share	State Share		Other	T
8j. Equipment	Quantity	Unit Cost	Estimated Cost	HUD Share		Funds			Share		+
											+
											T
											I
Subtotal - Equipment					A mariina mat B Andala	Other IIID	Other Federal Share	01-1-01	L a a a l/Trib a l	Other	4
8k. Contingencies	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Funds	Other Federal Share	State Share	Local/Tribal Share	Other	
											I
											4
Subtotal - Contingencies											+
Subiolai - Contingencies					Applicant Match	Other HUD	Other Federal Share	State Share	Local/Tribal	Other	$^{+}$
8I. Miscellaneous	Quantity	Unit Cost	Estimated Cost	HUD Share		Funds			Share		4
											+
											+
Subtotal - Miscellaneous											Ī
Total Construction Costs											l
9. Other Direct Costs	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	
Item	Quantity	O mit Goot	Estimated Gost	TIOD CHAIC		1 unus			Onare		+
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Total Other Direct Costs											Ι
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Subtotal of Direct Costs			\$625,189.00	\$517,314.00	\$107,875.00		<u> </u>	<u> </u>			丄
					Applicant Match	Other HUD	Other Federal Share	State Share	Local/Tribal	Other	\top
19 io Indirect 6 954 CBW are obsolete.	Rate	Base	Estimated Cost	HUD Share	ppcarit materi	Funds	I Gadiai Gilaic	State Oriale	form HDD-4	0 4101	

Grant Application Detaile													
	Applicant Name:	Partners for Home (At	tlanta CoC)										
	Туре												
	·												
Total Indirect Costs													
Total Estimated Costs				\$625,189.00	\$517,314.00	\$107,875.00							

ATTACHMENT "E"

YOUTH HOMELESSNESS SYSTEM IMPROVEMENT GRANT (YHSI) CONTRACT PERFORMANCE MEASURES

Partners for H.O.M.E., Inc.

Planning and Partnerships Milestones	Responsible Party	Deliverables		P	lan	nin	ıg			Yea	ır 1			Yea	ar 2
			1	2	3	4	5	6	Q 1	Q 2	Q 3	Q 4	Q 1	Q 2	Q Q 4
Milestone 1: Develop evaluation plan with interview and focus group guides and survey tool for Fulton County CoC, Atlanta CoC, YSP stakeholders, and YAB feedback. Attain IRB approval.	MSM PRC	IRB approved evaluation plan	х	х	X	х	х	х	х	x					
Milestone 2: Establish and convene the Fulton County and City of Atlanta Youth Homelessness Service Providers Consortium (YSP) to participate in program activities, work in tandem with the YABs, and implement changes resulting from grant activities.	FCDCD & PFH	Roster, attendance records, meeting notes, action items, and program suggestions													
2a. Identify and recruit non-profit organizations, Fulton County agencies, and City of Atlanta agencies to participate in the YSP, including ongoing recruitment to invite new organizational members serving youth experiencing homelessness	FCDCD & PFH	List of youth-serving organizations	x	х	X	х	х	Х	x	х	х	х	X	X	x x
2b. Conduct at least quarterly YSP meetings (virtual and in person) throughout the grant to identify barriers to serving youth, share resources and best practices, participate in program activities, and incorporate feedback from the YABs.	FCDCD, PFH, & YSP	Roster, attendance records, meeting notes, action items, and program suggestions	x	х	х	х	х	х	X	х	X	х	X	x	x x
2c. Provide equity-trainings to YSP member organizations as a direct result of findings from the MSMPRC equity evaluation	MSM PRC	Completion records, gains in knowledge and/or changes in practice or policies											х	X	x x
Milestone 3: Establish and implement the Fulton County and City of Atlanta YABs to advise program activities and sustain membership beyond grant funding to inform services for youth experiencing homelessness.	FCDCD & PFH	Roster, Attendance records, meeting notes, action items, and program suggestions	x	Х	X	X	х	Х	х	x	X	x	X	X	x x

3a. Fulton County YAB: Identify and nominate 10-15 youth with lived experience, including turnover replacements throughout duration of program	FCDCD, YSP	List of nominees	х	х	Х	х	Х	х	х	X	х	X	х	X	x	х
3b. City of Atlanta YAB: Identify candidates for pre-existing YAB to serve as replacements throughout duration of program	PFH, YSP	List of nominees	х	х	x	х	х	х	х	x	х	X	х	х	x	х
3c. Conduct at least monthly meetings with each YAB (virtual and in person)	FCDCD, PFG	Attendance records, meeting minutes, action items								x	х	X	х	х	X	х
3d. Provide competitive compensation to members of each YAB at \$100/hour per member, up to 10 hours per month.	FCDCD, PFG	Direct cash transfer receipts								x	x	X	X	x	X	х

	3e. Provide self-governance and other trainings to all YAB members. Specific trainings to be identified by YAB membership.	Training provider (TBD, e.g., Point Source Youth)	List of trainings, satisfaction surveys, knowledge increases				X 2	X X	Х	x >	X 2	X X
	3f. Facilitate quarterly meetings between the Fulton County YAB and the City of Atlanta YAB to identify group projects and priorities to discuss with the YSP.	FCDCD & PFH	Attendance records, meeting notes, action items			:	X X	x x	Х	х >	к :	x x
	3g. Facilitate quarterly meetings between YABs and the YSP to work on priorities identified by the YABs	FCDCD, PFH, & YSP	Attendance records, meeting notes, action items				х 2	x x	ζ >	х >	x :	x x
	3h. Conduct annual youth conference for members of both YABs, YSP members, and youth within the service area	Training provider (TBD, e.g., Point Source Youth)	Conference materials, satisfaction surveys, action items							>	K	
I	Milestone 4: Generate a System and Asset Map to serve as a resource for Fulton County and City of Atlanta youth experiencing homelessness including those exiting the juvenile justice system and/or foster care.	MSM PRC	System Map Asset Map			X :	X 2	ζ.				
	4a. Work with YSP to identify all available service providers and resources offered to youth experiencing homelessness	MSM PRC	List of service providers and resources			x (x	2	x x				

4b. Identify additional community-based service providers/resources not on the YSP	MSM PRC	Research/Needs Assessment report				x x	2	х			
4c. Work with Fulton County and City of Atlanta agencies, along with YSP members, to document youth exit strategies	MSM PRC	Documented exit strategies, recommended policies, finding gaps				XX	2	х	X		
Milestone 5: Plan and conduct programmatic evaluation to determine if goals and objectives were met and to determine effectiveness of initiative in meeting the needs of youths who experience homelessness (annual reports provided)	MSM PRC	Report with findings from document reviews and program staff interviews	2	K :				2	х		х

Data Milestones	Responsible Party	Deliverables		Pl	anı	ninş	g		•	Yea	r 1			Yea	ar 2	
			1	2	3	4	5	6	Q 1	Q 2	Q 3	Q 4	Q 1	Q 2	Q 3	Q 4
Milestone 1: Upgrade HMIS (ClientTrack) to automate communication with other systems used by YSP organizations	FCDCD, PFH, YSP, Pathways, ICA	Custom tech solutions to empower HMIS to communicate with various databases							x	х	X	x	X	x	x	х
1a. Survey YSP members to identify all currently used databases (e.g., Apricot) and discover possible tech integration solutions that can be used by both Fulton County CoC and City of Atlanta CoCs	FCDCD, PFH, YSP, Pathways, ICA	Scope analysis document							х	x						
1b. Develop, test, and bug-fix custom solution to crosstalk between HMIS and YSP partners' databases	Pathways, ICA	Custom API solution, updates to API if needed									x	х	х	х		
1c. YSP partners test and adopt tech solution to empower automatic communication with HMIS	FCDCD, PFH, YSP	User feedback, policy changes												x	x	X

Milestone 2: Develop and implement evaluation and analysis strategies related to youth homelessness, including equity analyses, youth needs, and community-wide continuous quality improvement plans.	MRM PRC FCDCD PFH	Evaluation and data analysis strategies and criteria	х	X	х	х	х	X	х	X	х	X	х	х	X Z	X
2a. Develop and implement evaluation and data analysis criteria for determining the effectiveness of HMIS for capturing youth-specific coordinated entry functionality	MSM PRC	Survey results/findings	х	x	х	X	х	х	х	X	х	x	х	x	X Z	x
2b. Survey the YSP organizations to identify the usability of HMIS in meeting participation and reporting requirements	MSM PRC	Report with findings from document reviews and program staff interviews								X	х	Х	х	X	X Z	x
Milestone 3: Plan and conduct programmatic evaluation to determine if goals and objectives were met and to determine effectiveness of initiative in meeting the needs of youths who experience homelessness (annual reports provided)	MSM PRC	Report with findings from document reviews and program staff interviews	X	X	X	X	х	X				x			7	х

Coordinated Entry Milestones	Responsible Party	Deliverables		P	lan	nin	g			Yea	ar 1			Yea	ar 2	
			1	2	3	4	5	6	Q 1	Q 2	Q 3	Q 4	Q 1	Q 2	Q 3	Q 4
Milestone 1: Fulton County CoC to establish new youth-specific coordinated Entry points and procedures.	FCDCD, YSP, Pathways	Number of new, youth specific CES sites, increased number of youth assessed							х	X	X	X	х	X	x	x
1a.Invite all YSP organizations serving Fulton County youth to have access to CE	FCDCD, YSP, Pathways	Number of interested YSP organizations							х	x	х					
1b. Provide HMIS training to all new CES sites (ongoing)	FCDCD, YSP, Pathways	Training completion logs, new user logins							х	X	х	х	х	x	x	х

1c. Create CES policy for YSP organizations that serve youth in both Fulton County and Atlanta CoCs	FCDCD, PFH, YSP	CES Policy		х	X	х	X				
1d. YSP organizations utilize Fulton County CoC CE to assess youth experiencing homelessness in Fulton County	FCDCD, YSP	Number of youth assessed			х	х	Х	х	х	х	x x
Milestone 2: Fulton County CoC to conduct a Mobile Coordinated Entry pilot to better serve youth experiencing homelessness	FCDCD, Mobile CE Provider (TBD, e.g., Hope Thru Soap)	Number of youth assessed through mobile CE pilot			х	x	x	х	X	х	
2a. Youth-specific mobile CE provider identified and contracted through FCDCD bid process	FCDCD	Vendor identified		Х	х						
2b. Mobile coordinated entry provider conducts outreach in North and South Fulton to identify and assess youth	Mobile CE Service Provider	Number of youth assessed through mobile CE pilot			х	х	х	x	х	x	
2c. Analysis of pilot to determine if Fulton County CoC should continue to invest in and/or expand youth-specific mobile CE	MSM PRC	Pilot study, final report							х	x	х
Milestone 3: Atlanta CoC to provide youth-specific mobile CE to ensure entire service area is reached	PFH, Mobile Coordinated Entry Provider (TBD, e.g., Hope Thru Soap)	Number of youth assessed through mobile coordinated entry			х	x	х	х	х	х	
3a. Youth-specific mobile CE provider identified and contracted through PFH bid process	PFH	Vendor identified			х	х					
3b. Mobile coordinated entry provider conducts outreach across City of Atlanta	Mobile CE Service Provider	Number of youth assessed through mobile CE				х	х	х	х	х	

Fulton County
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Milestone 4: Develop and implement a youth-specific assessment tool across both Fulton County CoC and Atlanta CoC	FCDCD, PFH, MSM PRC, Pathways	Youth-specific assessment tool							X	х	X	X	х	X	x x	
4a. Contact Balance of State CoC to identify and understand the youth specific assessment tool currently integrated within HMIS	FCDCD, PFH	Communication logs					Х	х	х	х						
4b. Conduct review of youth-specific assessments implemented in HMIS across similar CoCs	MSM PRC	Review of assessments for commonalities					х	х	х	х						
4c. Determine the most useful items to incorporate in the Fulton County and City of Atlanta CoC youth assessment	FCDCD, PFH, MSM PRC	List of items							х	Х						
4d. Incorporate the new youth-specific assessment tool within HMIS as part of coordinated entry in Fulton County and City of Atlanta	FCDCD, PFH, Pathways	Integrated youth- specific assessment tool								х	X	x	х			
4e. Provide instrument training to all organizations conducting coordinated entry within Fulton County and City of Atlanta CoCs (ongoing)	FCDCD, PFH, Pathways	Training logs, increases in confidence in using assessment								х	X	x	х	x	x X	-
Milestone 5: Develop and implement an ongoing evaluation process for stationary and mobile Coordinated Entry in both Fulton County and City of Atlanta CoCs, including integrating youth with lived experience in the evaluation process	MSM PRC	Evaluation process	х	х	х	х	X	х	x	х	х					
5a. Conduct focus groups/listening sessions with YSP and youth with lived experience of homelessness, seeking insights for improvement and a new evaluation framework	MSM PRC	Focus Groups findings and Completed Evaluation Framework							х	х	х					
5b. Conduct surveys with youth experiencing homelessness to identify barriers in the Coordinated Entry evaluation process and improve the assessment process and experience for survivors.	MSM PRC	Survey results									х	х				
5c. Quantitative analysis of HMIS, PIT counts, and McKinney Vento data to determine the degree to which the 2 CoCs are reaching and serving youth experiencing homelessness through the CES process	MSM PRC	Findings from quantitative analyses, recommendations for improvement									Х	Х	х	X		

5d. FCDCD and PFH to implement ongoing evaluation process to ensure continuous improvement for youth coordinated entry	FCDCD, PFH	Continuous evaluation, improved youth CES									X	X	Х
Milestone 6: Plan and conduct programmatic evaluation to determine if goals and objectives were met and to determine effectiveness of initiative in meeting the needs of youths who experience homelessness (annual reports provided)	MSM PRC	Report with findings from document reviews and program staff interviews	x	x	х	Х	Х	Х		X			х

Racial and Gender Equity Milestones	Responsible Party	Deliverables		P	lan	nin	g		Ì	Yea	r 1			Yea	ır 2	
			1	2	3	4	5	6	Q 1	Q 2	Q 3	Q 4	Q 1	Q 2	Q Q 4	
Milestone 1: Conduct a community-wide racial and gender equity analysis including needs and current outcomes for youth experiencing homelessness in Fulton County and City of Atlanta CoCs	MSM PRC	Racial and gender equity analysis									X	х	х	x		
1a. Conduct a targeted needs assessment with homeless youth to identify challenges they face regarding racial and gender equity.	MSM PRC	Needs assessment report							Х	х						
1b. Conduct listening sessions/ key informant interviews with organizations providing services for such populations to gather feedback and address the challenges of youth homelessness on racial and gender equity.	MSM PRC	Findings from listening sessions and/or key informant interview									X	х				
Milestone 2: Conduct a needs analysis of youth experiencing homelessness, including the needs of youth subpopulations such as minors, Blacks, indigenous, and other youth of color, LGBTQIA+, and pregnant/parenting youth.	MSM PRC	Needs assessment report			х	х	X	x	х	X	x	х				
2a. Conduct surveys with representative organizations and community partners to gather feedback and address the needs of youth subpopulations such as minors, Blacks, indigenous, and other youth of color, LGBTQIA+, and pregnant/parenting youth.	MSM PRC	Survey results									X	X				

															<u> </u>
2b. Conduct focus groups and/or key informant interviews with youth subpopulations to gather insights into their unique needs.	MSM PRC	Combination of focus groups and/or key informant interviews results							x	X	х	X			
Milestone 3: Develop an evaluation framework for current and future projects serving youth experiencing homelessness including outcomes related to racial equity and LGBTQIA+ equity	MSM PRC	Evaluation framework						х	х	X	х	х			
3a. Conduct survey and/or key informant interviews with stakeholders, including representatives from racial and LGBTQIA+ communities, youth organizations, youth with lived experience, and service providers to develop the evaluation framework and improve data collection.	MSM PRC	Survey and/or key informant interview results									х	х			
3b. Conduct surveys with homeless youth subgroups to gather input for the evaluation framework.	MSM PRC	Survey results						х	х	X	х	х			
Milestone 4: Plan and conduct programmatic evaluation to determine	MSM PRC	Report with findings from	х	х	х	x	х	х				х			x\
Milestone Chart													unty N-96		
if goals and objectives were met and to determine effectiveness of initiative in meeting the needs of youths who experience homelessness (annual reports provided)		document reviews and program staff interviews							X	x	X	X	X	x	x x
4a. Determine if and how project activities have improved the racial and gender equity of the youth homelessness response system.		Final report										х			х

Final Report

X

4b. Determine how the youth-informed racial and gender equity evaluation framework can be adapted and disseminated for use in future projects