Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.

2. Ensuring all questions are answered completely.

3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.

4. Ensuring all imported responses in the application are fully reviewed and updated as needed.

5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.

6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.
- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click here.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: CA-607 - Pasadena CoC

1A-2. Collaborative Applicant Name: City of Pasadena

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Pasadena

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members. Responses should be for the period from 5/1/16 to 4/30/17.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	No	No
Hospital(s)	Yes	Yes
EMT/Crisis Response Team(s)	Yes	Yes
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Not Applicable	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Not Applicable	No
Non-CoC Funded Victim Service Providers	Yes	No
Domestic Violence Advocates	No	No
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	No
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Other:(limit 50 characters)		

veteran organizations	Yes	Yes
faith-based organizations	Yes	Yes
businesses	Yes	Yes

Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 1000 characters)

The CoC has a Board & 6 committees/workgroups that meet regularly & include a:
(1) Housing Committee
(2) Planning & Research Committee
(3) CES Committee
(4) Veteran Outreach Workgroup
(5) Healthcare Committee
(6) Faith Community Committee
Meetings include regular calls for input & feedback on CoC policies/written standards, NOFA related issues, PIT planning, & pop-specific strategies. Committee members include diverse stakeholders throughout the entire homeless community. All mtgs are open to the public & posted on the CoC's website w/ email invitations sent to interested stakeholders. Minutes & agendas from the 27+ mtgs in FY 2016-17 are also posted on the website. In addition to Board & Committee mtgs, the CoC solicits opinions from the larger CoC membership, which includes 118 stakeholders, through semi-annual CoC mtgs. Staff, providers & advocates also attend various community & council meetings to solicit opinions outside of the CoC.

1B-2. Describe the CoC's open invitation process for soliciting new members, including any special outreach. (limit 1000 characters)

CoC membership is open to any stakeholder willing to actively participate in and support community-wide strategies that are grounded in evidence-based best practices to prevent and end homelessness in Pasadena, and is solicited at least annually. All meetings are open to the public and widely advertised via the CoC's website and through email invitations. All CoC members and board members are responsible for recruitment efforts to engage new CoC members. Using a regularly updated list of CoC members, CoC staff identifies and addresses membership gaps in essential sectors and other vital stakeholders. CoC staff also identifies agencies no longer engaged in CoC meetings and attempts to re-engage them through semi-annual CoC Membership meetings. Staff, providers & advocates also attend various community & council meetings to recruit new CoC members.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received

CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to proposals.
(limit 1000 characters)

The New Application RFP was an open process & non-CoC funded entities were actively recruited & encouraged to apply. The RFP was widely advertised w/ emails to CoC/Service Provider Listservs (7/31), a public posting on the City's Facebook page (7/31) & a dedicated webpage on the CoC website (8/1). A mandatory TA workshop was provided for all applicants (8/8) to help new & returning applicants understand requirements & apply. All workshop participants were emailed the complete RFP which was also posted on the website (8/8). The Grants Evaluation Committee reviewed applications using an objective scoring tool that evaluated consistency w/ community need, ability to enhance system performance, organizational experience/capacity & financial efficiency/management. The Committee approved the highest scoring proposals for inclusion in the CoC application through reallocated funds & the PH bonus. The CoC Board met & heard appeals on 8/22/17 & approved Committee recommendations.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects.
Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	No
Head Start Program	No
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. Describe how the CoC actively consults with Emergency Solutions Grant (ESG) recipient's in the planning and allocation of ESG funds. Include in the response: (1) the interactions that occur between the CoC and the ESG Recipients in the planning and allocation of funds; (2) the CoCs participation in the local Consolidated Plan jurisdiction(s) process by providing Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions; and (3) how the CoC ensures local homelessness information is clearly communicated and addressed in Consolidated Plan updates.
(limit 1000 characters)

ESG recipient participates in CoC meetings, committees, & has representation on CoC Board. CoC & ESG recipients analyze their grants collectively to determine if CoC has right mix of housing & services. Consolidated Applicant

for CoC, City of Pasadena Housing Dpt, is responsible for Con Plan & ESG/CDBG entitlement jurisdiction administrator. Staff responsible for CoC planning is responsible for ESG planning & coordinates with CDBG staff to ensure Con Plan fully represents & addresses needs of homeless. CoC provided PIT, HIC, HMIS, CES & SPM data & related descriptions regarding nature & extent of homelessness, homeless facilities & services, & homeless prevention. Con Plan goals are discussed and developed at CoC meetings which ensures that info provided is addressed in Con Plan by identifying homeless needs & priorities, services targeted to homeless, & providing the strategies to fill gaps as required by Con Plan & then reviews related Con Plan sections to make sure info is accurate.

**1C-3. CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants.
(limit 1000 characters)**

Survivors of domestic violence/sexual assault (DV/SA) have access to all CES processes & resources. CES Staff receives ongoing best-practice training on safety protocols, identifying participants fleeing or attempting to flee DV/SA, & respecting client choice (location, housing type & services). If a participant indicates they are seeking specialized services for DV/SA survivors they are given the option to receive a referral to DV/SA-specific resources. Participants in DV/SA programs are eligible to gain access to services through the standardized CES assessment process using a coded ID number which only victim service providers are able to de-code. Families and individuals who seek emergency shelter are asked whether they are feeling or attempting to flee DV/SA and together with staff, determine whether they will be safe in the shelter location. Clients in a non-DV/SA shelter are linked to a CES access point where they receive services as indicated above.

**1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment.
(limit 1,000 characters)**

Training is provided annually regarding best practices in serving survivors of DV for providers and CES staff on addressing physical and emotional safety, privacy and confidentiality, culturally-relevant services, and emergency needs of participants. Trauma-informed practices are incorporated into the coordinated entry process. Data collected has shown the need for CES staff to have updated information on programs best equipped to serve households experiencing DV based on location, program model, and linkages to other supportive services. Data has also shown the need to safely refer survivors with a warm hand-off including a phone call, transportation, or other transition to the victim service provider. Safety planning protocols ensure survivors are

assessed in a confidential manner by informing them about how the information will be used to secure safe housing and the option to refuse to answer questions or not to disclose personal information.

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.
Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
City of Pasadena Housing Department	32.14%	Yes-HCV

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy.
(limit 1000 characters)

Non-applicable

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effecctively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Idenity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy.
(limit 1000 characters)

Actions taken by the CoC include implementing a CoC-wide anti-discrimination policy that ensures that all CoC funded and ESG funded temporary and permanent housing programs, including benefits and services, are open to all eligible homeless individuals and families regardless of sexual orientation, gender identity, and marital status. The CoC has adopted the notice that HUD

provided to notify clients and residents about the new Equal Access Rule requirements. The CoC conducts an annual CoC-wide training on how to implement effectively the Equal Access Rule, which includes publicly posting on bulletin boards and other public spaces where information is typically made available, the adopted HUD notice to ensure clients and residents are aware of their rights to equal access. Training including recordkeeping requirements that noted that program providers must document and maintain records of compliance with the requirements of the Equal Access Rule.

1C-6. Criminalization: Select the specific strategies implemented by the CoC to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Engaged/educated local business leaders	X
Implemented communitywide plans:	X
No strategies have been implemented	
Other:(limit 50 characters)	

When "No Strategies have been implemented" is selected no other checkbox may be selected.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning-State and Local: Select from the list provided, the systems of care the CoC coordinates with and assists in state and local discharge planning efforts to ensure those who are discharged from that system of care are not released directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

1D-1a. If the applicant did not check all the boxes in 1D-1, provide: (1) an explanation of the reason(s) the CoC does not have a discharge policy in place for the system of care; and (2) provide the actions the CoC is taking or plans to take to coordinate with or assist the State and local discharge planning efforts to ensure persons are not discharged to the street, emergency shelters, or other homeless assistance programs. (limit 1000 characters)

Non-applicable

1D-2. Discharge Planning: Select the system(s) of care within the CoC's geographic area the CoC actively coordinates with to ensure persons who have resided in any of the institutions listed below longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	X
Health Care:	X

Mental Health Care:	X
Correctional Facilities:	X
None:	

1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Using the drop-down menu, select the appropriate response(s) that demonstrate the process the CoC used to rank and select project applications in the FY 2017 CoC Program Competition which included (1) the use of objective criteria; (2) at least one factor related to achieving positive housing outcomes; and (3) included a specific method for evaluating projects submitted by victim service providers.

Attachment Required: Public posting of documentation that supports the process the CoC used to rank and select project application.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

1E-2. Severity of Needs and Vulnerabilities
CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.)
(limit 1000 characters)

The CoC Grants Evaluation Committee reviewed new & renewal projects for severity of needs and vulnerabilities of the target populations of each project. The CoC's Scoring Tool for New & Renewal projects allocated 20 points (20%) for prioritizing CH and commitment to low barrier program design, housing first approach & local prioritization standards. In addition to evaluating project applications, APRs & program policies & procedures were reviewed. All renewal projects were required to participate in CES to meet threshold criteria and new projects were required to commit to using CES in their project application. By requiring CES, all projects prioritize clients w/ the most severe needs & vulnerabilities including those w/ significant challenges requiring a higher level of support to maintain PH. Through a population-specific VI-SPDAT assessment, needs & vulnerabilities considered include current/past substance use, low/no income, criminal histories & history of victimization/abuse.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

Attachment Required: Documentation demonstrating the objective ranking and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available. Attachments must clearly show the date the documents were publicly posted.

Public Posting	
CoC or other Website	X
Email	X
Mail	
Advertising in Local Newspaper(s)	
Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)	X

1E-4. Reallocation: Applicants must demonstrate the ability to reallocate lower performing projects to create new, higher performing projects. CoC's may choose from one of the following two options below to answer this question. You do not need to provide an answer for both.

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.
Attachment Required - Option 1: Documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.
No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 2

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps. **Attachment Required: Copies of the written notification to project applicant(s) that their project application(s) were rejected. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction.**	08/18/2017
1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps. **Attachment Required: Copies of the written notification to project applicant(s) their project application(s) were accepted and ranked on the Priority listing.**	08/18/2017

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? **Attachment Required: If "Yes" is selected, a copy of the sections of the Governance Charter, or MOU/MOA addressing the roles and responsibilities of the CoC and HMIS Lead.**	Yes
2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA.	Governance Charter p. 13-14 (references MOU)
2A-2. Does the CoC have a HMIS Policies and Procedures Manual? Attachment Required: If the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual.	Yes
2A-3. What is the name of the HMIS software vendor?	Bitfocus Clarity
2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area.	Regional (multiple CoC)

2A-5. Per the 2017 HIC use the following chart to indicate the number of beds in the 2017 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells

in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	263	0	249	94.68%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	64	0	64	100.00%
Rapid Re-Housing (RRH) beds	45	0	45	100.00%
Permanent Supportive Housing (PSH) beds	405	0	398	98.27%
Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.
(limit 1000 characters)

Not applicable

2A-6. Annual Housing Assessment Report (AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR? 12

2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 05/01/2017

2B. Continuum of Care (CoC) Point-in-Time Count

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception.	01/24/2017
2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy)	04/28/2017

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specifically, how those changes impacted the CoCs sheltered PIT count results.
(limit 1000 characters)

The 2017 sheltered PIT count implementation was identical to 2016. Program staff, however, received additional training in preparation for the count to ensure all records were entered into HMIS for the night of the count.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count? No

2C-2a. If "Yes" was selected in 2C-2, enter the change in provider coverage in the 2017 sheltered PIT count, including the number of beds added or removed due to the change.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count? No

2C-3a. If "Yes" was selected in 2C-3, enter the number of beds that were added or removed in 2017 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT No

count implementation, including methodology and data quality changes from 2016 to 2017?
CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

2C-4a. Describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specify how those changes impacted the CoC's unsheltered PIT count results. See Detailed Instructions for more information.
(limit 1000 characters)

Not applicable

2C-5. Did the CoC implement specific measures to identify youth in their PIT count? Yes

2C-5a. If "Yes" was selected in 2C-5, describe the specific measures the CoC; (1) took to identify homeless youth in the PIT count; (2) during the planning process, how stakeholders that serve homeless youth were engaged; (3) how homeless youth were engaged/involved; and (4) how the CoC worked with stakeholders to select locations where homeless youth are most likely to be identified.
(limit 1000 characters)

CoC engaged stakeholders in planning process that included youth service providers including LGBTQ partners, school district, & youth including homeless and formerly homeless youth. CoC worked with stakeholders to identify locations that resulted in expanded coverage by going beyond known hot spots where youth gather, & going to all known drop-in centers, libraries, community centers, parks, & after school programs and hangouts where youth are known to attend. On-going meetings resulted in the development of outreach materials to let youth & those you engage youth know about the count in order to raise awareness, which was also accomplished through use of social media & resulted in the development of training materials that were youth-sensitive. Homeless and formerly homeless youth were engaged as counters. Post-count debriefs occurred during which feedback from stakeholders was given and is being used to inform future counts.

2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness.
(limit 1000 characters)

The actions taken by the CoC to better count included: throughout the year, the Planning and Research Committee met monthly to plan for the homeless count, which included discussing the existing PIT Count process in order to obtain input for changes in the upcoming count from committee members. Members

identified new locations, including hotspots, where individuals experiencing chronic homelessness, families with children and Veterans experiencing homelessness could be found during the night and the best way to encourage them to participate in the PIT Count. The committee also recruited homeless or formerly homeless individuals to participate in the count.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Reduction in the Number of First-Time Homeless. Describe: (1) the numerical change the CoC experienced; (2) the process the CoC used to identify risk factors of becoming homeless for the first time; (3) the strategies in place to address individuals and families at risk of becoming homeless; and (4) the organization or position that is responsible for overseeing the CoC's strategy to reduce or end the number of individuals and families experiencing homelessness for the first time.
(limit 1000 characters)

The CoC, led by the City, oversees this strategy, expanding HP services through $50k of Housing Successor Agency funding & increasing the supply of affordable hsg. HMIS data analytics are used to proactively target HP svcs & ID risk factors (income, hsg history, disability/illness, etc.). CES access pts conduct initial diversion/prevention assessment that immediately connects people with HP and/or DV svcs. HP uses the HF approach to quickly connect people to mainstream svcs, rental/utility assist, case mgmt, public benefits, & support svcs as needed, w/ the goal of stabilizing & avoiding future crises. Inclusionary zoning has created 456 affordable hsg units with an additional 118 in progress. Other measures include expanding the City's affordable hsg search website to include homeownership & rental units & developing a video series to assist HCVP participants find units. These efforts have resulted in the number of 1st time homeless decreasing by 15 between 2015 & 2016 (SPM 5.2).

3A-2. Performance Measure: Length-of-Time Homeless.
CoC 's must demonstrate how they reduce the length-of-time for individuals and families remaining homeless. Describe (1) the numerical change the CoC experienced; (2) the actions the CoC has implemented to reduce the length-of-time individuals and families remain homeless; (3) how the CoC identifies and houses individuals and families with the longest length-of-time homeless; and (4) identify the organization or position that is responsible for overseeing the CoC's strategy to reduce the length-of-time individuals and families remain homeless.
(limit 1000 characters)

The CoC, led by the City oversees this strategy. CES offers streamlined elig. & doc. rqmts w/ a "no wrong door" approach, prioritizing LOT w/ a pop-specific VI-SPDAT. SO workers use a by-name list & those most resistant to services are engaged w/ a motel voucher while taking meaningful steps towards PH ($75k Housing Successor Agency (HSA) program). Persons prioritized for PH through

CES are connected to Housing Navigators & all PH pgrms use a HF/low barrier approach w/ shelter diversion when possible & scaled PH. Accomplishments include a $30k Landlord Incentive/Mitigation fund (HSA funding) that offers holding fees & covers damages. While HDX reports for 2016 shows an increase over 2015 for LOT, the CoC's old HMIS had reporting inaccuracies. Since reporting to HDX, the CoC has changed vendors. The more accurate system reports avg LOT for ES & SH flat at 73 d btwn '15 & '16, +21 d for ES, SH & TH (107 to 86), w/ Median LOT + 1 for ES & SH (60 to 61) & -4 for ES, SH & TH (73 to 69).

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention

Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC's strategy for retention of, or placement in permanent housing.
(limit 1000 characters)

The CoC, led by the City, oversees this strategy. PH placement strategies include providing housing navigation to help secure PH, recruiting private landlords through Landlord Incentive/Mitigation fund, developing a TBRA mobility policy to increase PH supply, increasing RRH + PSH funding by leveraging other mainstream resources (County Measure H, Housing Successor Agency & State ESG) & directing/reallocating resources to PH projects. PH retention rates are addressed through intensive case mgmt informed by a HF approach that creates a housing plan focused on retention, overall wellness & psycho-social trauma informed supportive services w/ links to mainstream resources. The CoC will work to improve rates by communicating performance regularly at Housing Committee mtgs to inform practice & allow respond to technical assistance/capacity building needs. Successful exits from SO to PH (SPM 7a.1) increased by 17%, decreased by 6%, for ES, SH, TH & RRH (7b.1), & increased by 1% PH (7b.2).

3A-4. Performance Measure: Returns to Homelessness.

Describe: (1) the numerical change the CoC experienced, (2) what strategies the CoC implemented to identify individuals and families who return to homelessness, (3) the strategies the CoC will use to reduce additional returns to homelessness, and (4) the organization or position responsible for overseeing the CoC's efforts to reduce the rate of individuals and families' returns to homelessness.
(limit 1000 characters)

The CoC's strategy to reduce returns to homelessness is led by the City. Currently, all PH providers must initiate a case conference prior to exiting clients. Case conferencing includes case managers & other service providers who help to ensure a successful exit to PH & a safety net upon exit. Conferencing occurs monthly. As a result of these efforts, returns to homelessness from PH destinations at exit are very low; 21% of ES clients return to homelessness, 10% of TH, 3% of PH &13% cumulatively. By comparison, in 2015 16% of ES clients returned to homelessness, 9% of TH, 0% of PH & 8% overall. To further reduce the rate of returns in the next 12

months, the CoC will run monthly HMIS reports to monitor/ensure successful exits & quickly identify any returns to homelessness. If a client returns to homelessness, Program Managers will be notified to ensure clients are re-engaged. In addition, the CoC will analyze returns to homelessness quarterly to help identify trends & inform policy.

3A-5. Performance Measures: Job and Income Growth
Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, non-employment including mainstream benefits.
(limit 1000 characters)

CoC, led by City, oversees the strategy. Every PH participant is assessed for employment & connected to appropriate svcs. In 2016, 36% of stayers increased total income (+2% over 2015) & 37% of leavers (+2%). Providers connect employable participants to job prgs specifically targeted to homeless persons, ensuring customized support. Providers work w/ mainstream employment agencies such as CA EDD, CA DOR & DPSS' Welfare to Work. Additional Cty funding in 2018 will expand homeless employment prgs. In 2016, 9% of stayers increased earned income (-2%) & 7% of leavers (-23%). Decrease is due to prioritization of CH w/ most severe service needs for PSH who face numerous barriers to employment. Participants who are not employable receive expedited SSI/SSDI access w/ SOAR trained staff. In addition, participants are helped w/ obtaining non-cash benefits through DPSS (i.e. CalWorks, CalFresh & Medi-Cal). As a result, 30% of stayers increased non-employment income (+3%) & 30% of leavers (+18%).

3A-6. Did the CoC completely exclude a geographic area from the most recent PIT count (i.e. no one counted there, and for communities using samples in the area that was excluded from both the sample and extrapolation) where the CoC determined there were no unsheltered homeless people, including areas that are uninhabitable (deserts, forests).	No

3A.6a. If the response to 3A-6 was "Yes", what was the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoCs unsheltered PIT count?
(limit 1000 characters)

N/A

3A-7. Enter the date the CoC submitted the	06/05/2017

System Performance Measures data in HDX, which included the data quality section for FY 2016. (mm/dd/yyyy)	

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. Compare the total number of PSH beds, CoC program and non CoC-program funded, that were identified as dedicated for yes by chronically homeless persons in the 2017 HIC, as compared to those identified in the 2016 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	106	150	44

3B-1.1. In the box below: (1) "total number of Dedicated PLUS Beds" provide the total number of beds in the Project Allocation(s) that are designated ad Dedicated PLUS beds; and (2) in the box below "total number of beds dedicated to the chronically homeless:, provide the total number of beds in the Project Application(s) that are designated for the chronically homeless. This does not include those that were identified in (1) above as Dedicated PLUS Beds.

Total number of beds dedicated as Dedicated Plus	79
Total number of beds dedicated to individuals and families experiencing chronic homelessness	158
Total	237

3B-1.2. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Yes

3B-2.1. Using the following chart, check each box to indicate the factor(s) the CoC currently uses to prioritize households with children based on need during the FY 2017 Fiscal Year.

History of or Vulnerability to Victimization	X
Number of previous homeless episodes	X

Unsheltered homelessness	X
Criminal History	X
Bad credit or rental history (including not having been a leaseholder)	X
Head of Household with Mental/Physical Disability	X

3B-2.2. Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless; and (2) the organization or position responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 1000 characters)

The CoC, led by the City, oversees this strategy, which includes streamlined eligibility & documentation requirements through CES for families (CES-F) & direct referrals to RRH programs. CES-F provides initial triage with a 24-hr central phone system that offers motel vouchers (as needed) & connections to a comprehensive access point for a full VI-F-SPDAT assessment Once assessed, families are quickly referred to the most appropriate housing intervention. All RRH pgrms use a Housing First (HF) low-barrier approach w/ flexible rental assistance based on needs & barriers. RRH pgrms maintain an extensive network of landlords & have access to the City's Landlord Incentive/Mitigation pgrms, which provides holding fees up to FMR and provide incentives such as holding fees & damage mitigation. The City participates in property owner & developer's association mtgs to further encourage landlord participation. These efforts have proven effective with just 4 unsheltered families counted in 2017.

3B-2.3. Compare the number of RRH units available to serve families from the 2016 and 2017 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	2	17	15

3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing.
(limit 1000 characters)

CoC has policies and procedures that prohibit involuntary family separation based on age, sex, gender, LGBT status, marital status or disability that all CoC funded projects must comply by determining eligibility to projects regardless of sexual orientation, gender identity, marital status, or nonconforming to gender stereotypes; must provide equal access to projects consistent with household's

gender identity and family make-up; and take non-discriminatory steps to address privacy concerns raised by households. Projects provide written notice of any complaints and inform complainant. An investigation is made and corrective action is taken. All projects are required to keep records of all complaints, investigations, notices, and corrective actions consistent with its current record-keeping obligations for up to five years. Trainings are provided for all CoC projects and includes examples of project violations under the Equal Access Rule. Attendance is required.

3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

Human trafficking and other forms of exploitation?	Yes
LGBT youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes

3B-2.6. From the list below, select each of the following the CoC has a strategy for prioritization of unaccompanied youth based on need.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	X
Number of Previous Homeless Episodes	X
Unsheltered Homelessness	X
Criminal History	X
Bad Credit or Rental History	X

3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC's efforts. (limit 1500 characters)

The CoC is working to increase PH for youth by entering an MOU w/ a youth service provider to offer TBRA to clients. In addition, a regional Youth CES (YCES) has been established that provides streamlined access to developmentally appropriate housing support services for youth (16-24) experiencing homelessness & housing instability. YCES provides safety & support for youth in crisis, getting them quickly off the street & preventing them

from becoming CH adults. YCES utilizes a youth-specific VI-SPDAT that prioritizes youth for housing based on need. A by-name list is reviewed daily & youth providers meet on a bi-weekly basis for case conferencing. YCES uses a housing first model as well as TAY best practices when planning for housing stability of young people (i.e. low barrier services, harm reduction & retention/support services). Effectiveness of YCES is measured by the number of youth housed through CES in TH, PH & ES. Since Sept 2016, YCES has housed over 1000 youth regionally.

3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services.
(limit 1000 characters)

Formal partnerships have resulted in CoC and school district liaisons developing safeguards to protect students from discrimination by having local education stakeholders on committees who are involved in strategic planning activities regarding homelessness and children. As a result, policies and procedures have brought about a joint process to identify families experiencing, or at risk of homelessness that often happens while complying with the immediate enrollment mandate because of the lack of, or inaccurate, paperwork. Efforts to confirm student's living situation are grounded in sensitivity and respect bearing in mind the best interest of the student. Thus, verifying living status of students through landlords and law enforcement is not practiced. Relationships have been established with shelters and TH programs to assist in identifying students in ways not to create barriers and not embarrass families by conducting minimal investigation to verify living situation and conditions.

3B-2.9. Does the CoC have any written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No".

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	No
Head Start	No	No
Early Head Start	No	No
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	Yes	No
Birth to 3	No	No
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		

3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 1000 characters)

Several ways include: 1) having street outreach teams create a community-wide list of veterans that includes CH and hardest-to-reach; 2) implementing a CES in which street outreach workers and other homeless services staff enter veterans into the system, via the list, that helps match them to appropriate housing and services; 3) sharing the community-wide list of veterans across agencies that prioritize veterans eligible for VA housing programs; 4) coordinating an interagency group that meets weekly to implement action plans for veterans on the list who are eligible for VA services; 5) assigning veterans to housing navigators that help identify housing, including bridge housing if needed, and obtain and maintain PH; 6) implementing a Housing First approach that moves veterans into PH as quickly as possible with right level of services; and 7) ensuring connections to employment and legal services if needed. Veterans ineligible for VA services are assigned to housing navigators.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC?	Yes
3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?	Yes
3B-3.4. Does the CoC have sufficient resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach?	No

4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Select from the drop-down (1) each type of healthcare organization the CoC assists program participants with enrolling in health insurance, and (2) if the CoC provides assistance with the effective utilization of Medicaid and other benefits.

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits

CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how the CoC works with mainstream programs that assist homeless program participants in applying for and receiving mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits. (limit 1000 characters)

CoC works with many mainstream programs that assist with resources which includes SSA regarding SSI and SSDI which provides income, access to health care coverage, and workforce connections; also works with DPSS with TANF in regards to providing short-term housing assistance and adjusting benefit levels with variations in housing costs and food stamps; Covered California (ACA) regarding enrollment and payment for services for persons in PSH; Medi-Cal regarding eligibility and enrollment in specialty mental health and drug recovery services; local workforce system regarding education, training, and employment opportunities. CoC keeps program staff up to date through SOAR trainings and CES trainings that clarifies various roles of mainstream resource providers, prioritizing access to resources, and coordinating referrals. Organization responsible is Union Station Homeless Services/CES lead.

4A-2. Low Barrier: Based on the CoCs FY 2017 new and renewal project applications, what percentage of Permanent Housing (PSH) and Rapid Rehousing (RRH), Transitional Housing (TH), Safe-Haven, and SSO (Supportive Services Only-non-coordinated entry) projects in the CoC are low-barrier?

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	12.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	12.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	100.00%

4A-3. Housing First: What percentage of CoC Program Funded PSH, RRH, SSO (non-coordinated entry), safe-haven and Transitional Housing; FY 2017 projects have adopted the Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	12.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	12.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	100.00%

4A-4. Street Outreach: Describe (1) the CoC's outreach and if it covers 100 percent of the CoC's geographic area; (2) how often street outreach is conducted; and (3) how the CoC has tailored its street outreach to those that are least likely to request assistance.
(limit 1000 characters)

Outreach teams enable CoC to provide 100% of geographic area. Teams provide outreach five days a week and target areas within city that have visible and hidden encampments with persons with longest history of homelessness and most severe service needs. Outreach focus is for persons least likely to access services. Teams immediately begin to connect with them & connect them directly to resources that assist with obtaining permanent housing. Connecting with them includes engagement consisting of multiple contacts to build trust and entering information into a by-name master list that provides real time data that helps measure progress and helps make housing related decisions in real time. CES has protocols in place to ensure that persons have immediate access to assistance to resources that assist with obtaining permanent housing once persons are entered into CES. Resources include housing navigation to help with housing search and overcoming any barriers to obtain housing

4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or

disability; who are least likely to apply in the absence of special outreach. Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

All CoC projects must comply w/ CA/Federal nondiscrimination statutes & provide info to participants on rights & remedies available under those laws. Outreach is conducted through CES which markets housing & services to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual/perceived sexual orientation, gender identity, marital status, immigration status or limited English proficiency & those least likely to apply. Marketing materials include promotional materials (both printed and digital media) that describe CES in clear & concise language and indicate services are available to all eligible persons. CES materials are available in multiple languages to meet the needs of minority & ethnic groups, as well as people w/ Limited English Proficiency (LEP). Appropriate auxiliary aids & services are provided to people w/ disabilities. Agencies are required to retain records of marketing materials to ensure compliance.

4A-6. Compare the number of RRH beds available to serve populations from the 2016 and 2017 HIC.

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	4	45	41

4A-7. Are new proposed project applications requesting $200,000 or more in funding for housing rehabilitation or new construction? No

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statues who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3). No

4B. Attachments

Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site: https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	01_CoC's Communic...	09/23/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	02_2017 Consolida...	09/25/2017
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	03 - Rating & Rev...	09/24/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	04-Rating & Revie...	09/23/2017
05. CoCs Process for Reallocating	Yes	05 - CoCs Process...	09/24/2017
06. CoC's Governance Charter	Yes	06 - Governance C...	09/23/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies & P...	09/07/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Administratio...	09/05/2017
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No	CoC-HMIS MOU	09/19/2017
11. CoC Written Standards for Order of Priority	No	11. CoC Written S...	09/24/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	2016 Pasadena CoC...	09/05/2017
14. Other	No		
15. Other	No		

Attachment Details

Document Description: 01_CoC's Communication to Participants

Attachment Details

Document Description: 02_2017 Consolidated Application_Public Posting Evidence

Attachment Details

Document Description: 03 - Rating & Review Procedure

Attachment Details

Document Description: 04-Rating & Review: Public Posting

Attachment Details

Document Description: 05 - CoCs Process for Reallocating

Attachment Details

Document Description: 06 - Governance Charter

Attachment Details

Document Description: HMIS Policies & Procedures Manual

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Administration Plan

Attachment Details

Document Description: CoC-HMIS MOU

Attachment Details

Document Description: 11. CoC Written Standards for Order of Priority

Attachment Details

Document Description:

Attachment Details

Document Description: 2016 Pasadena CoC HDX-SPM

Attachment Details

Document Description:

Attachment Details

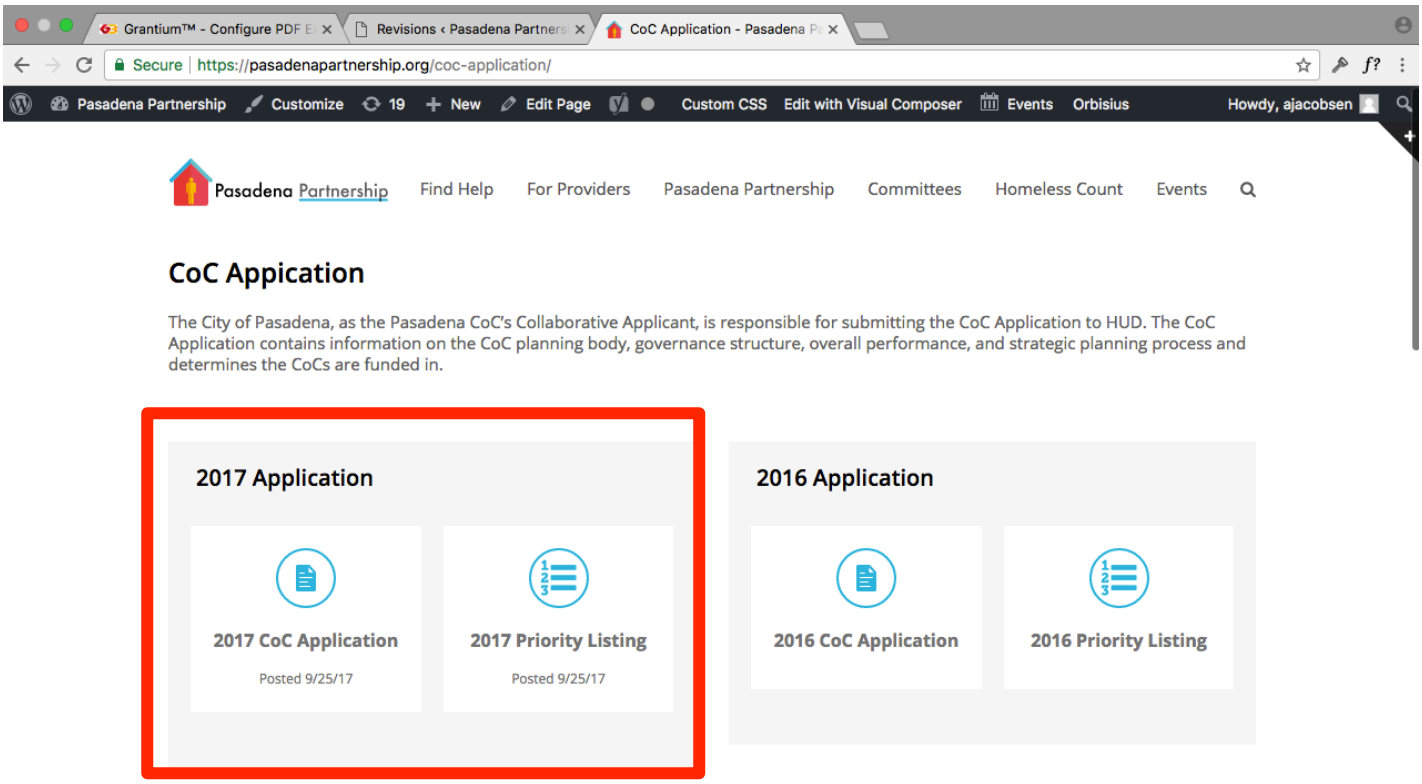
Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. Identification	08/24/2017
1B. Engagement	09/14/2017
1C. Coordination	09/21/2017
1D. Discharge Planning	08/24/2017
1E. Project Review	09/20/2017
2A. HMIS Implementation	09/20/2017
2B. PIT Count	09/14/2017
2C. Sheltered Data - Methods	09/14/2017
3A. System Performance	09/21/2017
3B. Performance and Strategic Planning	09/19/2017
4A. Mainstream Benefits and Additional Policies	09/14/2017
4B. Attachments	09/25/2017

Submission Summary	No Input Required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CoC Application - Pasadena P
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Pasadena Partnership
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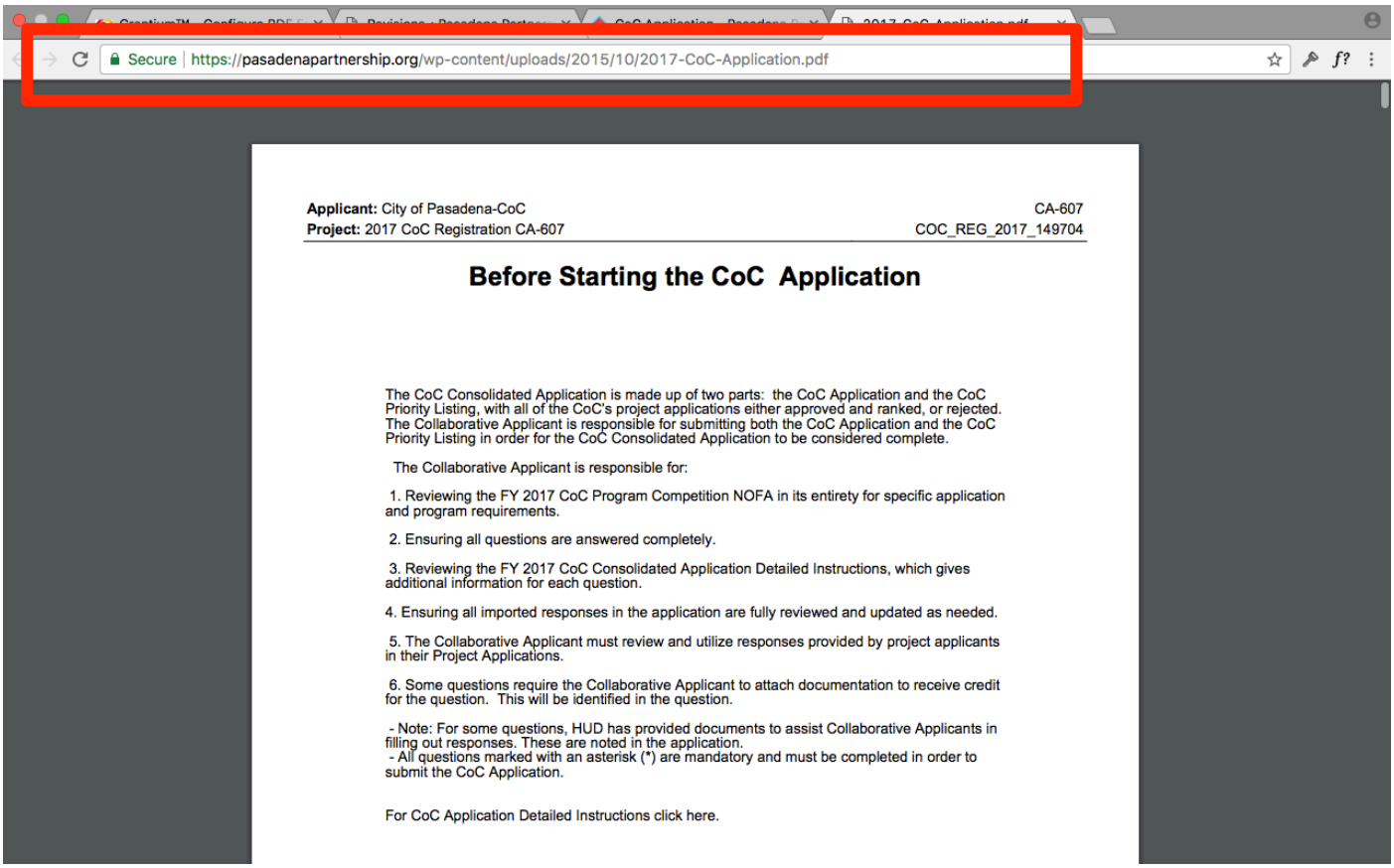
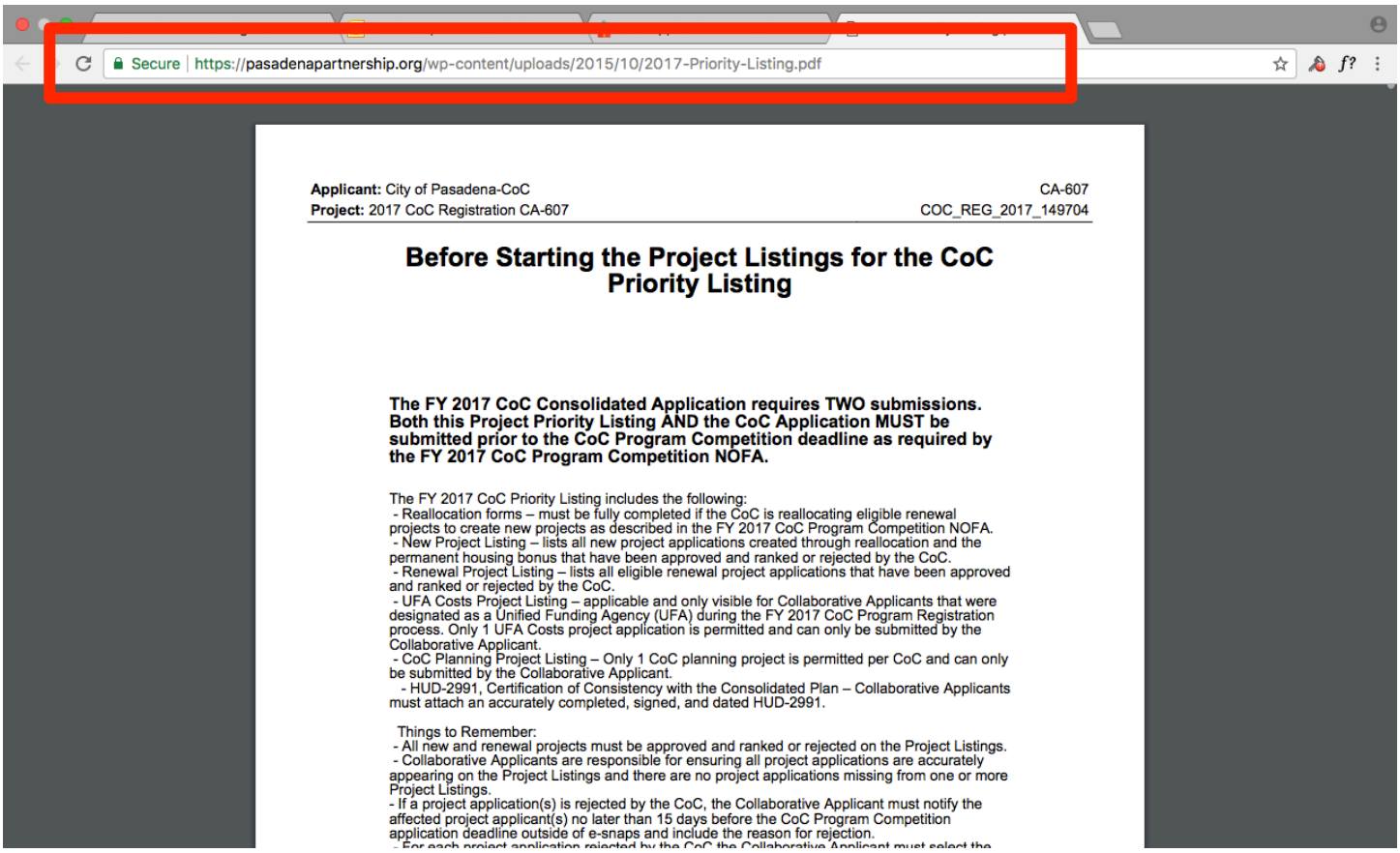
Edit Page
Custom CSS
Edit with Visual Composer
Events
Orbisius
Howdy, ajacobsen
Pasadena Partnership
Find Help
For Providers
Pasadena Partnership
Committees
Homeless Count
Events
CoC Appication
The City of Pasadena, as the Pasadena CoC's Collaborative Applicant, is responsible for submitting the CoC Application to HUD. The CoC Application contains information on the CoC planning body, governance structure, overall performance, and strategic planning process and determines the CoCs are funded in.
2017 Application
2017 CoC Application
Posted 9/25/17
2017 Priority Listing
Posted 9/25/17
2016 Application
2016 CoC Application
2016 Priority Listing


Secure | https://pasadenapartnership.org/wp-content/uploads/2015/10/2017-CoC-Application.pdf
Applicant: City of Pasadena-CoC
CA-607
Project: 2017 CoC Registration CA-607
COC_REG_2017_149704
Before Starting the CoC Application
The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.
The Collaborative Applicant is responsible for:
1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
2. Ensuring all questions are answered completely.
3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.
- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.
- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.
For CoC Application Detailed Instructions click here.

Secure | https://pasadenapartnership.org/wp-content/uploads/2015/10/2017-Priority-Listing.pdf



Before Starting the Project Listings for the CoC Priority Listing

The FY 2017 CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be submitted prior to the CoC Program Competition deadline as required by the FY 2017 CoC Program Competition NOFA.

The FY 2017 CoC Priority Listing includes the following:
- Reallocation forms – must be fully completed if the CoC is reallocating eligible renewal projects to create new projects as described in the FY 2017 CoC Program Competition NOFA.
- New Project Listing – lists all new project applications created through reallocation and the permanent housing bonus that have been approved and ranked or rejected by the CoC.
- Renewal Project Listing – lists all eligible renewal project applications that have been approved and ranked or rejected by the CoC.
- UFA Costs Project Listing – applicable and only visible for Collaborative Applicants that were designated as a Unified Funding Agency (UFA) during the FY 2017 CoC Program Registration process. Only 1 UFA Costs project application is permitted and can only be submitted by the Collaborative Applicant.
- CoC Planning Project Listing – Only 1 CoC planning project is permitted per CoC and can only be submitted by the Collaborative Applicant.
- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:
- All new and renewal projects must be approved and ranked or rejected on the Project Listings.
- Collaborative Applicants are responsible for ensuring all project applications are accurately appearing on the Project Listings and there are no project applications missing from one or more Project Listings.
- If a project application(s) is rejected by the CoC, the Collaborative Applicant must notify the affected project applicant(s) no later than 15 days before the CoC Program Competition application deadline outside of e-snaps and include the reason for rejection.
- For each project application rejected by the CoC the Collaborative Applicant must select the

[Reallocation Process for CoC Funding]

HUD expects communities to use the reallocation process to ensure that funding for the CoC program is competitive. The goals include helping communities progress toward HUD-identified priority areas, ensuring high standards for performance outcomes, and ensuring effective use of limited funding. CoCs are scored overall each year through the CoC Consolidated Application, and this score determines the CoC's competitiveness for renewal and new funding. Part of the score is based upon the CoC's use of the reallocation process.

OVERVIEW

As the decision-making body for the Pasadena CoC, the Pasadena Partnership to End Homelessness is responsible for decisions regarding reallocation. The Pasadena Partnership actively encourages new and existing providers to apply for new projects through reallocation. Reallocated funds can be used to create new evidence-informed projects, eliminate under performing projects, shift projects to other, more appropriate funding streams, ensure the Pasadena Partnership (CoC) inventory matches local need, and provide Coordinated Entry.

Decisions about reallocation are made on an ongoing basis and are based on a thorough analysis of needs and gaps in housing and services in the Pasadena Partnership (CoC). This includes an annual review of HUD priorities, gaps analysis of homeless populations and types of housing and services available in the community, utilization rates, reviews of HMIS data including the PIT and HIC counts and data trends over time, annual monitoring and threshold review data of the current CoC and ESG funded programs, and prioritizing needs of subpopulation.

VOLUNTARY REALLOCATIONS

Voluntary reallocations are initiated by a renewal project applicant by choice. There are different reasons a renewal project applicant might choose reallocation. An applicant might see a greater need in the community for a different type of project from the one they are currently operating. They might also recognize that a different type of project will better meet HUD's priorities for the CoC program, possibly making the CoC overall more competitive for additional funds for new projects. Or, an applicant may be prompted to consider changes to their project if they scored very low during the most recent Pasadena CoC renewal competition. The Pasadena Partnership works with these providers to develop reallocation plans for their programs to create the best program design to meet the needs of their community, focusing on PSH, RRH, or Coordinated Entry.

INVOLUNTARY REALLOCATIONS

Involuntary reallocation includes any renewal projects that are entirely eliminated by the Pasadena Partnership, or that have their renewal application reduced by the CoC. The CoC may pursue involuntary reallocation for renewal projects for multiple reasons, such as unspent funds, or scoring very low during the recent Pasadena Partnership renewal competition.

REALLOCATION PROCESS

Any decision to reallocate is finalized by the Pasadena Partnership Board who represents and is elected by the Pasadena Partnership membership at large. Reallocation occurs during the NOFA process once the allowable new projects for reallocation have been announced by HUD. The Board reviews the current inventory of CoC programs and votes on whether a reallocation is needed. This information is posted to the Pasadena Partnership website along with the Opportunity for Funding announcement, delineating new program criteria, the target population to be served, and a proposed overall budget. New projects proposed are reviewed and ranked with all applicants notified at least 30 days in advance of the NOFA submission to allow for solo application procedures. For new projects created through reallocation, the review process considers applicant and subrecipient eligibility and capacity, project eligibility, and project quality as part of the threshold review.

PASADENA PARTNERSHIP TO END HOMELESSNESS

[Governance Charter]

Michael Johnson, Board Chair

Revised September 2017

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[Introduction]

As the lead agency for the Pasadena Continuum of Care (CoC) CA-607, the Pasadena Partnership to End Homelessness (Pasadena Partnership) is dedicated to implementing evidence-based best practices throughout the City in order to prevent and end homelessness. This Governance Charter, which is updated annually, outlines the composition, governance structure, responsibilities, and regulations of the Pasadena Partnership for the purposes of achieving its mission.

NAME

The name of the organization is Pasadena Partnership to End Homelessness (hereinafter referred to as the "Pasadena Partnership").

GEOGRAPHIC BOUNDARIES

The Pasadena Partnership is responsible for the area that the U.S. Department of Housing and Urban Development (HUD) has designated for CA-607 Pasadena City which is the boundaries of the City of Pasadena (hereinafter referred to as the "geographic area").

PURPOSE

The Pasadena Partnership serves as the HUD-designated primary decision-making group whose primary purpose and scope is to implement the Continuum of Care program.

The program is designed to:

1. Promote community wide commitment to the goal of ending homelessness;
2. Provide funding for efforts by nonprofit providers, States, and local governments to quickly rehouse homeless individuals (including unaccompanied youth) and families, while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness;
3. Promote access to and effective utilization of mainstream programs by homeless individuals and families; and
4. Optimize self-sufficiency among individuals and families experiencing homelessness.

COLLABORATIVE APPLICANT

The Collaborative Applicant is the legal entity designated by the Continuum of Care to submit the CoC Program Grant application on behalf of the CoC. The Pasadena Partnership Collaborative Applicant will be the City of Pasadena. Guidelines for submission are detailed in the CoC Responsibilities section below.

MEETINGS

The Pasadena Partnership will conduct meetings of the full membership with published agendas at least four times a year. Meetings will be held at the principal office noted below unless otherwise noticed in advance.

PRINCIPAL OFFICE

The principal office of the Pasadena Partnership is located within the City of Pasadena Housing Department at 649 N. Fair Oaks Ave., 2nd Floor.

PROVISIONS TO AMEND GOVERNANCE CHARTER

This governance charter may be amended upon a two-thirds majority of all members present during a scheduled meeting.

[Membership]

The Pasadena Partnership is made stronger through the participation of broad and diverse Members. Therefore, membership is open to any individual or organization that embraces the mission, values and goals of the Pasadena Partnership. The Pasadena Partnership works to assure diverse input to deliberations and decision-making, including consumers and community members, as well as gender, ethnic, cultural and geographic representation.

Membership is defined as representatives from relevant organizations participating in the responsibilities of the Pasadena Partnership through active participation in its board, committees and working groups. All interested persons are encouraged to attend meetings, provide input, and voice concerns.

OPEN INVITATION

A public invitation within the geographic area for new members to join will be extended at least annually. Additional outreach includes community meetings, emails to Pasadena Partnership listservs and announcements on the Pasadena Partnership website to ensure participation from the following groups:

- Homeless service providers and agencies
- Victim service providers
- Homeless youth providers
- Faith-based organizations
- Local government representatives
- Key civic leaders
- Homeless and formerly homeless people
- Businesses
- Homeless advocates
- Public housing agencies
- School districts
- Social service providers
- Mental health agencies
- Hospitals
- Universities and academic institutions
- Affordable housing developers
- Law enforcement and corrections agencies
- Organizations that serve veterans and homeless and formerly homeless individuals
- Substance abuse recovery providers
- Employment service providers
- Mainstream resources

Membership is achieved through a request to be added to the Pasadena CoC and a commitment to actively participate in the responsibilities of the Pasadena CoC.

TERMS

There is no term limit. Membership, however, may be terminated by the Pasadena CoC in accordance with the guidelines below.

DECISION MAKING

A number equal to a majority of those serving on the Pasadena CoC will constitute a quorum for the transaction of business at any meeting. At all meetings, business items may be decided by arriving

at a consensus. If a vote is necessary, all votes will be by voice or ballot at the will of the majority in attendance. Each member agency will have one vote. One person may not represent more than one agency. No member may vote on any item which presents a real or perceived conflict-of-interest.

REMOVAL

Any member of the Pasadena CoC may be removed by a two-thirds majority of all members present during a scheduled meeting for repeated absence, disruptive behavior, misconduct, failure to participate, or violation of conflict of interest policies.

[Officers]

The officers of the Pasadena Partnership will be two (2) Co-Chairs and a Secretary. One Co-Chair will non-profit member organization or from a constituent group. The Secretary may be a representative from either a public or private agency.

Co-chairs are responsible for scheduling and setting the agenda for meetings. They will give all notices required by law or by this Governance Charter when necessary.

Secretary will keep accurate records of the acts and proceedings of all meetings including the names of those in attendance. The Secretary will have general charge of Pasadena Partnership records and will keep or cause to be kept all such records at the principal office of the Pasadena Partnership. The Secretary will chair meetings in the case of the absence of both Co-chairs.

NOMINATIONS

Nominations will be made by members of the Pasadena Partnership during the first regular meeting of a new calendar year.

ELECTION

Officers will be elected during the first regular meeting of a new calendar year.

TERM

Each officer will hold office for a term of one (1) year or until their successors have been elected and qualified. No person may hold more than one (1) office.

VACANCIES

Vacancies among the officers may be filled by a vote of the majority of Pasadena Partnership representatives at any meeting at which a quorum is present.

COMPENSATION

Officers will not be compensated for their services.

[Board]

The Pasadena Partnership Board is the primary decision making body for the Pasadena CoC. Board members determine the policy direction of the Pasadena Partnership and ensure that the CoC fulfills its responsibilities as assigned by the U.S. Department of Housing and Urban Development (HUD). Additionally, the board oversees and approves the work of Pasadena Partnership committees and workgroups.

COMPOSITION

The Pasadena Partnership will establish a board of at least five members to act on its behalf. The board will:

- Have a chair and co-chair
- Be representative of the relevant organizations and of projects serving homeless subpopulations;
- Include at least one homeless or formerly homeless individual;
- Include an individual from at least one Emergency Solutions Grants program (ESG) recipient agency; and
- Be composed of an uneven number

The board will not consist of representatives from subrecipient agencies that receive Continuum of Care Homeless Assistance or Emergency Solutions Grant (ESG) funding unless representatives from agencies that do not receive Continuum of Care Homeless Assistance or Emergency Solutions Grant (ESG) funding for one or more of the subpopulations listed above cannot be recruited as board members.

RESPONSIBILITIES

The Pasadena Partnership Board provides overall direction and leadership of the CoC process. Pasadena Partnership Board members will meet at least quarterly at a time agreed to by the membership. Members who fail to attend two (2) or more meetings during the course of the year without prior notification or discussion with the Chair may be removed from the Board. Members shall notify the Chair of their expected absence within 72 hours in advance of scheduled meetings.

Among its specified duties, the Pasadena Partnership Board is tasked with overseeing the Collaborative Application for the CoC, provide input into the planning, performance management, HMIS administration, and annual grant submission performed by the Pasadena Partnership. One of the Pasadena Partnership Board's primary responsibilities is the ranking and review of all new and renewal projects to be included in the CoC Application as well as making recommendations for reallocations. In this capacity, the Pasadena Partnership Board will hear and act on appeals from providers not in agreement with the recommendations for new, renewal, and reallocations during the CoC grant submittal process.

CHAIR AND CO-CHAIR RESPONSIBILITIES

The Chair governs and leads the Board of Directors, providing overall guidance at Board meetings. In the absence of the Chair, the Co-chair assumes the duties of the Chair. The Co-Chair is responsible for

scheduling meetings of the Pasadena Partnership Board, ensuring that the Board meets regularly or as needed, and for setting the agenda for these meetings. The Chair and Co-Chair are also responsible for reviewing any grievances towards the Pasadena Partnership or programs funded by the Pasadena Partnership.

NOMINATIONS

Nominations will be made by members of the Pasadena Partnership.

ELECTION

Pasadena Partnership Board members will be elected during the first regular meeting of a new calendar year. A Chair and a Vice Chair will be elected by the Pasadena Partnership Board. This process will be reviewed, updated, and approved by the Pasadena Partnership at least once every 5 years .

TERM

Pasadena Partnership Board members will serve a staggered term of three (3) years. Absent reappointment or a new appointment, Board Members shall continue to serve indefinitely following the end of their term. There shall be no limit on terms of service.

Immediately after this governance charter goes into effect half of the current Board members will be asked to voluntarily put themselves up for election during the calendar year. Newly elected Board members will start their terms in July 2015. The remaining Board members will stand for election the following year, and those newly elected Board members will start their terms in May 2016.

Board members may be terminated for reasonable cause. Reasonable cause includes, but is not limited to, the presence of a conflict of interest that cannot be mitigated or if attendance at meetings does not meet standards established by Pasadena Partnership.

VACANCIES

Vacancies among the board members may be filled by a vote of the majority of Pasadena Partnership Board representatives at any meeting at which a quorum is present.

MEETINGS

Meetings of the full Board with published agendas will occur at least four times a year. Meetings will be held at the principal office noted in Section VII below unless otherwise noticed in advance.

DECISION MAKING

A number equal to a majority of those serving on the Pasadena Partnership Board will constitute a quorum for the transaction of business at any meeting. At all meetings, business items may be decided by arriving at a consensus. If a vote is necessary, all votes will be by voice or ballot at the will of the majority in attendance. Each representative will have one vote. No member may vote on any item which presents a real or perceived conflict-of-interest.

[Committees]

The Pasadena Partnership will appoint committees, subcommittees, or working groups as the need arises. The purpose of these ad hoc committees and task forces will be to develop recommended solutions to the specific issue for which they were created. These committees may be comprised of members of the Pasadena Partnership and outside individuals with expertise in the subject matter. Committees will meet four times a year or more frequently depending on the tasks to be accomplished.

HOUSING COMMITTEE

The Housing Committee implements strategies that remove barriers and increase rehab and production of affordable housing (including permanent supportive housing) for homeless and at-risk households. In addition, this committee addresses gaps analysis in housing services and puts into practice strategies that promote housing first, homeless prevention, and rapid rehousing. Finally, the housing committee ensures homeless program compliance with fair housing including the needs of the LGBT population and tracks local, state, and national policies that influence and promote the activities noted above and makes recommendations to the Pasadena Partnership to support such policies.

HOMELESS PLANNING & RESEARCH COMMITTEE

The Homeless Planning & Research Committee improves CoC-wide participation in mainstream resources and programs, develops the CoC's centralized/coordinated assessment system, and implements strategies that provide a wide-range of social services. This committee also assists the City with the implementation of discharge planning and plans and improves CoC-wide participation in disaster planning.

HMIS & HOMELESS RESEARCH COMMITTEE

The HMIS and Homeless Research Committee is responsible for gathering data and providing analysis of research projects including homeless service and housing inventories, counts, and surveys. This committee also ensures the implementation of HMIS, including HMIS integration with homeless counts and surveys.

FAITH COMMUNITY COMMITTEE

The Faith Community Committee aims to facilitate faith-based agencies in their efforts to address homelessness in Pasadena. To this end, the Faith Community Committee researches and supports evidence-based and best practices to prevent and end homelessness in Pasadena and recruits representatives from other faith-based organization to participate in these efforts.

10-YEAR PLAN IMPLEMENTATION COMMITTEE

The 10-Year Plan Implementation Committee implements and evaluates the action steps outlined in the 10-Year Strategy to End Homelessness including the integration of the plan with other guiding elements such as the Consolidated Plan, Analysis of Impediments to Fair Housing Choice, and the Housing Element of the General Plan.

[CoC Responsibilities]

The Pasadena Partnership is the planning body that provides a forum for discussing plans to end homelessness in the CoC and measuring its effectiveness at meeting that goal. Responsibilities of the Pasadena Partnership are outlined below.

COORDINATED ENTRY SYSTEM

In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, the Pasadena Partnership will operate a coordinated entry system (CES) that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. Details about this system can be found in Appendix D: Coordinated Entry System. Key elements of this system include the following:

Standardized Evaluation

As detailed in Appendix D, CES utilizes the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT) as the common assessment tool to screen single individuals and families experiencing homelessness. The VI-SPDAT helps to determine an individual's level of vulnerability by collecting information on their history of homelessness, overall socialization and daily functions, and general wellbeing. General wellbeing includes any mental or physical ailments, substance abuse history, and prior physical abuse.

Prioritization of Clients to Receive Assistance

Pasadena Partnership's limited resources are directed first to individuals and families who are the most vulnerable or have the most severe service needs with the most appropriate referral. Less vulnerable individuals and families will be assisted as resources allow. As detailed in Appendix C, prioritization is in compliance with HUD Notice CPD-14-012.

Rental Assistance Standards

Finally, the CES will set standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance.

PERFORMANCE TARGETS AND EVALUATION

The Pasadena Partnership will consult the HUD CoC Program Grant guidelines, Emergency Solutions Grant guidelines, as well as grant recipients to establish performance targets appropriate for population and program type. The Pasadena Partnership will maintain and review HMIS, Annual Performance Reports, and other documentation as necessary to measure the Continuum of Care's progress in meeting HUD CoC Program Grant goals and objectives.

The Continuum of Care Board of Directors may establish additional performance measurement requirements as necessary to report progress on local goals and objectives. Collaborative Applicant staff will communicate with CoC Program Recipient Agencies throughout each program year to ensure that they are aware of expected performance measures required by HUD and the Continuum of Care Board of Directors.

Actions Against Poor Performance
CoC Program recipients who do not meet local and/or HUD performance targets and/or do not meet expectations and compliance of program and grant management of their CoC programs may be subject to having their projects reduced in whole or in part and reallocated to other projects during the renewal process as allowed in a HUD Notice of Funding Availability.

CONTINUUM OF CARE PLANNING

The Pasadena Partnership will coordinate and implement a housing and service system to meet the needs of the homeless population and sub-populations within its geographic area.

Key elements of Pasadena's plan are described below.

Systems Coordination
The Pasadena Partnership is responsible for coordinating and implementing a housing and service system that meets the needs of the homeless individuals (including unaccompanied youth) and families within its geographic area. At a minimum, this system will encompass the following:

- Outreach, engagement, and assessment;
- Shelter, housing, and supportive services; and
- Prevention strategies.

Point-in-Time Count
Consistent with HUD requirements, the Pasadena Partnership is responsible for planning for and conducting an annual point-in-time count of homeless persons within the geographic area that meets the following requirements:

- Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons;
- Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons; and
- Other requirements established by HUD by Notice.

Annual Gaps Analysis
The Pasadena Partnership is responsible for conducting an annual gaps analysis of the homeless needs and services available within the geographic area.

Consolidated Plan Information
The Pasadena Partnership is responsible for providing information required to complete the Consolidated Plan(s) within the Continuum's geographic area.

ESG Consultation
Emergency Solutions Grants program funds will be allocated, monitored, and evaluated in consultation with Pasadena Partnership (CoC) funds.

Discharge Planning
The Pasadena Partnership is responsible for coordinating resources and services with foster care agencies, health care institutions, mental health facilities, and correctional institutions as appropriate, in order to develop a discharge plan for persons exiting from state-operated or county supervised institutions.

In this capacity, the Pasadena Partnership will provide information to the agencies about housing options in order to assist the agency to develop a discharge plan. Housing options will include information about Housing Authorities, agencies that provide rental assistance, and as a last resort, shelter information. Foster care agencies, health care and mental health care institutions, and law enforcement will be invited to attend Pasadena Partnership meetings to offer an opportunity to collaborate with other agencies about housing issues and/or lack of housing. In addition, the Pasadena Partnership will assist and/or support agencies when writing for grants specifically targeting funding for housing.

DESIGNATING AND OPERATING AN HMIS

The Pasadena Partnership is responsible for designating and operating an HMIS and an eligible applicant to manage the HMIS, known as the HMIS Lead, consistent with the requirements in the HEARTH Act. The HMIS Lead is designated by the Pasadena Partnership to carry out the day to day operations of the HMIS, including: reviewing, revising, and approving a privacy plan, security plan, and data quality plan for the HMIS; ensuring consistent participation of recipients and subrecipients in the HMIS; and ensuring the HMIS is administered in compliance with requirements prescribed by HUD.

HMIS Collaborative
The Pasadena Partnership is part of the Los Angeles HMIS Collaborative, which includes the City of Pasadena, the City of Glendale, and the Los Angeles Homeless Services Authority (LAHSA). Roles and Responsibilities of collaborative members are outlined in the Los Angeles HMIS Collaborative Memorandum of Understanding (MOU).

Lead Agency Responsibilities
The HMIS Lead Agency which has the responsibility to establish, support, and manage HMIS in a manner that will meet HUD's standards for data quality, privacy, security, and other requirements for organizations participating in HMIS.

Responsibilities include:

- Overseeing the day-to-day administration of the HMIS system;
- Providing staffing for operation of HMIS;
- Providing technical support to participating agencies;
- Ensuring system integrity and availability;
- Providing training on software and related issues;
- Ensuring HMIS software is capable of producing required reporting including summary reports of un-duplicated client records;
- Ensuring participation in Annual Homeless Assessment Report (AHAR) and submission of usable data;
- Ensuring participation and reviews accuracy of data in the annual Housing Inventory Chart (HIC) and

submission of usable data;

- Ensuring participation and reviews accuracy of data for the annual Point-in-Time (PIT) chart;
- Ensuring compliance with all applicable federal and state laws regarding protection of client privacy and confidentiality regulations;
- Ensuring Participation Agreements with each contributing HMIS organization and ensuring that each HMIS user has signed a HMIS User Agreement;
- Ensuring and maintaining written agreements with participating agencies who share client level data that describes the level of data element or program information sharing among the data sharing HMIS agencies; and
- Providing information on HMIS agency performance for CoC annual ranking.

PREPARING AN APPLICATION FOR FUNDS

Each year the U.S. Department of Housing and Urban Development (HUD) releases a Notice of Funding Availability (NOFA) for the Continuum of Care (CoC) Program. The information in the NOFA identifies available funding and the procedures for the Pasadena Partnership (CoC) to apply for funds. Before the application is submitted to HUD, the Pasadena Partnership is required to hold a local competition to determine which projects will be included in the consolidated application, along with their relative priority. The results of the local competition dictate for which projects the Pasadena Partnership (CoC) will seek funding.

Consistent with HUD requirements, the Pasadena Partnership will include the following minimum components in its annual CoC Grant Application:

1. Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a Notice of Funding Availability (NOFA) published by HUD;
2. Establish priorities for funding projects in the geographic area; and
3. Assign the Collaborative Applicant to collect and combine the required application information from all projects within the geographic area that the Continuum has selected for funding and apply for Continuum of Care planning activities

The Continuum retains all of its responsibilities, including approving the Continuum of Care application.

Components

The CoC Consolidated Application is made up of three parts:

1. **CoC Application:** Includes information about the CoC planning body, governance structure, overall performance, and the strategic planning process. This part of the application is scored and will determine the order in which CoCs are funded.
2. **Project Applications**
3. **CoC Priority Listing:** Ranks projects in order of priority and identifies any project applications rejected by the CoC

Ranking and Review Process
The Pasadena Partnership Board will review annual renewal projects, recommend reallocations, and consider new projects for the Continuum of Care Application. All new and renewal projects selected to be including in the CoC Collaborative Application will be ranked by the Pasadena Partnership Board based on HUD's priorities as articulated in the NOFA.

Renewal Applications
Any agency interested in applying for renewal funds will be required to complete a Letter of Intent (LOI) that must be submitted by the posted due date. Eligible proposals will be prioritized for inclusion in the CoC's Collaborative Application by the Pasadena Partnership Board using the LOI Ranking Tool (Appendix B). The Collaborative Applicant (City of Pasadena) will conduct on-site monitoring visits, review annual APRs submitted to HUD, and conduct threshold reviews that will aid the Board in its decision-making process.

Reallocation
The Pasadena Partnership actively encourages new and existing providers to apply for new projects through reallocation. Reallocated funds can be used to create new evidence-informed projects, eliminate underperforming projects, shift projects to other, more appropriate funding streams, ensure the Pasadena CoC inventory matches local need, and provide Coordinated Entry.

Decisions about reallocation are made on an ongoing basis and are based on a thorough analysis of needs and gaps in housing and services in the Pasadena CoC. This includes an annual review of HUD priorities, gaps analysis of homeless populations and types of housing and services available in the community, utilization rates, reviews of HMIS data including the PIT and HIC counts and data trends over time, annual monitoring and threshold review data of the current CoC and ESG funded programs, and prioritizing needs of subpopulation. More information about the reallocation process can be found in Appendix A: Reallocation Process for CoC Funding.

New Projects as a Result of Bonus, Reallocation, or Pro-Rata Availability
When the Pasadena Partnership (CoC) is able to request project applications from the community due to availability of funds through bonuses, pro-rata, or reallocation, the Pasadena Partnership will accept and consider proposals from all eligible applicants, as defined by the current year's NOFA, including organizations that have not previously received CoC Program Funding.

The Pasadena Partnership will post on its website and distribute to its membership a public notice requesting applications. The Pasadena Partnership's (CoC) priorities and details of eligible applications, as defined by the current year's NOFA, will be posted. The due date for submission to the Pasadena Partnership will be at least 30 days prior to the due date of the CoC Collaborative Application. If there is no availability of funds for new applications through bonuses, pro-rata, or reallocation, the Pasadena Partnership will post a public notice on its website that it is not accepting new applications for the current CoC Application.

[CoC Regulations]

CODE OF CONDUCT

The following Code of Conduct provides a foundation of ethics for the Pasadena CoC. The Pasadena CoC prohibits the solicitation and acceptance of gifts or gratuities (anything of monetary value) by officers, employees and agents for their personal benefit. Ask yourself if the gift would have been offered if you did not have your position. If the answer is "No" then you should decline accepting the gift.

A. The Continuum promotes impartiality in performing official duties, and prohibits any activity representing a conflict of interest. You should not act on a matter if a reasonable person who knew the circumstances of the situation could legitimately question your fairness.

B. The Continuum prohibits the misuse of position. You cannot use your position with the Continuum for your own personal gain or for the benefit of family or friends.

C. Officers and employees shall put forth honest effort in the performance of their duties.

D. Officers and employees shall not knowingly make unauthorized commitments or promises of any kind purporting to bind the Continuum without previous Board approval.

E. Officers and employees shall disclose waste, fraud, abuse, and corruption to appropriate authorities.

F. Officers and employees shall adhere to all laws and regulations that provide equal opportunity for all Americans regardless of race, color, religion, sex, national origin, age, or handicap.

Violation of this any portion of this code will be subject to disciplinary action which could include immediate termination. The code has been distributed to the Continuum's Board of Directors, as well as posted on the Continuum's website. A link to the code has also been distributed to the Continuum's partner agencies.

CONFLICT OF INTEREST AND RECUSAL POLICY

Members must comply with the conflict of interest and recusal process of the HEARTH Act (§578.95). Pasadena CoC members with actual or perceived conflicts of interest must identify them as they arise. Individuals with a conflict of interest may participate in all discussion but shall recuse themselves from voting on any issue in which they may have a conflict. No member of the CoC Board shall vote upon any matter which shall have a direct financial bearing on the organization that the member represents or sits as a board member on the organization. This includes all decisions with respect to funding, awarding contracts, and implementing corrective actions as a result from monitoring activities of CoC and ESG activities.

[Administering Assistance]

WRITTEN STANDARDS FOR ASSISTANCE

The Pasadena Partnership has established and will follow written standards for providing assistance under the CoC and ESG program. These standards will address the following:

- Policies for prioritizing eligible households for the receipt of assistance (Appendix E: Coordinated Entry System (CES) Written Standards)
- Evaluation of eligibility of street outreach (Appendix E), transitional housing (Appendix F), rapid re-housing (Appendix G), and permanent supportive housing (Appendix H) assistance

SUBRECIPIENT CERTIFICATIONS

CoC subrecipient organizations certify assurances concerning:

- **Confidentiality Regarding Domestic Violence.** Subrecipients will maintain the confidentiality of records pertaining to any individual or family that was provided family violence prevention or treatment services through the project. In addition, subrecipients must maintain confidentiality of the addresses or locations of family violence projects, except with written authorization of the person responsible for such project.
- **Access to Education and Related Services.** Subrecipients will establish policies and practices that are consistent with, and do not restrict, the exercise of the rights provided by subtitle B of title VII of the Act and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness. If the subrecipient provides housing or services to families, it will designate a staff person to be responsible for ensuring that children served in the program are enrolled in school and connected to appropriate services in the community, including early childhood programs such as Head Startm part C of the Individuals with Disabilities Education Act, and programs authorized under subtitle B of title VII of the Act.
- **No Debarment.** Subrecipients agencies, their officers, and employees must not be debarred or suspended from doing business with the federal government.
- **Provision of Information to HUD.** Subrecipients must agree to provide information, such as data and reports, as required by HUD.

GRIEVANCE POLICY

It is the policy of the Pasadena Partnership to End Homelessness (Pasadena CoC) to provide its members with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints about programs, it must be clear that the Pasadena CoC is not an official oversight entity but does have considerable influence.

Each HUD funded organization shall have a grievance procedure and shall implement the procedure when applicable.

Written Complaints About the Pasadena CoC
The Pasadena CoC Board will review any written complaint against the Pasadena CoC within ten (10) days of its receipt. The Chair or the Co-Chair will respond within 30 days by:

- Assisting the complainant in articulating/identifying issues, if needed
- Determining what action needs to be taken, if any
- Responding in writing to complainant with clear identification of issue and specifics about its resolution

Complaints About a Program Receiving HUD Funds
A first-person written and/or documented complaint will be considered a grievance. A verbal, second-hand or hearsay complaint will be considered a complaint. The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the organization they are making the grievance or complaint about.

If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the Pasadena CoC will recommend that the person do so and document that recommendation.

If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the grievance or complaint in writing and submit it to the Chair of the Pasadena CoC. If there is a conflict apparent with reporting problems to the Chair, reports can be made to the Co-Chair. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the Chair or another Pasadena CoC member will document what has been said.

Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution. All complaints or grievances involving vulnerable adults or children will be immediately turned over to the appropriate authorities.

Once a complaint or grievance has been submitted, the Chair or Co-Chair will approach the problem program's representative, explain the complaint or grievance, and ask for a response to the charge(s). Responses will be documented. It will be up to the Chair or the Co-Chair to decide if the matter needs to be discussed by the Pasadena CoC Board.

If a program received three complaints, the Pasadena CoC Board will review the situation and recommend action. The Executive Director of the program being reviewed will be asked to respond to the Pasadena CoC Board.

Complaints about a Homeless Program Not Involved in or Funded by the CoC
Any complaints received against programs that are components of the Pasadena CoC but not participants in the process will be recorded. Information will be shared with the Pasadena CoC Board and/or funders or other stakeholders if and when deemed appropriate. All complaints or grievances involving vulnerable adults or children will be immediately turned over to the appropriate authorities.

Homeless Management Information System (HMIS) Policies and Procedures

Los Angeles HMIS Collaborative

Continuum of Care HMIS Leads:
Los Angeles Homeless Services Authority
City of Pasadena
City of Glendale

Last updated on: 5/17/2017

HMIS LEAD AGENCIES CONTACT INFORMATION

City of Glendale

City of Glendale Continuum of Care

141 North Glendale Avenue, Glendale, CA 91206

Tel: (818) 548-3720
Fax: (818) 548-3724

HMIS Contact Information		
Team	**Contact Email**	**Reason**
HMIS Program Assistant	isamvelyan@ci.glendale.ca.us	Requests for support related to data quality and management.
HMIS Administrator	isamvelyan@ci.glendale.ca.us	▪ General technical support for HMIS issues related to user access, troubleshooting, information requests, system functionality errors, etc. ▪ Training ▪ Requests for issues related to data quality, management and/or mandated reports, report failure, etc. ▪ Requests for issues related mandated reports, report failure, etc.

City of Pasadena

City of Pasadena Continuum of Care

649 North Fair Oaks Avenue, Pasadena, CA 91103

Tel: (626) 744 - 6701
Fax: (626) 744 - 8340

HMIS Contact Information		
Team	**Contact Email**	**Reason**
HMIS Program Assistant	alansing@CityofPasadena.net	Requests for support related to data quality and management.
HMIS Administrator	onazarian@CityofPasadena.net	▪ General technical support for HMIS issues related to user access, troubleshooting, information requests, system functionality errors, etc. ▪ Training ▪ Requests for issues related to data quality, management and/or mandated reports, report failure, etc. ▪ Requests for issues related mandated reports, report failure, etc.

Los Angeles Homeless Services Authority (LAHSA)

LAHSA is the HMIS lead for the Los Angeles Continuum of Care, comprised of the County of Los Angeles except for the cities of Pasadena, Glendale, and Long Beach.

811 Wilshire Boulevard, Los Angeles, CA 90017

Tel: (213) 683-3333
Fax: (213) 892-0093
TTY: (213) 553-8434

HMIS Contact Information		
Team	**Contact Email**	**Reason**
HMIS Support	HMISSupport@lahsa.org	General technical support for HMIS matters related to user access, troubleshooting, information requests, system functionality errors, etc.
IT Hardware Support	ITSupport@lahsa.org	General technical support for hardware failures, connectivity issues, etc.

LAHSA HMIS Website
http://hmis.lahsa.org/

LAHSA HMIS Training Website
http://training.lahsa.org/

Clarity HMIS Website
https://la.clarityhs.com/

Last updated on: 5/17/2017

PROJECT SUMMARY

Background

To end homelessness, a community must know the scope of the problem, the characteristics of those who find themselves homeless, and understand what is working in their community and what is not. Reliable data enables a community to work confidently towards their goals as they measure outputs, outcomes, and impacts.

A Homeless Management Information System (HMIS) is the information system designated by a local Continuum of Care (CoC) to comply with the requirements of CoC Program Interim Rule 24 CFR 578. It is a locally-administered data system used to record and analyze client, service and housing data for individuals and families who are homeless or at risk of homelessness. HMIS is a valuable resource because of its capacity to integrate and unduplicated data across projects in a community. Aggregate HMIS data can be used to understand the size, characteristics, and needs of the homeless population at multiple levels: project, system, local, state, and national.

The Annual Homeless Assessment Report (AHAR) is HUD's annual report that provides Congress with detailed data on individuals and households experiencing homelessness across the country each year. This report could not be written if communities were not able to provide HUD with reliable, aggregate data on the clients they serve.

In 2010 the U.S. Interagency Council on Homelessness (USICH) affirmed HMIS as the official method of measuring outcomes in its Opening Doors: Federal Strategic Plan to Prevent and End Homelessness. Through that effort, other federal programs that serve people experiencing homelessness populations are now required tocoordinate their efforts with HUD.

HMIS is now used by the federal partners and their respective programs in the effort to end Homelessness, which includes:

- U.S. Department of Health and Human Services (HHS)
- U.S. Department of Housing and Urban Development (HUD)
- U.S. Department of Veterans Affairs (VA)

Programs that receive other sources of funding are not required to participate in the HMIS, but they are strongly encouraged to participate to contribute to a more comprehenisive understanding of homelessness in the region.

The HMIS Data Standards (published in the 2017 HMIS Data Dictionary- 2017 HMIS Data Dictionary and HMIS Data Manual) provide communities with baseline data collection requirements developed by each of these federal partners.

LA HMIS is a response to the HUD mandated implementation of a Homeless Management Information System (HMIS) database. The LA HMIS is an online database used by organizations that provide services to persons experiencing homelessness or are at-risk of homelessness. It records demographic and service usage data and produces an unduplicated count of the people using those services.

The LA HMIS implementation is led by the LA HMIS Collaborative.

LA HMIS Collaborative

Under the guidance of the LA HMIS Collaborative, service providers are expected to participate in the LA HMIS to support local data collection, service, and planning functions within its jurisdiction. The LA Collaborative is comprised of three Continuums of Care (CoC):

- In Los Angeles County, there are four CoCs: (1) City of Glendale, (2) City of Pasadena, the (3) Los Angeles City/County, and (4) City of Long Beach. The LA HMIS Collaborative, includes Glendale, Pasadena and LAHSA, which is responsible for the City of Los Angeles and the balance of Los Angeles County. The City of Long Beach CoC administers a separate HMIS.

The LA Collaborative brings the following advantages:

- Comprehensive, consistent, coordinated provision of services between CoCs to meet the specific needs of the persons experiencing homelessness.

- Enhanced understanding of needs, service usage, and effectiveness using regional data and reports.

Mission Statement

The LA HMIS Collaborative will use the LA HMIS to advance the provision of quality services for persons who are homeless or at-risk of homelessness, to improve data collection and promote more responsive policies to prevent and end homelessness in Los Angeles County.

Vision

The LA HMIS Collaborative is dedicated to providing the best possible, highest quality regional HMIS to enhance the delivery of services for persons experiencing homelessness or at risk of homelessness. Specifically, the LA HMIS will:

- Facilitate the coordination of service delivery.
- Enable agencies to track referrals and services provided, report outcomes, and manage client data using an accessible, user-friendly and secure technology.
- Enhance the ability of policy makers and advocates to gauge the extent of homelessness and plan services appropriately throughout Los Angeles.

LA HMIS Software

LA HMIS is a comprehensive case management system that allows the LA Collaborative and Users to use the collected information to make informed policy and programmatic decisions. It also includes a focus on outcomes management, allowing the user to set and measure client and program milestones and achievements.

LA HMIS includes the following components:

- Advanced security features
- Bed tracking and assignment feature
- Client demographic data collection
- Comprehensive client case management
- Coordinated entry
- Customized assessment capability
- Customized reporting capability
- Employment, education, and housing history tracking
- Group case notes/services management
- Information and referral capabilities
- Outcome management
- Outreach
- Real-time data collection and reporting
- Swipe technology

1. ROLES AND RESPONSIBILITIES

1.1 LA HMIS Collaborative Responsibilities

Policy:

The Collaborative will be responsible for the organization and management of the LA HMIS.

Responsibilities:

The Collaborative is responsible for all system-wide policies, procedures, communication, and coordination. It is also the primary contact with HMIS vendor, and with its help, will implement all necessary system-wide changes and updates.

Procedure:

- HMIS Administrators are the primary positions at the LA Collaborative for HMIS management.

1.2 HMIS Administrator Responsibilities

Policy:

HMIS Administrators will provide training and technical support to Participating Organizations.

Responsibilities:

The HMIS Administrator is responsible for:

- Providing training support to Participating Organizations by determining training needs of Users, developing training materials, and training Users in equipment and software;
- Providing technical support to Participating Organizations;
- Managing user accounts and access control;
- Identifying and developing system enhancements and communicating changes to Participating Organizations;
- Communicating system-related information to Participating Organizations; and
- Developing and modifying reports for Users

Procedure:

- Each CoC will have a designated HMIS Administrator(s).

1.3 Organization Administrator Responsibilities

Policy:

Each Participating Organization must designate an Organization Administrator and a backup Organization Administrator responsible for the oversight of all personnel that generate or have access to client data in the LA HMIS to ensure adherence to the Policies & Procedures described in this document.

Responsibilities:

The Organization Administrator is responsible for:

- Serving as the primary contact between Users and HMIS Administrator;
- Providing technical support and escalating unresolved issues to the HMIS Administrator;
- Notifying all members of their organization of any system-wide changes and other relevant information;
- Conduct training for Users, based on local region policies;
- Notifying the HMIS Administrator of personnel changes within ten (10) business days;
- Monitoring compliance with standards of confidentiality and data collection, entry, and retrieval;
- Ensuring that all authorized Users complete training before being granted access to the system, including adherence and understanding of the HMIS User Agreement;
- Ensuring organizational adherence to the Policies and Procedures; and
- Detecting and responding to violations of the Policies and Procedures.

Procedure:

- Participating Organizations must provide their local HMIS Lead Agency the name and contact information of the Organization Administrator and backup Organization Administrator.
- Any changes to that information must be reported to the HMIS Administrator within ten (10) business days.

1.4 HMIS Lead Agency Communication with Participating Organizations

Policy:

The HMIS Administrator is responsible for communicating any system-related information to participating organizations in a timely manner.

Procedure:

- HMIS Administrators will communicate system-related updates to the Organization Administrator through various communication channels, which includes but is not limited to email, website, or newsletter.

- Organization Administrators are responsible for distributing information and ensuring that all members of their organization are informed of appropriate HMIS related communication.
- Specific communications will be addressed to the person or parties involved.
- Each HMIS Lead Agency will also distribute HMIS information on their designated website.

1.5 Participating Organization Communication with HMIS Lead Agency

Policy:

The Participating Organization is responsible for communicating needs and questions regarding the LA HMIS to the HMIS Administrator in a timely manner.

Procedure:

- Participating Organization will send email communication to the HMIS Administrator.
- Specific communications will be addressed to the person or parties involved.

2. IMPLEMENTATION POLICIES AND PROCEDURES

2.1 HMIS Organization Agreement Requirement

Policy:

The Executive Director of each Participating Organization shall follow, comply, and enforce the HMIS Organization Agreement (Appendix A). The Executive Director must sign the HMIS Participating Organization Agreement in advance of Users before granted access to the LA HMIS.

Procedure:

- An original, scanned, or a digitally signed HMIS Participating Organizations Agreement must be presented to the HMIS Administrator before program implementation or user training on the LA HMIS.
- After HMIS Participating Organizations Agreement is signed, the HMIS Administrator will train Users to use the LA HMIS.
- A username and password will be granted to Users after required training is completed.

2.2 HMIS User Agreement Requirement

Policy:

Users of any Participating Organizations shall follow, comply, and enforce the HMIS User Agreement (Appendix B). The User must sign an HMIS User Agreement before being granted access to the LA HMIS.

Procedure:

- The HMIS Administrator will provide the User a HMIS User Agreement for signature after required training is completed.
- The HMIS Administrator will collect and maintain HMIS User Agreements of all Users.

2.3 Data Collection Requirements

Policy:

Participating Organizations will collect and verify the minimum set of data elements for all clients served by their programs.

Procedure:

- Participating Organizations must enter data into the system within 3 days of collecting the information.
- Users must collect all the universal data elements set forth in the 2017 HMIS Data Standards Manual.

  The universal data elements include:

  - Name
  - Social Security Number
  - Date of Birth
  - Race
  - Ethnicity
  - Gender
  - Veteran Status
  - Disabling Condition
  - Project Entry Date
  - Project Exit Date
  - Destination
  - Relationship to Head of Household
  - Client Location
  - Housing Move-In Date
  - Living Situation

- Users must also collect all the program-specific data elements at project entry and exit set forth in the 2017 HMIS Data Standards. The program-specific data elements include:

  - Income and Sources
  - Non-Cash Benefits
  - Health Insurance
  - Physical Disability
  - Developmental Disability
  - Chronic Health Condition
  - HIV/AIDS
  - Mental Health Problem
  - Substance Abuse
  - Domestic Violence
  - Contact
  - Date of Engagement
  - Bed-night Date
  - Housing Assessment Disposition

- These standards are already required fields in the LA HMIS. For other funder-specific program data elements refer to the 2017 HMIS Data Standards Manual.

- Disclaimer: while these are the minimal standard per HUD, each CoC may have additional data collection requirements.

2.4 Technical and Security Standards

Policy:

Participating Organizations must meet the technical standards outlined below to participate in the LA HMIS.

Procedure:

The Clarity Human Services software takes advantage of the latest in web technologies. For both security and compatibility, your local IT Staff should ensure all workstations are outfitted with the latest version of the Web Browser you use.

The following web browsers are supported by Clarity:

- Microsoft
- Mozilla
- Google
- Apple
- Mac

- Connection to the internet is the sole responsibility of the Participating Organizations and is a requirement to participate in the LA HMIS.

- All Operating systems should have the latest Service Pack applied. Network design should allow for uninterrupted communication between Application, Database, Report, and Batch servers. Communication should be capable using the following standard protocols TCP/IP, WIN, DNS, Named Pipes, and NetBIOS. All communication between servers should be designed to be performed on Local Area Network.

For security purposes, all computers must have the following:

- An updated and adequate firewall protection.
- Virus protection software in which virus definition must be updated regularly.

2.5 Maintenance of Onsite Computer Equipment

Policy:

Participating Organizations will commit to a reasonable program of equipment maintenance to sustain an efficient level of system operation.

Procedure:

- The Executive Director (or other empowered officer) will be responsible for the maintenance and disposal of onsite computer equipment. This includes:

    - Purchase of and upgrades to all existing and new computer equipment for utilization in the system.
    - Workstations accessing the system must have a username/password to log onto Microsoft Windows Operating System.
    - Workstation access system must have locking, password-protected screen saver.
    - All workstations and computer hardware (including organization network equipment) must be stored in a secure location (locked office area).

2.6 HMIS Technical Support Protocol

Policy:

Each HMIS Lead Agency will provide technical support to all Participating Organizations as needed.

Procedure:

1. Users should first seek technical support from the Organization Administrator.
2. If more expertise is required to further troubleshoot the issue, Organization Administrator will contact the HMIS Help Desk.
3. The HMIS Administrator support Hours are Monday through Friday (excluding holidays) from 9:00 am to 5:00 pm.
4. The Organization Administrator will provide sufficient issue details where possible (or help recreate the problem by providing all information, screenshots, reports, etc.) for the HMIS Administrator to recreate the problem.
5. The HMIS Administrator will try to respond to all email inquiries and issues within 3 business days, but support load, holidays, and other events may impact response time.
6. The HMIS Administrator will submit a ticket to vendor if the issue cannot be resolved by the HMIS Administrator.

- For LAHSA HMIS/IT Technical Support, see the Supplemental Policies for LAHSA Only.

2.7 System Availability

Policy:
The LA HMIS will be available to Users at a minimum of 97.5% of the year. The vendor and the HMIS Lead Agency will inform Users in advance of any unplanned interruption in service.

Procedure:
- The vendor will communicate to the Collaborative Lead Member and backup of any necessary downtime for system upgrades and patches. These will be performed outside of business hours when possible.
- If it is determined that the LA HMIS accessibility is disabled system-wide, the HMIS Administrators will analyze and determine the problem.
- The HMIS Administrator will work with the software vendor to repair the problem.
- The HMIS Administrators will send email communication to the Organization Administrator within 2 hours of issue discovery and inform them of anticipated interruptions to system availability.

2.8 Participation Fees

Policy:
Each Continuum of Care reserves the right to charge a participation fee to use the system.

Procedure:
- Consult local HMIS Lead Agency regarding fees.

2.9 Computer Equipment and Supplies

Policy:
Each Continuum of Care may provide computer equipment and supplies at the HMIS Lead Agency's discretion.

Procedure:
- Consult local HMIS Lead Agency regarding computer equipment and supplies policies.

3. SECURITY POLICIES AND PROCEDURES

3.1 User Authentication

Policy:
LA HMIS can only be accessed with a valid username and password combination. The HMIS Administrator will provide unique username and initial password for eligible individuals after completion of required training and signing of the HMIS User Agreement and receipt of these Policies and Procedures.

Procedure:

- The Participating Organization will determine which of their employees will have access to the LA HMIS. User access will be granted only to those individuals whose job functions require legitimate access to the system.
- Proposed User must complete the required training and demonstrate proficiency in use of system.
- Proposed User must sign the HMIS User Agreement stating that he or she has received training, will abide by the Policies and Procedures, will appropriately maintain the confidentiality of client data, and will only collect, enter and retrieve data in the system relevant to the delivery of services to people.
- HMIS Administrators will be responsible for the distribution, collection, and storage of the signed HMIS User Agreements and receipts of these Policies and Procedures.
- The HMIS Administrator will assign new user with a username and an initial password.
- Sharing of usernames and passwords will be considered a breach of the HMIS User Agreement as it compromises the security to clients.
- Organization Administrator is required to notify the HMIS Administrator immediately when a User leaves employment with the organization or no longer needs access.
- HMIS Administrator will terminate access upon notification of the Organization Administrator within 1 week of receiving the Revocation Form.

3.2 Passwords

Policy:
User will have access to the LA HMIS via a username and password. Passwords will be reset every 180 days. User will maintain passwords confidential.

Procedure:

- The HMIS Administrator will provide new User a unique username and temporary password after required training is completed.
- User will be required to create a permanent password that is between eight and sixteen characters in length. It must also contain characters from the following four categories: (1) uppercase characters (A through Z), (2) lower case characters (a through z), (3) numbers (0 through 9), and (4) non-alphabetic characters (for example, $, #, %).

- For security purposes, the Forced Password Change (FPC) will occur every 180 consecutive days and the User will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.
- After 60 minutes of inactivity, User will get a session timeout warning popup that will allow Users to continue their session or will automatically log the user off after 60 minutes of inactivity.
- User can reset his or her own password from the log-in screen.
- Access permission will be revoked after the User unsuccessfully attempts to log on three times. The User will be unable to gain access until they reset their password or after one hour.

3.3 Extracted Data

Policy:

Users will maintain the security of any client data extracted from the LA HMIS and stored locally, including all data contained in custom reports. Users may not electronically transmit unencrypted client data across a public network.

Procedure:

- Data extracted from the LA HMIS and stored locally will be stored in a secure location and will not be transmitted outside of the private local area network unless it is properly protected.
- Personal identifiable client data will not be distributed through email.
- Any security questions can be addressed to the HMIS Administrator.

3.4 Encryption Management

Policy:

Client data stored on the central server will always be encrypted except during specific procedures.

Procedure:

- Client data will only be decrypted when the LA HMIS server becomes obsolete and necessitates an upgrade in technology. Should the necessity arise, the HMIS Administrator, on behalf of the vendor, will obtain the written permission of the Executive Management of each Participating Organizations to perform the decryption and subsequent database conversion to a new technology.

3.5 Hardware Security Measures

Policy:

All computers and networks used to access LA HMIS must have virus protection software and firewall installed. Virus definitions and firewall must be regularly updated.

Procedure:

- HMIS Lead Agency must confirm that Participating Organizations has virus protection software and firewall installed prior to granting LA HMIS access.
- Virus definition must be updated regularly.
- Firewall must be placed between any computer and internet connection for the entire network, be protected with at minimum Wired Equivalent Privacy (WEP), use Network Address Translation (NAT), and maintain the most recent virus security updates.
- The Organization Administrator will ensure that computers maintain security specifications.

3.6 Backup and Recovery Procedures

Policy:

The vendor will perform regular schedule backups of the system to prevent the loss of data. Multiple levels of backup and storage will be used for key data and files within the LA HMIS.

Procedure:

- The vendor's designated hosting company will perform data backup procedures in the following manner:

    1. Daily – resulting in a seven (7) day backup;
    2. Weekly – resulting in a four (4) or five (5) week backup; and
    3. Monthly – during the term of contract with the vendor.

- The vendor shall maintain an off-site storage of tapes in fire proof containers.

- The vendor recovery procedures will be undertaken on a best efforts basis to achieve the following response times:

    1. Data Loss – confirmation response and recovery implementation within 4 hours of reported data loss by the local HMIS Administrator
    2. LA HMIS source code corruption and/or user functionality loss – confirmation response within 4 hours and full initiation of recovery procedures within 24 hours of reported disruption by the local HMIS Administrator.
    3. Disaster – notification within 4 hours and recovery implementation to fully re-establish operations within 5 business days.

3.7 Security Review

Policy:

Each HMIS Lead Agency will complete an annual security review to ensure the implementation of the security requirements for itself and Participating Organizations.

Procedure:

- The HMIS Lead Agency will conduct a security review that includes the completion of a security checklist ensuring that each security standard is implemented.

3.8 Security Violations and Sanctions

Policy:

Any User found to be in violation of security protocols of the organization procedures or Policies and Procedures will be sanctioned accordingly. All Users must report potential violations of any security protocols described in the Policies and Procedures.

Procedure:

- Users are obligated to report suspected instances of noncompliance and/or security violations to the Organization Administrator or HMIS Administrator as soon as possible.
- The Organization Administrator or HMIS Administrator will investigate potential violations.
- Any User found to be in violation of security protocols will be sanctioned accordingly. Sanction may include but are not limited to suspension of system privileges and revocation of system privileges.

4. OPERATIONAL POLICIES AND PROCEDURES

4.1 User Access Levels

Policy:
User will be designated a user access level that controls the level and type of access the user has to data and functionality within the LA HMIS.

Procedure:

- HMIS Administrator, in consultation with the Participating Organization, will assign the level and type of access the user will have in the system.
- Organization Administrator is required to communicate to HMIS Administrator when User's need for access changes.
- HMIS Administrator will terminate access upon notification and receipt of Termination of Employee Form from the Organization Administrator.
- HMIS Administrator will revoke user access to anyone suspected or found to be in violation of the policies outlined in this document or the HMIS User Agreement.

Please see Clarity Access Roles Matrix on Appendix J that lists the levels of access tied to existing user roles across the LA Collaborative. This might include a role not available within local continuum. Consult local HMIS Lead Agency to learn which user access levels are available, as well as other customizable roles, such as Coordinated Entry, that may be offered after consultation with and approval from the HMIS Administrator (See HMIS Lead Agencies Contact Information).

4.2 Training

Policy:
Each User must complete the required training and any additional training relevant to their position prior to gaining access to the LA HMIS. HMIS Administrators will provide training to all Users.

Procedure:

- HMIS Administrator will provide Basic User Training to proposed Users. Organization Administrator may be trained to provide Basic User Training to support organization personnel or personnel of the other organization's in LA County, if applicable. Consult local HMIS Lead Agency (See HMIS Lead Agencies Contact Information).
- User must successfully complete the Basic User Training to demonstrate proficiency in the system and understanding of the Policies and Procedures.
- HMIS Administrator will provide new User with a copy of the Policies and Procedures and HMIS Users Guide.
- HMIS Basic Training completed in one region will satisfy the training requirements in any other region in the Collaborative.

- For LAHSA Participating Organizations, see the Supplemental Policies for LAHSA Only: LAHSA Training Requirements.

4.3 User Guide

Policy:

Each User will receive a copy of the LA HMIS User Training Manual.

Procedure:

- The HMIS Administrator will create and update the user training manual as needed.
- The user training manual will contain instructions on how to use the system.
- Each User will be given a user training manual after completing training.

4.4 Client Consent to Share Information and Confidentiality

Policy:

Participating Organizations must obtain informed, signed consent prior to either entering or accessing any client protected personal information (PPI) into the LA HMIS. Services will not be denied if client chooses not to include personal information. Personal information collected about the client should be protected. Each Participating Organization and User must abide by the terms in the HMIS Participating Organizations Agreement and HMIS User Agreement.

Procedure:

- Client must sign Consent to Share Protected Personal Information (Appendix C).
- Clients that provide permission to enter personal information allow for Participating Organizations within the region to share client and household demographic data.
- Participating Organizations must store signed Consent to Share Protected Personal Information Agreement in client record for auditing purposes.
- Participating Organizations must post a Notice Regarding Collection of Personal Information (Appendix E) that explains the uses and disclosures of information.
- Participating Organizations must provide a copy of the Privacy Notice upon request.
- If a client refuses to provide consent, the User should not include any personal identifiers (such as first name, last name, social security number, date of birth, etc.) in the client record. Instead, User should include a client identifier to recognize the record in the system.
- Participating Organizations shall comply with Federal and State confidentiality laws and regulations that protect client records.

HIPAA-Covered Entities:

An organization that is covered under the HIPAA standards is not required to comply with the HMIS privacy or security standards, so long as the organization determines that a substantial portion of its protected information about homeless clients or homeless individuals is indeed protected health information as defined in the HIPAA rules.

HIPAA standards take precedence over HMIS because HIPAA standards are finely attuned to the requirements of the health care system; they provide important privacy and security protections for protected health information; and it would be an unreasonable burden for providers to comply with and/or reconcile both the HIPAA and HMIS rules. This spares organizations from having to deal with the conflicts between the two sets of rules.

4.5 Revocation of Consent

Policy:

In the event that a client previously gave consent to share their PPI in the LA HMIS and chooses at a later date to revoke consent, a Revocation of Consent (Appendix G) must be signed by client.

Procedure:

- Upon request, the Participating Organization must modify the client information by removing any personal identifiers (First Name, Last Name, Social Security Number, and Date of Birth) from the client record.
- Users should include a client identifier to recognize the record in the system.
- Participating Organization's that have previously provided services will still have access to client protected personal information.

4.6 Data Sharing

Policy:

Client data (with consent) contained in LA HMIS will be shared with other Participating Organizations.

Procedure:

- Data sharing refers to the sharing of information between Participating Organizations for the coordination of case management and client service delivery.
- Users found to be sharing program level client data without consent will have their access terminated.

4.7 Client Record Access

Policy:

Client may obtain and inspect a copy of their client information. The Participating Organization, as the custodian of the client data, has the responsibility to provide the client with the requested information except where exempted by state and federal law.

Procedure:

- Client information contained in the universal data elements can be provided at any organization the client requests it from, if the client has previously given the other organization consent to share and that consent is still in force. The Participating Organization may not share any client information entered by other agencies beyond the universal data elements.
- The Organization Administrator will review client information with client if he or she requests to view their HMIS data.
- No client shall have access to another client record in the system.
- Client may request that PPI be removed from the system. In response, the Organization Administrator will remove such data from record within 5 business days.
- A copy of the requested data will be provided to client within a reasonable time frame.
- Parental or guardian access will be decided based upon existing organization guidelines.

4.8 Client Grievance

Policy:

Clients will file grievances with Participating Organizations. Participating Organizations must have written grievance procedures that can be provided to client upon request. Any unresolved grievances may be escalated to the local HMIS Lead Agency.

Procedure:

- Clients will submit grievance directly to Participating Organizations with which they have a grievance.
- Upon client request, Participating Organizations will provide a copy of their grievance procedure and the LA HMIS Policies and Procedures.
- The Participating Organization will be responsible to answer any questions and complaints regarding the LA HMIS. A record of all grievance and any attempts made to resolve the issue must be kept in file. If the grievance is resolved, Participating Organizations will include the date and a brief description of the resolution. For any written complaint, Participating Organizations must send a copy to the local HMIS Lead Agency.
- If the Participating Organization is unable to resolve the problem, the client must complete the Grievance Form (Appendix H) outlining the date of incident, name of parties involved, description of the incident, and their contact information for follow-up. Participating Organizations must forward a copy of the completed Grievance Form to the local HMIS Lead Agency.
- The local HMIS Lead Agency will review and determine the need for further action.

5. DATA POLICIES AND PROCEDURES

5.1 Data Quality

Policy:

All data entered into the LA HMIS must meet data quality standards. Users will be responsible for the quality of their data entry.

- **Definition:**
  Data quality refers to the timeliness, completeness, and accuracy of information collected and reported in the LA HMIS.

Data Timeliness:

Users must enter all universal data elements and program-specific data elements within 3 days of collection.

Data Completeness:

All data entered into the system must be complete, unless otherwise authorized by the HMIS Lead, following data collection standards set by the 2017 HUD HMIS Data Standards.

Data Accuracy:

All data entered shall be collected and entered in a common and consistent manner across all programs.

Procedure:

- Participating Organizations must sign the Participating Organization Agreement to ensure that all participating projects are aware and have agreed to the data quality standards.
- Upon agreement, Participating Organizations will collect and enter as much relevant client data as possible for the purposes of providing services to that client.
- All data will be input into the system within 3 days of collection.
- The HMIS Administrator will conduct regular checks for data quality. Any patterns of error or missing data will be reported to the Organization Administrator.
- Users will be required to correct the identified data error and will be monitor for compliance by the Organization Administrator and the HMIS Administrator.
- Users may be required to attend additional training as needed.

5.2 Data Use and Disclosure

Policy:

All Users will follow the data use Policies and Procedures to guide the data use of client information stored in the LA HMIS.

Definitions:

Client data may be used or disclosed for system administration, technical support, program compliance, analytical use, and other purposes as required by law, and as outlined by the Privacy Notice, HMIS Participating Organization Agreement and HMIS User Agreement. Uses involve sharing parts of client information with persons within an organization. Disclosures involve sharing parts of client information with persons or organizations outside an organization.

Procedure:

- Participating Organizations may use and disclose data contained in the system to support the delivery of services to clients experiencing homelessness or at-risk of homelessness in Los Angeles.
- Each of the continuums within the LA HMIS Collaborative shall have access to their respective agencies' client data stored in the system. The Collaborative will use the data for various purposes including; administrative functions, technical support, program compliance, and analytical use. Unless restricted by other laws, the information collected can be shared and disclosed under the circumstances outlined in the Privacy Notice. Upon signing the client consent form, protected personal information may be disclosed for service provision purposes.
- The vendor and any authorized subcontractor shall not use or disclose data stored in the LA HMIS without expressed written permission in order to enforce information security protocols. If granted permission, the data will only be used in the context of interpreting data for research and system troubleshooting purposes. The Service and License Agreement signed individually by each Continuum and vendor contain language that prohibits access to the data stored in the software except under the conditions noted above.

5.3 Data Release

Policy:

All LA HMIS stakeholders will follow the data release Policies and Procedures to guide the data release of client information stored in the LA HMIS.

Definition:

Data release refers to the dissemination of aggregate or anonymous client-level data for the purposes of system administration, technical support, program compliance, and analytical use.

Procedure:

- No identifiable client data will be released by Participating Organizations to any person, agency, or organization for any purpose without written permission from the client.
- Each Participating Organization owns all data that is stored in the system. The organization may not release personal identifiable client data without written permission from the client. Organizations may release program and/or aggregate level or de-identified data for all clients to whom the organization provided services.
- Each of the continuums within the LA HMIS Collaborative may release aggregate or de-identified data about its own continuum at the program, sub-regional, and regional level. Aggregate or de-identified data may be released without organization permission at the discretion of the Continuum. The Collaborative may develop an annual release of aggregate data in a summary report format.

5.4 Data Migration

Policy:

Data migration or uploads from legacy systems is not allowed, unless approved by the HMIS Administrators.

Definition:

Data migration (or conversion): a one-time process of transferring data from any existing system to the LA HMIS. Upon transfer, the organization abandons its existing system and uses the LA HMIS for recording all client-related data.

Data uploads (transfers): ongoing, periodic process of transferring data from an existing system to the LA HMIS. Data uploads follow the same procedures as above, but the organization continues to use its existing system for recording all client-related data.

Procedure:

- Migrated data must be non-duplicated and an exact match to the existing field type of the LA HMIS. The Participating Organizations will be responsible for the accuracy, completeness, and quality of the migrated data.

- Only data that is matched using agreed upon methods with LA HMIS data fields may be migrated. Data must be unduplicated prior to data migration. All required fields in the LA HMIS are required for migration. A data dictionary will be provided upon request.
- The HMIS Administrator will decide the appropriate data migration candidates. If approved, a Memorandum of Understanding or other agreement must be completed and the Organization will provide current data in the agreed upon format to the HMIS Administrator.
- If the data cannot be migrated, manual conversion (data entry by the organization's personnel) may be necessary to move data from legacy systems into the LA HMIS.

6. TERMINOLOGY

Aggregate Data: Data with identifying elements removed and concentrated at a central server. Aggregate data are used for analytical purposes and reporting.

Anti-Virus Software: Programs to detect and remove computer viruses. The anti-virus software should always include a regular update services allowing it to keep up with the latest viruses as they are released.

Audit Trail: A history of all access to the system, including viewing, additions and updates made to a client record.

Authentication: The process of identifying a user in order to grant access to a system or resource usually based on a username and password.

BitFocus: Software developer of the Clarity Human Services for the LA HMIS.

Client: The person receiving services whose information is entered into the LA HMIS.

Continuum of Care (CoC): Refers to the range of services (outreach, emergency transitional and permanent housing and supportive services) available to assist people out of homelessness.

Database: An electronic system for organizing data so it can easily be searched and retrieved. The data within the LA HMIS is accessible through the web-based interface.

Decryption: Conversion of scrambled text back into understandable, plain text form. Decryption uses an algorithm that reverses the process used during encryption.

Encryption: Conversion of plain text into encrypted data by scrambling it using a code that masks the meaning of the data to any unauthorized viewer. Encrypted data are not readable unless they are converted back into plan text via decryption.

Firewall: A method of controlling access to a private network, to provide security of data. Firewalls can use software, hardware, or a combination of both to control access.

HMIS: Homeless Management Information System. This is a generic term for any System used to manage data about the use of homeless services.

HMIS Administrator: The person(s) with the highest level of user access in each CoC. This user has full access to all user and administrative functions in the CoC and will serve as the liaison between Participating Organizations and the vendor. There is at least one HMIS Administrator in each CoC.

HMIS User: An individual who has unique user identification (ID) and directly accesses the LA HMIS to assist in data collection, reporting or administration as part of their job function in homeless service delivery. Users are classified as either system Users who perform administration functions at the system or aggregate level or organization Users that perform functions at the organization level.

Internet Protocol Address (IP Address): A unique address assigned to a user's connection based on the TCP/IP network. The Internet address is usually expressed in dot notation, e.g.: 128.121.4.5.

Internet Service Provider (ISP): A company that provides individuals or organization with access to the internet.

Local Area Network (LAN): A network that is geographically limited, allowing easy interconnection of computers within offices or buildings.

LA HMIS: The Los Angeles Homeless Management Information System provided by the vendor and tailored for use in the LA region.

LA HMIS Collaborative Steering Committee: Comprised of at least one representative from each of the LA HMIS Collaborative governing bodies. It is responsible for setting and overseeing policy for the regional implementation of the LA HMIS.

Network: Several computers connected to each other.
LALALA

Organization Administrator: The person responsible for system administration at the organization level. Responsibilities include informing HMIS System Administration of the need to add and delete Users, basic trouble-shooting, and escalation of issues to their HMIS Administrator. This person is the organization user's first line of contact for LA HMIS issues.

Participating Organizations: An organization that operates a project that either contributes data to an HMIS or has direct access to PPI in HMIS.

Server: A computer that provides a service for other computers connected to it via a network. Servers can host and send files, data or programs to client computers.

User ID: The unique identifier assigned to an authorized HMIS User.

7. APPENDICES

Appendix	Document Title
Appendix A	HMIS Participating Organization Agreement
Appendix B	HMIS User Agreement
Appendix C	Consent to Share Protected Personal Information
Appendix D	Privacy Notice
Appendix E	Note Regarding Collection of Personal Information
Appendix F	Revocation of Consent
Appendix G	Interagency Data Sharing Consent Form
Appendix H	Grievance Form
Appendix I	Client Rights Brochure
Appendix J	Clarity Access Roles Matrix

Appendix A: HMIS Participating Organizations Agreement

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
PARTICIPATING ORGANIZATIONS AGREEMENT

I. Purpose

The HMIS is a HUD-mandated information technology system that is designed to capture client-level information over time, on the characteristics and service needs of homeless persons. Client data is maintained on a central server, which will contain all client information in an encrypted state. HMIS integrates data from all homeless service providers and organizations in the community and captures basic descriptive information on every person served. Participation in LA HMIS allows organizations to share information with other Participating Organizations to create a more coordinated and effective delivery system.

The LA HMIS is the secured electronic database for Greater Los Angeles and is a valuable resource for local communities. The LA HMIS Collaborative consists of four separate Continuums of Care (CoC). The continuums are: Los Angeles City and County; Glendale; and Pasadena.

The LA HMIS Collaborative's goal is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in the Greater Los Angeles.

II. Agreement and Understanding

This Agreement authorizes this Participating Organizations (Organization) to designate HMIS Users (User). A User is a staff person entrusted to enter Protected Personal Information (PPI) into the LA HMIS, on behalf of this Organization. To allow a User to access the LA HMIS, a User Agreement must be signed by the User, the HMIS Administrator, and this Organization's Authorized Representative.

III. Confidentiality and Informed Consent

Confidentiality: This Organization must require all Users to abide by its organization's policies and procedures; uphold all privacy protection standards established by the LA HMIS Collaborative Policies and Procedures; and comply with all relevant federal and State of California confidentiality laws and regulations that protect client records. Except where otherwise provided for by law, this Organization shall ensure that confidential client records are released with the client's written consent.

Written Consent: To obtain written consent, prior to each client's assessment, each client must be informed that the client's information will be entered into an electronic database called HMIS. The terms of the *Consent to Share Protected Personal Information* form must also be explained to each client. Clients who agree to have their PPI entered into the LA HMIS must sign the *Consent to Share Protected Personal Information* form.

Verbal Consent: Verbal consent to enter PPI into the LA HMIS may be obtained during circumstances such as phone screenings, street outreach, or community access center sign-ins. Each client must be informed that his or her information will be entered into the HMIS database. The terms of the *Consent to Share Protected Personal Information* form must also be explained to each client. The client's written consent must be obtained once the client appears for his or her initial assessment.

IV. Client's Rights

The client has a right to receive a copy of this notice at the time of request.

Each client has the right to receive the following, no later than five (5) business days of a written request:

- A correction of inaccurate or incomplete PPI
- A copy of his or her consent form
- A copy of his or her HMIS records
- A current list of Participating Organizations that have access to HMIS data

V. Data Use

This Organization must protect HMIS data by ensuring that:

- A link to the Privacy Notice is accessed from the Organization's website.
- LA HMIS is not accessible to unauthorized Users
- LA HMIS is only accessed by computers approved by the Organization
- HMIS Users are trained regarding user responsibilities and conduct
- HMIS Users sign and comply with the *LA HMIS User Agreement*

1. HMIS Users forward a copy of a client's *Revocation of Consent* to the HMIS Administrator within 24 hours of receipt.

VI. Responsibilities

This Organization is responsible to ensure that:

- The *Notice Regarding Collection of Personal Information* is posted at each intake desk or comparable location.
- HMIS Users do not misuse the system
- Clients are notified if a breach of their PPI is discovered
- Any HMIS User who finds a possible security lapse on the system is obligated to immediately report it to the HMIS Administrator.
- A signed copy of the *Consent to Share Protected Personal Information* is retained for a period of seven (7) years after the PPI was created or last changed.

VII. System Use

Computer equipment and services provided by a CoC are intended only for LA HMIS-related activities. Prohibited uses include, but are not limited to: malicious or illegal activities; unauthorized access; the creation, sending and/or storing of fraudulent, threatening, harassing, or obscene messages; inappropriate mass mailing (spamming, flooding, bombing); denial of service attacks; and the creation or intentional distribution of computer viruses, worms, and/or Trojan horses.

***Equipment, if applicable**:* All CoC-provided computer equipment including, but not limited to, printers, scanners, laptops and monitors, were provided through grant funds from HUD. The maintenance and upgrades of these devices are subject to the requirements and funding limitations of the HUD grant. Maintenance and/or upgrade costs to equipment, incurred after the HUD grant funds have been exhausted, become the sole responsibility of this Organization.

***Software, Licenses, and/or Services, if applicable**:* CoC-provided services to each organization may include, but are not limited to, purchasing and installing Anti-Virus Software and licenses, Firewall software and licenses, Windows software updates and High-Speed Internet Connections. The software and/or services are provided for HMIS purposes through HUD grant funds. The maintenance, upgrades and license purchases are subject to the requirements and funding limitations of the HUD grant. Additional maintenance, upgrades and license purchases, incurred after the grant funds have been exhausted, become the sole responsibility of this Organization.

VIII. Rights and Privileges
LA HMIS data is stored in one central database and is owned by the LA HMIS Collaborative. The LA HMIS Collaborative reserves all rights to the HMIS data. Use of the LA HMIS equipment, software, licenses, and/or services is a privilege and is assigned and managed by each HMIS Administrator.

IX. Copyright
The LA HMIS and other CoC-provided software are protected by copyright and are not to be copied, except as permitted by law or by contract with the owner of the copyright. The number and distribution of copies of any CoC-provided software are at the sole discretion of the HMIS Administrator.

X. Violations
Any violations or suspected violations of any of the terms and conditions of this agreement, the HMIS User Agreement, and/or the HMIS Policies and Procedures, must be immediately and confidentially reported to the HMIS Administrator and the Executive Director or other authorized representative of this Organization.

XI. Term
This Participating Organizations Agreement becomes effective on the date of final execution and shall remain in effect unless terminated pursuant to paragraph XI. Termination, below.

XII. Amendment and Termination
- The LA CoC reserves the right to amend this agreement by providing a 3-day notice to this Organization.
- Either party has the right to terminate this agreement, with or without cause, by providing a 3-day written notice to the other party.
- If this agreement is terminated, this Organization shall no longer have access to HMIS or any information therein. The remaining LA HMIS Participating Organizations shall retain the right to use all client data previously entered by this Organization, subject to any restrictions requested by the client.

All organizations that sign this agreement and are granted access to the LA HMIS agree to abide by LA's HMIS Collaborative Policies and Procedures. The signature of the Executive Director or other authorized representative of this Organization indicates acceptance of all terms and conditions set forth in this agreement.

This Agreement is executed between the CoC and the Participating Organizations. Upon final execution, this Organization will be given access to the LA HMIS.

_____	_____
Organization Name	CoC Name
_____	_____
Organization Administrator/Authorized Representative (Print Name)	HMIS Administrator Name (Print Name)
_____	_____
Signature	Signature
_____	_____
Date of Signature	Date of Signature

B: HMIS User Agreement

GREATER LOS ANGELES HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS) USER AGREEMENT

I. Purpose

The LA HMIS is the secured electronic database for the Greater Los Angeles and is a valuable resource for local communities. The LA HMIS Collaborative consists of four separate Continuums of Care (CoC). The continuums are: Los Angeles City and County; Glendale; and Pasadena.

The LA HMIS Collaborative's goal is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in the Greater Los Angeles.

II. Agreement and Understanding

This Agreement authorizes you, an HMIS User (User), to enter Protected Personal Information (PPI) into the LA HMIS, as authorized by your organization and the CoC HMIS Administrator. You must complete the necessary training(s) prior to receiving a unique HMIS User Identification (User ID) and password.

II. Client Confidentiality and Informed Consent

Confidentiality: This User must abide by its organization's policies and procedures; uphold all privacy protection standards established by the LA HMIS Collaborative Policies and Procedures; and comply with all relevant federal and State of California confidentiality laws and regulations that protect client records.

Written Consent: To obtain written consent, prior to each client's assessment, Users must inform each client that the client's information will be entered into an electronic database called HMIS. Users must also explain the terms of the *Consent to Share Protected Personal Information* form. Each client who agrees to have his or her PPI entered into the LA HMIS must sign the *Consent to Share Protected Personal Information* form.

Verbal Consent: Verbal consent to enter PPI into the LA HMIS may be obtained during circumstances such as phone screenings, street outreach, or community access center sign-ins. Users must inform each client that the client's information will be entered into the HMIS database. Users must also explain the terms of the *Consent to Share Protected Personal Information* form. The client's written consent must be obtained once the client appears for his or her initial assessment.

III. Client Rights

- A client may not be denied services for failure to provide consent for LA HMIS data collection.
- A client has the right to inspect, copy, and request changes in their LA HMIS records.
- A client's consent may be revoked by that client at any time through a written notice or by completing the Revocation of Consent form.
- A copy of the Privacy Notice must be provided at the time the client requests.
- Each client has the right to receive the following, no later than five (5) business days of a written request:
    - A correction of inaccurate or incomplete PPI
    - A copy of his or her consent form;

- A copy of his or her HMIS records; and
- A current list of Participating Organizations that have access to HMIS data.

IV. User Responsibilities and Conduct

I understand and agree that:

- I have an ethical and a legal obligation to ensure that the data I collect and enter into HMIS is accurate and does not misrepresent the client's information.
- I will not reveal or release PPI to unauthorized organizations, individuals or entities.
- I will use the data within the HMIS only for the purposes of homeless service delivery.
- I am not permitted to access the HMIS from any computer that has not been designated or approved by my organization.
- I will never use the HMIS to perform an illegal or malicious act.
- I will not attempt to increase the level of access to which I am authorized, or attempt to deprive other HMIS Users of access to the HMIS.
- My HMIS User ID and password shall be kept secure and will not be shared.
- I will refrain from leaving my computer unattended while logged into the system.
- I will protect and store client information printed from HMIS in a secure location.
- I will dispose of PPI printed from HMIS, when it is no longer needed, in a manner that maintains client confidentiality.
- If I suspect or encounter a security breach, I will immediately notify my organization's HMIS administrator.
- If my relationship with my organization changes or terminates, any client information that I entered into or obtained from the HMIS must remain confidential.
- Discriminatory comments based on race, color, religion, national origin, ancestry, handicap, age, sex and sexual orientation are not permitted in the HMIS. Profanity and offensive language are also not permitted in the HMIS.
- PPI that is transmitted electronically must be password protected to maintain confidentiality.
- I will comply with my organization's policies and procedures and the LA HMIS Collaborative Policies and Procedures in my use of HMIS. The LA HMIS Collaborative Policies and Procedures can be access from your CoC HMIS website.
- Any violation of this User Agreement is grounds for immediate suspension or revocation of my access to the HMIS.

My signature below confirms my agreement to comply with all the provisions of this Greater Los Angeles HMIS User Agreement.

_____
Organization Name

_____ Organization Administrator/Authorized Representative (Print Name)	_____ User First and Last Name (Print Name)
_____ Signature	_____ Signature
_____ Date of Signature	_____ Date of Signature

DO NOT WRITE IN THIS SECTION. (FOR HMIS ADMINISTRATOR STAFF ONLY.)

HMIS Staff Name: _____ Date: _____
Date of Training:_____ Trainer:_____
HMIS User ID: _____ Date User ID Issued: _____

Appendix C: Consent to Share Protected Personal Information

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
CONSENT TO SHARE PROTECTED PERSONAL INFORMATION

The LA HMIS is a local electronic database that securely record information (data) about clients accessing housing and homeless services within the Greater Los Angeles. This organization participates in the HMIS database and shares information with other organizations that use this database. This information is utilized to provide supportive services to you and your household members.

What information is shared in the HMIS database?

We share both Protected Personal Information (PPI) and general information obtained during your intake and assessment, which may include but is not limited to:

- Your name and your contact information
- Your social security number
- Your birthdate
- Your basic demographic information such as gender and race/ethnicity
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Your self-reported medical history, including any mental health and substance abuse issues
- Your case notes and services
- Your case manager's contact information
- Your income sources and amounts; and non-cash benefits
- Your veteran status
- Your disability status
- Your household composition
- Your emergency contact information
- Any history of domestic violence
- Your photo (optional)

How do you benefit from providing your information?

The information you provide for the HMIS database helps us coordinate the most effective services for you and your household members. By sharing your information, you may be able to avoid being screened more than once, get faster services, and minimize how many times you tell your 'story.' Collecting this information also gives us a better understanding of homelessness and the effectiveness of services in your local area.

Who can have access to your information?

Organizations that participate in the HMIS database can have access to your data. These organizations may include homeless service providers, housing groups, healthcare providers, and other appropriate service providers.

How is your personal information protected?

Your information is protected by the federal HMIS Privacy Standards and is secured by passwords and encryption technology. In addition, each Participating Organizations has signed an agreement to maintain the security and confidentiality of the information. In some instances, when the Participating Organizations is a health care organization, your information may be protected by the privacy standards of the Health Insurance Portability and Accountability Act (HIPAA).

By signing below, you understand and agree that:

- You have the right to receive services, even if you do not sign this consent form.
- You have the right to receive a copy of this consent form.
- Your consent permits any Participating Organizations to add to or update your information in HMIS, without asking you to sign another consent form.
- This consent is valid for seven (7) years from the date the PPI was created or last changed.
- You may revoke your consent at any time, but your revocation must be provided either in writing or by completing the *Revocation of Consent* form. Upon receipt of your revocation, we will remove your PPI from the shared HMIS database and prevent further PPI from being added. The PPI that you previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided you with direct services.
- The Privacy Notice for the LA HMIS contains more detailed information about how your information may be used and disclosed. A copy of this notice is available upon request.
- No later than five (5) business days of your written request, we will provide you with:
    - A correction of inaccurate or incomplete PPI
    - A copy of your consent form
    - A copy of your HMIS records; and
    - A current list of Participating Organizations that have access to your HMIS data.
- Aggregate or statistical data that is released from the HMIS database will not disclose any of your PPI.
- You have the right to file a grievance against any organization whether or not you sign this consent.
- You are not waiving any rights protected under Federal and/or California law.

SIGNATURE AND ACKNOWLEDGEMENT

Your signature below indicates that you have read (or been read) this client consent form, have received answers to your questions, and you freely consent to have your information, and that of your minor children (if any), entered into the HMIS database. You also consent to share your information with other Participating Organizations as described in this consent form.

☐ **I consent to sharing my photograph. (Check here)**

Client Name: _____ DOB: _____ Last 4 digits of SS_____

Signature _____Date _____

☐ **Head of Household (Check here)**

Minor Children (if any):

Client Name: _____ DOB: _____ Last 4 digits of SS _____ Living with you? (Y/N)

Client Name: _____ DOB: _____ Last 4 digits of SS _____ Living with you? (Y/N)

Client Name: _____ DOB: _____ Last 4 digits of SS _____ Living with you? (Y/N)

_____ _____

Print Name of Organization Staff **Print Name of Organization**

_____ _____

Signature of Organization Staff **Date**

Appendix D: Privacy Notice

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
PRIVACY NOTICE

THIS PRIVACY NOTICE EXPLAINS UNDER WHAT CIRCUMSTANCES WE MAY SHARE AND DISCLOSE YOUR INFORMATION FROM THE LA HMIS. THIS NOTICE ALSO EXPLAINS YOUR RIGHTS REGARDING YOUR CONFIDENTIAL INFORMATION.

PLEASE READ IT CAREFULLY.

(Organization Name Here) collects and shares information about individuals who access our services. The information is confidentially stored in a local electronic database called the Greater Los Angeles Homeless Management Information System (LA HMIS). The LA HMIS securely records information (data) about persons accessing housing and homeless services within Los Angeles.

We ask for your permission to share confidential personal information that we collect about you and your family. This confidential information is referred to as Protected Personal Information (PPI). We are required to protect the privacy of your PPI by complying with the privacy practices described in this Privacy Notice.

Why We Collect and Share Information

The information we collect and share in the HMIS helps us to efficiently coordinate the most effective services for you and your family. It allows us to complete one universal intake per person; better understand homelessness in your community; and assess the types of resources needed in your local area.

By collecting your information for HMIS, we are able to generate statistical reports requested by the Department of Housing and Urban Development (HUD).

The Type of Information We Collect and Share in the HMIS

We collect and share both PPI and general information obtained during your intake and assessment, which may include but is not limited to:

- Name and contact information
- Social security number
- Birthdate
- Demographic information such as gender and race/ethnicity

Last updated on: 5/17/2017

- History of homelessness and housing (including current housing status and where and when services have been accessed)
- Self-reported medical history including any mental health and substance abuse issues
- Case notes and services
- Case manager's contact information
- Income sources and amounts; and non-cash benefits
- Veteran status
- Disability status
- Household composition
- Emergency contact information
- Domestic violence history
- Photo (optional)

How Your Personal Information Is Protected in the HMIS

Your information is protected by passwords and encryption technology. Each HMIS user and Participating Organizations must sign an agreement to maintain the security and privacy of your information. Each HMIS user or Participating Organizations that violates the agreement may have access rights terminated and may be subject to further penalties.

How PPI May Be Shared and Disclosed

Unless restricted by other laws, the information we collect can be shared and disclosed under the following circumstances:

- To provide or coordinate services.
- For payment or reimbursement of services for the Participating Organizations.
- For administrative purposes, including but not limited to HMIS Administrator(s) and developer(s), and for legal, audit personnel, and oversight and management functions.
- For creating de-identified PPI.
- When required by law or for law enforcement purposes.
- To prevent a serious threat to health or safety.
- As authorized by law, for victims of abuse, neglect, or domestic violence.
- For academic research purposes.
- Other uses and disclosures of your PPI can be made with your written consent.

Providing Your Consent for Sharing PPI in the HMIS

If you choose to share your PPI in the LA HMIS, we must have your written consent. *Exception:* In a situation where we are gathering PPI from you during a phone screening, street outreach, or community access center sign-in, your verbal consent can be used to share your information in HMIS. If we obtain your verbal consent, you will be requested to provide written consent during your initial assessment. If you do not appear for your initial assessment, your information will remain in HMIS until you revoke your consent in writing.

You have the right to receive services even if you do not consent to share your PPI in the LA HMIS.

How to Revoke Your Consent for Sharing Information in the HMIS

You may revoke your consent at any time. Your revocation must be provided either in writing or by completing the *Revocation of Consent* form. Upon receipt of your revocation, we will remove your PPI from the shared HMIS database and prevent further PPI from being added. The PPI that you previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided you with direct services.

Your Rights to Your Information in the HMIS

You have the right to receive the following, no later than five (5) business days of your written request:

- A correction of inaccurate or incomplete PPI;
- A copy of your consent form;
- A copy of the LA HMIS Privacy Notice;
- A copy of your HMIS records; and
- A current list of Participating Organizations that have access to your HMIS data.

You can exercise these rights by making a written request to this organization.

Your Privacy Rights Regarding Your Information in the HMIS

If you believe your privacy rights have been violated, you may send a written grievance to this organization. You will not be retaliated against for filing a grievance.

If your grievance is not resolved to your satisfaction, you may send a written grievance appeal to your CoC Lead.

Amendments to this Privacy Notice

The policies in this notice may be amended at any time. These amendments may affect information obtained by this organization before the date of the change. Amendments regarding use or disclosure of PPI will apply to information (data) previously entered in HMIS, unless otherwise stated. All amendments to this privacy notice must be consistent with the requirements of the federal HMIS privacy standards. This organization must keep permanent documentation of all privacy notice amendments.

Appendix E: Note Regarding Collection of Personal Information

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)

NOTE REGARDING COLLECTION OF PERSONAL INFORMATIONLA

We collect personal information directly from you for reasons that are discussed in our privacy statement. We may be required to collect some personal information by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.

A Privacy Notice is available upon request.

Appendix F: Revocation of Consent

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
REVOCATION OF CONSENT

By signing below, I revoke my consent to share my Protected Personal Information (PPI) in the LA HMIS.

I understand that this revocation authorizes the removal of my PPI from the shared HMIS database and will prevent further PPI from being added. I understand that the PPI that I previously authorized to be shared cannot be entirely removed from the HMIS database and will remain accessible to the limited number of organization(s) that provided me with direct services.

Client Name: _____ DOB: _____ Last 4 digits of SS_____

Signature _____ Date _____

Head of Household (Check here) ☐

Minor Children (if any):

Client Name: _____ DOB: _____ Last 4 digits of SS_____

Client Name: _____ DOB: _____ Last 4 digits of SS_____

Client Name: _____ DOB: _____ Last 4 digits of SS_____

Client Name: _____ DOB: _____ Last 4 digits of SS_____

_____ _____

Print Name of Organization **Print Name of Organization Staff**

_____ _____

Signature of Organization Staff **Date**

Last updated on: 5/17/2017

Appendix G: Interagency Data Sharing Consent Form

GREATER LOS ANGELES

HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)

INTERAGENCY DATA SHARING CONSENT FORM

LA

Client Name:_____

SSN/Client ID:_____

Date of Birth:_____

Name of Originating Organization:_____

Name of Organization with which to extend Client Data Sharing:

_____

Client Information to Share **(Client: please INITIAL all forms you want to share)**:

____Program Entry Required Questions
____Services Provided
____Case Notes
____Assessment (Client Profile)
____Savings Record
____Program Exit Information
____Group Meetings
____Any information as necessary

_____

Client Signature Date

Appendix H: Grievance Form

GREATER LOS ANGELES
HOMELESS MANAGEMENT INFORMATION SYSTEM (LA HMIS)
GRIEVANCE FORM

If you feel a violation of your rights as an HMIS client has occurred or you disagree with a decision made about your "Protected HMIS Information" you may complete this form. Complete this form only after you have exhausted the grievance procedures at your organization. **It is against the law for any organization to take retaliatory action against you if you file this grievance. You can expect a response within 30 days via the method of your choice.**

Grievances must be submitted in writing to:
[Enter Address]

Date of offense: _____

_____ _____
Name of Individual who violated your privacy rights. Name of Organization who violated your privacy rights.

Brief description of grievance (what happened):

Best way to contact you: _____

Your name: _____

Your phone: _____

Your mailing address: _____

_____

CoC response date: _____

Recommendation to Organization:

We collect personal information directly from you for reasons that are discussed in our privacy statement. We may be required to collect some personal information by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.

Last updated on: 5/17/2017

Appendix I: Client's Rights Brochure

For Further Homeless Provider Information and Assistance

Greater Los Angeles Homeless Management Information System (HMIS)

Mission: Leveraging technology in a respectful and appropriate manner, HMIS will assist homeless providers, persons experiencing a housing crisis, and policy advocates to end homelessness in the Greater Los Angeles and Orange counties.

Vision: The LA Collaborative is dedicated to providing the best possible, highest quality Homeless Management Information System (HMIS) to enhance the Continuum of Care for persons experiencing homelessness. Specifically, HMIS will:

- Enable providers to **track services, report outcomes, and manage** client data using accessible and user-friendly technology
- Enhance the ability of policy makers and advocates **to gauge the extent of homelessness and plan services** appropriately throughout the Greater Los Angeles and Orange counties
- Ensure persons experiencing a housing crisis receive **streamlined referral, coordinated services, and speedy access** to essential services and housing

Homeless Management Information System (HMIS)

Client Rights & Explanation of Data Uses

For more information, contact the HMIS Administrative Office

Client Rights HMIS

Common Client Questions:

What Is HMIS?

The Homeless Management Information System (HMIS) is a web-based information system. Organizations that serve homeless and at-risk individuals in the Greater Los Angeles need to compile information about the persons they serve.

Why Gather and Maintain Data?

HMIS will gather and maintain unduplicated statistics on a regional level to provide a more accurate picture of our region's homeless and at-risk population. HMIS will also help us understand client needs, help organizations plan appropriate resources for the clients they serve, inform public policy in an attempt to end homelessness, streamline and coordinate services and intake procedures to save clients' valuable time, and so much more.

Who can access my information?

- CHMIS staff who work directly with clients or who have administrative responsibilities can look at, enter, or edit client information, including all authorized organizations participating in the LA Continuum of Care.

Who will receive my information?

- No information will be released to another individual without your consent.
- Information is stored in an encrypted central database. Only organizations that have signed an HMIS Organization Agreement will have access to HMIS data.

Don't I have a right to privacy?

- Clients do have the right to privacy, and also the right to confidentiality. You are entitled to a copy of the privacy notice upon request.
- Clients have the right to know who has modified their HMIS record.
- You also have the right to request access to your HMIS client records, printed copy of this data, and access to available audit reports. You may not see other clients' records, nor may they see your information.

What if I don't want to provide information?

- Clients have the right not to answer any questions, unless entry into a program requires it.

What if I believe my rights have been violated?

- Clients have the right to file a grievance with the organization or with the HMIS Administrative Office. Grievances must be filed through written notice. Clients will not be retaliated against for filing a complaint.

Grievance

If you feel a violation of your rights as a client has occurred, please contact your organization's HMIS Administrator.

The Continuum of Care HMIS Administrative Office can be notified of violations through written notice.

All participating organizations are responsible for ensuring that security procedures are followed and client rights are respected throughout the organization's HMIS participation.

Acknowledgement

I acknowledge that I have received a written copy of the LA HMIS Collaborative Policies and Procedures Manual. I understand the terms of the LA HMIS Policies and Procedures and I agree to abide by them. I understand that any violation of the policies or procedures could lead to my HMIS account being locked or even criminal prosecution.

Organization Name: _____

Printed Name: _____

Signature: _____

Date: _____

Appendix J: Clarity Access Roles Matrix

Client Profile Pages	Description	Clarity Access Roles				Admin Roles
		Limited Read	Basic User	Agency Admin	CES Lead/Matcher	System Administrator
History	History of the Client's service, enrollment, assessment history from anywhere.	X	X	X	X	X
Services	Provide Services not connected to programs		X	X	X	X
Programs	Enroll into programs and see history of enrollments (Depending on access level)		X	X	X	X
Public Alerts and Client Notes	See general notes for the client and any alerts (Depending on access level)	X	X	X	X	X
Files	See files/documents associated to the client (Depending on access level)		X	X	X	X
Household Management	Manage members of the household	X	X	X	X	X
Location	Add and see history of locations of the client (Depending on access level)	X	X	X	X	X
Assessments	Add and see history of assessments of the client (Depending on access level)	X	X	X	X	X
Referrals	Refer clients to a program for services		X	X	X	X
Access Level	**Description**					
Attendance	For Swipe and Daily Attendance Tracking					X
Manage Agency	Managing program setups, program sites, staff usernames, etc.					X
Report Library	Library of reports available through Clarity (including HUD-required and LAHSA custom)		X	X	X	X
Analysis	Data Analysis Tool through Looker			X	X	X

Agency Sensitive Data	Access to sensitive data, including SSN.		X	X	X	X
Any Agency Sensitive Data	Access to sensitive data, including SSN that was entered by any agency.				X	X
Client Reports	Client-specific Reports such as ID Card for Printing, History, Notes, Summary		X	X	X	X
Caseload	List of clients associated to the user's account.		X	X	X	X
Attendance Standalone Module	For Swipe (TBD)					X
Aggregate Data Analysis	Data Analysis Tool through Looker			X		X
Referral Match Maker	Matching Functions				X	X
Restore Deleted Data	Restore Deleted Client Information			X		X
Navigator	Assigning					X
Data Import	Data Import Tool					X
Create New Clients	Create new client records		X	X	X	X
Create Service Placements	Record new services onto a client's record		X	X	X	X
Create Program Placements	Record new enrollments into a program onto a client's record		X	X	X	X
Create Public Alerts and Client Notes	Create notes and alerts on a client's record		X	X	X	X
Create Files	Add new files (scanned files, documents, etc.) onto a client's record		X	X	X	X

Create Location	Record a location for a client (whether for outreach, for permanent housing placements, etc.)		X	X	X	X
Create Assessments	Record a new assessment onto a client's record (Coordinated Assessment, Screening Tools, etc.)		X	X	X	X
Create Referral	Refer a client to a program		X	X	X	X
Edit Agency Services	Edit a service that was previously recorded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Services	Edit a service that was previously recorded by any organization on a client's record					X
Edit Agency Program	Edit program enrollment information that was previously recorded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Programs	Edit program enrollment information that was previously recorded by any organization on a client's record				X	X
Edit Agency Public Alerts and Client Notes	Edit a note or alert that was previously recorded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Public Alerts and Client Notes	Edit a note or alert that was previously recorded by any organization on a client's record		X	X	X	X
Edit Agency Files	Edit files (scanned files, documents, etc.) that was previously uploaded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Files	Edit files (scanned files, documents, etc.) that was previously recorded by any organization on a client's record				X	X
Edit Agency Location	Edit location information for a client that was previously recorded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Location	Edit location information for a client that was previously recorded by any organization on a client's record				X	X

Edit Agency Assessment	Edit an assessment that was previously recorded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Assessment	Edit an assessment that was previously recorded by the user's organization on a client's record				X	X
Edit Agency Referral	Edit a referral that was previously recorded by the user's organization on a client's record		X	X	X	X
Edit Any Agency Referral	Edit a referral that was previously recorded by any organization on a client's record				X	X
Delete Agency Services	Delete a service that was previously recorded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Services	Delete a service that was previously recorded by any organization on a client's record					X
Delete Agency Programs	Delete program enrollment information that was previously recorded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Programs	Delete program enrollment information that was previously recorded by any organization on a client's record					X
Delete Agency Public Alerts and Client Notes	Delete a note or alert that was previously recorded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Public Alerts and Client Notes	Delete a note or alert that was previously recorded by any organization on a client's record					X
Delete Agency Files	Delete files (scanned files, documents, etc.) that was previously uploaded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Files	Delete files (scanned files, documents, etc.) that was previously recorded by any organization on a client's record					X

Delete Location	Delete location information for a client that was previously recorded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Location	Delete location information for a client that was previously recorded by any organization on a client's record					X
Delete Agency Assessment	Delete an assessment that was previously recorded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Assessment	Delete an assessment that was previously recorded by the user's organization on a client's record					X
Delete Any Client	Delete any client records					X
Delete Agency Referral	Delete a referral that was previously recorded by the user's organization on a client's record		X	X	X	X
Delete Any Agency Referral	Delete a referral that was previously recorded by any organization on a client's record					X
Last Revision By: Pada Lee						
Last Revision on: 4/21/2017						

Q 1C4-2 Homeless Preference-HCV Program

The City of Pasadena Housing Department Housing Choice Voucher Program homeless admission preference is included within the substandard housing preference as described in the 2017 Administrative Plan on pages 4-3, 4-6, and 4-7, attached. Page 4-3 documents that living substandard housing is a local preference; page 4-6 begins the detailed description of the substandard housing preference; and page 4-7 defines the homeless preference.

B. WAITING LIST PREFERENCES [24 CFR 982.207]

The CoPHD has adopted a local preferences system for applicants' placement on the waiting list and selection of families from the waiting list. Preferences will only be verified at the time the family has been selected from the waiting list.

If an applicant makes a false statement in order to qualify for a preference, the CoPHD will deny the preference. If the applicant falsifies documents in order to qualify for a preference, the application will be disqualified.

C. LOCAL PREFERENCES [24 CFR 982.207]

A notice adapting new local preferences will be publicized and distributed using the same guidelines as those for opening and closing the waiting list.

The CoPHD uses the following local preferences:

1. **Residency preference** for applicants in which the family lives in Pasadena or the head of household or spouse is working or who has been notified that they are hired to work in Pasadena.

2. **Working preference** for applicants in which the head of household or spouse works at least 15 hours a week within the CoPHD's jurisdiction or attends school full-time within the CoPHD's jurisdiction. This also applies to applicants who are reporting self-employment within the CoPHD's jurisdiction.

3. **Disabled preference** for applicants in which the head of household or spouse is disabled.

4. **Veteran preference** for applicants in which the head of household or spouse is a current member of the U S Armed Forces, a U S Armed Forces veteran, or the surviving spouse of a U S Armed Forces veteran.

5. **Involuntarily Displaced preference** for applicants who have been involuntarily displaced (as described below).

6. **Substandard housing preference** for applicants who are currently residing in substandard housing (as described below).

An applicant shall be given the benefit of the working preference if the head and spouse, or sole member is age 62 or older or is a person with disabilities.

Preferences will be verified pursuant to the verification process outlined in Chapter 7 of this Plan, "Verification Procedures".

such a crime has destroyed the applicant's peaceful enjoyment of the unit. A hate crime is actual or threatened physical violence or intimidation that is directed against a person or their property, and is based on the person's race, color, religion, sex, national origin, disability or familial status, including sexual orientation, and which occurred within the last 120 days or is of a continuing nature.

7. Displacement by non-suitability of the unit when a member of the family has a mobility and/or other impairment that makes the person unable to use critical elements of the unit and the owner is not legally obligated to make changes to the unit.

   Critical elements are entry and egress of unit and building, a sleeping area, a full bathroom, a kitchen if the person with a disability must do their own food preparation, etc.

8. Due to HUD disposition of a multi-family project under Section 203 of the Housing and Community Development Act Amendments of 1978.

Standard Replacement Housing

In order to receive the displacement preference, applicants who have been displaced must not be living in "standard, permanent replacement housing."

Standard replacement housing is defined as housing that is decent, safe and sanitary according to Housing Quality Standards (HQS), and is adequate for the family size according to HQS.

Standard replacement housing does not include transient facilities, hotels, motels, temporary shelters. In the case of domestic violence, the family will not be eligible for this preference if the family relocates and the abuser continues to reside with the family at the new location. It does not include any individual imprisoned or detained pursuant to State law or an Act of Congress. Shared housing with family or friends is not considered temporary and is considered standard replacement housing.

Substandard Housing

Applicants who live in substandard housing are families whose dwelling meets one or more of the following criteria, provided that the family did not cause the condition:

1. Is dilapidated as cited by officials of a code enforcement office and does not provide safe, adequate shelter; has one or more critical defects or a combination of defects requiring considerable repair; endangers the health, safety, and well-being of the family.

2. Does not have operable indoor plumbing.

3. Does not have a usable flush toilet in the unit for the exclusive use of the family.

4. Does not have usable bathtub or shower in unit for exclusive family use.

5. Does not have adequate, safe electrical service.

6. Does not have an adequate, safe source of heat.

7. Does not have a kitchen. (Single Room Occupancy [SRO] Housing is not substandard solely because it does not contain sanitary and/or food preparation facilities in the unit.)

8. Has been declared unfit for habitation by a government agency.

9. Is overcrowded according to HQS. Note: Persons who reside as part of a family unit shall not be considered a separate family unit for substandard housing definition preference purposes.

   Applicants living in Public Housing or publicly assisted housing shall not be denied this preference if unit meets the criteria for the substandard preference.

10. An applicant who is a "homeless family" is considered to be living in substandard housing. A "homeless individual or family" is one who:

    Lacks a fixed, regular and adequate nighttime residence and has a primary nighttime residence that is:

    a. A supervised public or private operated shelter designated to provide temporary living accommodations (including welfare hotels, congregate shelters and transitional housing for mentally ill); or

    b. An institution providing temporary residence for individuals intended to be institutionalized; or

    c. A public or private place not designed for or ordinarily used as a regular sleeping accommodation for humans.

Families who are residing with friends or relatives on a temporary basis are not considered homeless.

Families who are residing in a Sober Living Facility are considered homeless.

AMENDMENT NUMBER ONE
TO MEMORANDUM OF UNDERSTANDING
BETWEEN AND AMONG
LOS ANGELES HOMELESS SERVICES AUTHORITY
AND
CITY OF GLENDALE AND CITY OF PASADENA
RELATING TO
SOUTHERN CALIFORNIA REGIONAL HMIS COLLABORATIVE

THIS AMENDMENT NUMBER ONE to the Memorandum of Understanding ("MOU") entered into by the Parties on April 1, 2015, is made and entered into effective April 1, 2016 by and between the Los Angeles Homeless Service Authority ("LAHSA"), a joint powers authority of the City and County of Los Angeles, and the City of Glendale and the City of Pasadena, each a municipal corporation incorporated of the State of California (collectively "the Participants").

In consideration of the mutual promises exchanged herein, the Participants agree as follows:

1. Add: "**WHEREAS**, on March 6, 2017, 2-1-1 Orange County notified the Participants of its termination of participation in the MOU which formed the Southern California Regional Homeless Management Information System (HMIS) Collaborative (the "SCR Collaborative") ;

   WHEREAS, the remaining Participants desire to amend the MOU for the purposes of: (a) revising name of the Collaborative to Los Angeles HMIS Collaborative; (b) extending the term of the MOU; and (b) making such other changes as are required in connection with all of the foregoing, as detailed elsewhere in this Amendment Number One.

   WHEREAS, **Section VIII. Amendments and Modifications**, provide for said amendments;"

2. In each instance throughout the MOU and any Exhibits, Attachments and Amendments, delete "Southern California Regional Homeless Management Information System (HMIS) Collaborative ("the SCR Collaborative")" and replace with "Los Angeles Homeless Management Information System (HMIS) Collaborative ("the LA HMIS Collaborative")".

3. Effective April 6, 2017, 2-1-1 Orange County is terminated as a Participant, pursuant to Section IX, Termination and 2-1-1 Orange County's notice of termination dated March 6, 2017.

4. Section **VII. Term of Agreement**, is hereby amended as follows:

   Add: "The Participants agree to renew the MOU for the period April 1, 2016 to April 1, 2017. The Participants further agree to renew the MOU for the period April 1, 2017 to April 1, 2018."

5. Except as herein amended, all other terms and conditions of the Agreement remain in full force and effect.

//
//
//

6. This Amendment Number One is executed in 3 triplicate originals, each of which is deemed to be an original and it includes 2 pages, which together with the MOU and all Exhibits and Attachments constitute the entire understanding and agreement of the parties regarding the subject matter hereof.

IN WITNESS WHEREOF, the parties hereto have caused this Amendment Number One to be executed and attested to by their duly authorized representatives, as of the date first herein above written.

For: Los Angeles Homeless Services Authority

Date: 9/15/17

By: [signature]

Print Name: Peter Lynn

Title: Executive Director

For: City of Glendale

Date: 9-15-17

By: [signature]

Print Name: Ivet Samvelyan

Title: Community Services Manager

For: City of Pasadena

Date: 9/18/17

By: [signature]

Print Name: WILLIAM HUANG

Title: DIRECTOR OF HOUSING & COMMUNITY SERVICES

Said Amendment shall be referenced as Amendment Number One to LA HMIS Collaborative MOU

Southern California Regional HMIS Collaborative

Memorandum of Understanding

THIS MEMORANDUM OF UNDERSTANDING (MOU) is made this FIRST day of April 2015, by and between the City of Glendale and the City of Pasadena, each a municipal corporation of the State of California, the Los Angeles Homeless Services Authority, a Joint Powers Authority of the City and County of Los Angeles, and 2-1-1 Orange County, a non-profit organization.

WITNESSETH:

WHEREAS, the Congress of the United States of America, in enacting H.R. 5482, the Departments of Veterans Affairs and Housing and Urban Development (HUD), and Independent Agencies Appropriations Act, 2001, amended subsection (a) of SEC. 226. Section 423 of the Stewart B. McKinney Homeless Assistance Act to include (7) Management Information System funding; and

WHEREAS, the United States Congress, in accepting Conference Report 106-988, indicated that "local jurisdictions should be collecting an array of data on homelessness in order to prevent duplicate counting of homeless persons and to analyze their patterns of use of assistance, including how they enter and exit the homeless assistance system and the effectiveness of the systems. HUD is directed to take the lead in working with communities toward this end and to analyze jurisdictional data within three years"; and

WHEREAS, HUD has since directed the programs it funds to develop a local Homeless Management Information System (HMIS) to collect and report data on the usage of homeless services; and

WHEREAS, HUD further encouraged local communities to determine their own best way to implement such a system; and

WHEREAS, the entities responsible for Continuum of Care planning for homeless programs in the Cities of Pasadena, Glendale, and Los Angeles, the balance of the County of Los Angeles, and Orange County have together planned for this system since December, 2001;

NOW, THEREFORE, IT IS AGREED that the participants in this collaborative wish to affirm their commitment to continue to work together in this Memorandum of Understanding as follows:

I. Background

The Southern California Regional Homeless Management Information System (HMIS) Collaborative (the "SCR Collaborative") is comprised of four HUD Continuum of Care grantees: the Cities of Glendale, and Pasadena, the Los Angeles Homeless Services Authority (LAHSA), and 2-1-1 Orange County. The SCR Collaborative itself is not a legal entity, but refers to the commitments and expectations of its individual members, each of whom will be responsible for enforcing the terms and conditions herein. The SCR Collaborative has implemented a web-based Homeless Management Information System that will permit the sharing of client level

data across jurisdictions and the aggregating of data on a regional and sub regional basis. Glendale, Pasadena, LAHSA, and 2-1-1 Orange County share a single database.

II. Terms and Definitions

Project Description: The Southern California Regional Homeless Management Information System (HMIS) Collaborative, formally referred to as the Los Angeles/Orange County Collaborative (LA/OC Collaborative), hereafter referred to as the SCR Collaborative.

Collaborative Participants ("Participants"): These are the Homeless Continuum of Care coordinating bodies that desire to implement an HMIS as mandated by the HUD: City of Glendale, City of Pasadena, Los Angeles Homeless Services Authority, and 2-1-1 Orange County.

Southern California Regional HMIS Steering Committee: Includes Collaborative Participants2-1-1 Los Angeles and the OC Community Resources.

III. Purpose

The Participants individually agree to enter into contracts with Adsystech to provide a Homeless Management Information System (HMIS) software spanning four Continuum of Care systems. The Participants individually agree to maintain a regional HMIS that allows client-level data sharing, reporting coordination, and collaboration with system management processes. This agreement will articulate certain Participant responsibilities to ensure the timely execution of contracts, implementation of the software and management of each CoC's HMIS.

IV. Guiding Principles

The Collaborative exists to improve the coordination and planning for homeless services in the counties of Los Angeles, and Orange, facilitate the delivery of housing and services to homeless persons, and evaluate the effectiveness of the homeless delivery system in moving people from homelessness to stability in permanent housing.

Vision

The Southern California Regional Homeless Management Information System (SCR HMIS) Collaborative is dedicated to providing the best possible, highest quality regional Homeless Management Information System (HMIS) to enhance the delivery of services for persons experiencing homelessness. Specifically, the HMIS will

- Facilitate the coordination of service delivery for homeless persons,
- Enable agencies to track referrals and services provided, report outcomes, and manage client data using accessible, user-friendly and secured technology; and
- Enhance the ability of policy makers and advocates to gauge the extent of homelessness and plan services appropriately throughout Los Angeles County and Orange County.

Mission Statement

The SCR HMIS Collaborative will use HMIS to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness throughout Southern California.

V. Vendor Contracts

A. Vendor Selection

Having followed a community-based planning process to gather recommendations, the Participants released a joint Request for Proposals to select an HMIS vendor. A review committee comprised of HMIS Steering Committee members reviewed and rated proposals, leading to a recommended vendor, Adsystech, Inc. Participant representatives are responsible for obtaining the appropriate approvals from their respective decision-making bodies in order to maintain contracts with Adsystech, Inc.

B. Vendor Contracts

The Participants will maintain individual contracts with Adsystech.

VI. Project Management and Oversight

A. All Participants agree to meet the following project management requirements:

1. Designate a HMIS Collaborative Working Group Lead to contact regarding project management issues;
2. Designate a HMIS Collaborative Working Group Lead to serve on the SCR HMIS Steering Committee for the term of this MOU;
3. Meet their financial obligations to Adsystech in accordance with their respective contracts;
4. Ensure their participating agencies and users meet Collaborative-approved training standards prior to obtaining system access;
5. Jointly create and manage HMIS policies and procedures;
6. Maintain a process to hear and address issues from users under its domain;
7. In situations where users operate programs in multiple Continuum of Care systems, the Participants responsible for those systems agree to work jointly to address problems and concerns.
8. Requests for data for any regional or system wide-reporting will be submitted via email to the HMIS Collaborative Working Group Lead. Requests must be approved or denied within (10) business days of receipt. Data used for such purpose will only be at the aggregate level and at no time will any confidential client information be disclosed.

B. Project Oversight

The SCR HMIS Steering Committee will be responsible for overseeing the coordinated implementation of HMIS in Los Angeles and Orange Counties. The SCR HMIS Steering Committee will meet at least quarterly to review the progress of implementation, identify and resolve problems, to update policies and procedures, and to review reports from Participants, as needed.

The SCR HMIS Steering Committee will utilize Working Groups to advise the Committee on specific matters related to the implementation and operation of HMIS.

The Steering Committee may also establish ad hoc and other committees as needed.

Likely ad hoc steering committees may include a Program and Policy Committee to manage processes for regional reporting, compliance with revised HMIS Data and

Technical Standards, and HMIS functionality changes and updates. Regional reporting goals will include a regional AHAR (Annual Homeless Assessment Report) regional client served summary reports, and regional analysis on program effectiveness.

VII. Term of Agreement

This agreement will be in force one year from the date of execution, and may be renewed for two additional one-year terms at the discretion of the Participants.

VIII. Amendments and Modifications

Any amendments or modifications to the Agreement must be in writing, and shall be effective only if executed by all parties.

IX. Termination

Any participant to this agreement may terminate their participation following 30 days written notice to the remaining Collaborative Participants.

X. Severability

Notwithstanding the termination of any Participant, the terms of the agreement shall remain in effect for all other signers.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed and attested to by their proper officers hereunto duly authorized, as of the date first herein above written.

City of Glendale

Date: 11-5-2015

By: [signature]

Title: Community Sam Mans

Print Name: Ivet Samuelyan

2-1-1 Orange County

Date: 11-5-2015

By: [signature]

Title: Director, Data & Technology

Print Name: Amber Killinger

City of Pasadena

Date: 11/6/15

By: [signature]

Title: Project Planner

Print Name: Anne Lansing

Los Angeles Homeless Services Authority

Date: 11/6/15

By: [signature] - Director of Programs

Executive Director (signing authority for Peter Lynn)

Print Name: Chris Callandrillo

PERMANENT SUPPORTIVE HOUSING

[written standards]

Pasadena Partnership to End Homelessness

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[Introduction]

In accordance with Title 24 of the Code of Federal Regulations (24 CFR) Part 578, the City of Pasadena (City) and the Pasadena Partnership to End Homelessness (Pasadena CoC) have developed the following written standards. In conjunction with 24 CFR Part 578 and the orders of priority established in Notice CPD-16-11, these standards will apply to all projects that receive Pasadena CoC Permanent Supportive Housing (PSH) funding and are intended as basic minimum standards to which grantees can make additions and more stringent standards applicable to their own projects. In addition, all projects must comply with the Notice of Funding Availability (NOFA) under which the project was originally awarded and, as applicable, the Consolidated Appropriations Act of 2014 and the Further Continuing Appropriations Act of 2015.

The goal of these standards is to synthesize key elements of the HUD regulations with the processes and priorities of the Pasadena CoC to ensure that the PSH program is administered fairly and methodically. The City and the Pasadena CoC will continue to build upon and refine this document.

GUIDING PRINCIPLES

The Pasadena CoC is dedicated to HUD's goal of ending chronic homelessness. Research has consistently found that PSH using a Housing First approach is the most effective solution for people experiencing chronic homelessness. As such, the Pasadena CoC is firmly committed to prioritizing the chronically homeless for PSH and has embraced a Housing First approach for the CoC-PSH.

Prioritizing Chronically Homeless

PSH is not a one-size-fits-all approach and should only be offered to those households that truly need that level of support. Thus, in order to use our limited resources in the most effective means possible, the Pasadena CoC is committed to prioritizing those most in need through an established order of priority. Within that order of priority, all CoC-PSH funded programs are required to fill vacant beds with chronically homeless individuals. In addition, PSH programs that do not receive CoC funding are strongly encouraged to prioritize the chronically homeless.

Housing First

An immediate connection to PSH can ensure that over 80% of homeless individuals remain housed, even among clients with severe substance abuse and mental health conditions. Therefore, the Pasadena CoC has embraced a housing first approach for CoC-PSH to best serve this population.

Housing First is a simple philosophy that offers permanent, affordable housing as quickly as possible to homeless individuals and families. Once in a program, case managers work to engage participants in voluntary supportive services and connect them to community-based supports with the goals of helping them to remain in housing and avoid returns to homelessness. Income, sobriety, participation in treatment and/or other services, are not required as a condition for getting housing.

COC COORDINATION WITH ESG

The Pasadena CoC utilizes the following approaches and procedures to ensure the coordination of resources among grantees:

Coordinated Entry System

To minimize barriers to housing access and ensure timely placement, grantees are required to receive referrals through Pasadena's Coordinated Entry System (CES). The CES uses a no-wrong door approach in which homeless individuals who engage with any agency within the Pasadena CoC are entered into the system. This system ensures that every homeless individual is known by name, provides assistance based on individual's unique needs, and matches them to the right housing fit.

Universal Assessment

All individuals will be assessed using a comprehensive, universal assessment tool called the Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT). This tool guarantees that individuals' levels of need and eligibility determinations are made in an informed and objective manner.

Homeless Management Information System

All grantees are required to participate in the Homeless Management Information System (HMIS) per the ESG and CoC Interim Rule (24 CFR 576 and 578). HMIS provides an opportunity to document homelessness and helps to ensure coordination between service providers while avoiding duplication of services and client data.

[Program Overview]

TARGET POPULATION

The eligible population for PSH is individuals with disabilities or families in which one adult or child has a disability. Based on HUD's recommendations, however, the Pasadena CoC has chosen to target chronically homeless individuals or families for CoC-funded PSH (see Exhibit 1 For definition).

CORE PROGRAM COMPONENTS

The Pasadena CoC-PSH program provides permanent housing and support services to individuals and families with a disability, prioritizing those who are chronically homeless. The program is designed to reintegrate this highly vulnerable population into the community by addressing their basic needs for housing and providing ongoing support. There are two key components of the Pasadena CoC-PSH program: permanent housing and supportive services.

Permanent Housing

Using a housing first approach, program participants are provided with rapid access to permanent housing with minimal preconditions. Good credit or rental history are not required to receive housing. Each household is placed in a unit that has access to meal preparation facilities or where grantees provide meals.

Tenants can remain in their homes as long as the basic requirements of tenancy are met—paying the rent (as applicable), not interfering with other tenants' use of their homes, not causing property damage, etc. This ensures participants have a private and secure place to make their home, just like other members of the community, and provides them with a stable foundation from which they can pursue their goals.

Supportive Services

Once in housing, program participants have access to the support services that they need and want to live as independently as possible. Although PSH is designed for people who need supportive services, accepting these services is not a condition of housing. A person's home is a place to live rather than a treatment setting. As such, supportive services are voluntary, but can and should be used to persistently engage tenants and ensure housing stability.

Tenants receive assistance in defining their needs and preferences through annual assessments of service needs and individualized support plans that reflect those preferences. On-site residential supervision is provided as needed to facilitate the adequate provision of supportive services to the residents.

Exhibit 1: Chronically Homeless Definition

Who Can be Chronically Homeless

01 An individual who meets all three conditions of chronic homelessness (see below)

02 An individual who has been residing in an institutional care facility for fewer than 90 days (including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility) and met all three conditions of chronic homelessness before entering that facility

03 A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all three conditions of chronic homelessness (including a family whose composition has fluctuated while the head of household has been homeless)

Three Conditions of Chronic Homelessness

Currently Homeless

Currently homeless and lives in one of the following:

- An emergency shelter
- A safe haven
- A place not meant for human habitation*

Individuals residing in institutional care facilities <90 days who were homeless (as described above) immediately prior to entering that facility are considered homeless.

*A place not meant for human habitation is defined as a place not designated for or ordinarily used as a regular sleeping accommodation for human beings, including car, park, abandoned building, bus/train station, airport, or camping ground. This does not include persons living in housing that is substandard and in need of repair or housing is crowded.

12 Months Continuous or Cumulative Homelessness

Is currently homeless and has been either:

- Continuously homeless for at least 12 months; or
- Homeless on at least four (4) separate occasions in the last three (3) years, as long as the combined occasions equal at least twelve (12) months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living in an emergency shelter, safe haven, or place not meant for human habitation.

Stays in institutional care facilities for fewer than 90 days do not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility.

Disabling Condition

Can be diagnosed with one or more of the following disabilities which is of long, continued, and indefinite duration; substantially impedes the individual's ability to live independently; and could be improved by more suitable housing conditions:

- Substance use disorder
- Serious mental illness
- Developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002))
- Post-traumatic stress disorder
- Cognitive impairments resulting from brain injury
- Chronic physical illness or disability

[Coordinated Assessment & Prioritization]

COORDINATED ASSESSMENT

All Pasadena CoC-PSH providers are required to fill vacant beds through the region's Coordinated Entry System (CES) to ensure that the CoC's limited resources are being used in the most effective manner possible and that households most in need are being prioritized. The CES consists of three components: universal assessment, housing navigation, and housing match.

Universal Assessment

The CES assesses the most vulnerable homeless residents within the Pasadena CoC using a universal assessment, the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT). The VI-SPDAT evaluates eligibility and provides an objective and comparable measure of vulnerability and service need.

Housing Navigation

Once individuals have been assessed, those with the greatest needs (scores of 8+) are assigned a Housing Navigator to assist them in locating housing and support them in the collection of documentation (see Recordkeeping Requirements), ensuring they can be matched with PSH as quickly as possible.

Housing Match

PSH providers submit vacancies to the CES when housing becomes available. The CES then matches the most vulnerable individual with that housing unit through a single prioritized waiting list that ranks individuals based on the CoC's designated order of priority (see below).

Housing providers agree to hold turnover beds open for a period of 15 days while the CES Community Matchers consult the existing prioritized waiting list (based on client prioritization guidelines below). If an individual or family who is chronically homeless cannot be found within the 15-day time period, the turnover bed may be filled with the agency's normal process.

Exhibit 2: Severity of Service Needs

For the purpose of this policy, persons who have been identified as having the most severe service needs have at least one of the following:

High Utilization of Crisis Services

History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or

Significant Health or Behavioral Challenges

Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing

Youth / Victims of DV

High risk of continued trauma or high risk of harm or exposure to very dangerous living situations

Severe service needs as defined above should be identified and verified through the CoC's Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT).

PRIORITIZATION

The Pasadena CoC has developed an order of priority to establish a uniform process for prioritizing placement into PSH through the CES. The over arching intent of this order of priority is to ensure that chronically homeless persons with the longest lengths of time homeless and the most severe service needs are prioritized over other eligible households (see Exhibit 2 for definition of Severity of Service Needs). It is important to note that the order of priority established below will be followed with consideration of agency goals and target populations

(e.g. mental illness). This order of priority may be revisited once the CES has fully automated referrals through HMIS, ensuring it accurately reflects the system's methods of prioritization which will be based upon the orders of priority established by HUD in Notice CPD-16-011.

Order of Priority for PSH Vacancies

All grantees receiving Pasadena CoC funding for PSH must fill vacant beds with chronically homeless persons. Exhibit 3 outlines the Pasadena CoC's order of priority for filling PSH beds.

Exhibit 3: Order of Priority for PSH Vacancies

Order of Priority	Chronically Homeless	Severe Service Needs	Other Requirement
01	Yes	Yes	At least 12 months continuous or at least 12 months cumulative across 4 episodes in 3 years
02	Yes	Yes	Less than 12 months cumulative across 4 episodes in 3 years
03	Yes	No	At least 12 months continuous or at least 12 months cumulative across 4 episodes in 3 years
04	Yes	No	Less than 12 months cumulative across 4 episodes in 3 years
05	Yes	No	None

Order Of Priority When No CH Is Identified

When no chronically homeless (CH) persons can be identified to fill a PSH vacancy, the CES will fill vacancies according to the priorities listed in Exhibit 4.

Exhibit 4: Order of Priority When No CH is Identified

Order of Priority	Disability	Severe Service Needs	Other Requirement
01	Yes	Yes	Long periods of episodic homelessness (fewer than four occasions but cumulative length of time 12 or more months)
02	Yes	Yes	Length of time homeless should be considered when prioritizing households but there is not a minimum length of time required
03	Yes	No	Currently residing in a place not meant for human habitation, a safe haven, or an emergency shelter. Length of time homeless should be considered when prioritizing households but there is not a minimum length of time required
04	Yes	No	Currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were feeling or attempting to flee domestic violate, even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing

[Eligible Uses of Funds]

Pasadena CoC-PSH grant funds may be used for acquisition, rehabilitation, new construction, leasing, rental assistance, operating costs, and supportive services, as detailed below. Further detail can be found in 24 CFR Part 578, Subpart D.

ACQUISITION

CoC-PSH funds may be used to pay for up to 100 percent of the cost of acquisition of property for the provision of PSH or supportive services.

REHABILITATION

CoC-PSH funds may be used to pay up to 100 percent of the cost of the rehabilitation of structures to provide PSH or supportive services. Eligible rehabilitation costs include installing cost-effective energy measures and bringing an existing structure to State or local government health and safety standards.

NEW CONSTRUCTION

CoC-PSH funds may be used to pay up to 100 percent of the cost of new construction and the cost of land associated with that construction, for use as housing. New construction includes either the building of a new structure or an addition that increases the floor area of an existing structure by 100 percent or more.

If funds are used for new construction, the costs must either be substantially less than the costs of rehabilitation or there must be a lack of available appropriate units that could be rehabilitated at a cost less than new construction. For purposes of cost comparison, costs of rehabilitation or new construction may include the cost of real property acquisition.

OPERATING COSTS

CoC-PSH funds may be used to pay the costs of day-to-day operation of permanent housing in a single structure or individual housing units. Eligible costs include the maintenance and repair of housing; property taxes and insurance; scheduled payments to a reserve for replacement of major systems of the housing (provided that the payments must be based on the useful life of the system and expected replacement cost); building security for a structure where more than 50 percent of the units or area is paid for with grant funds; electricity, gas, and water; furniture; and equipment.

SUPPORTIVE SERVICES

CoC-PSH funds may be used to pay for eligible costs of supportive services that address the needs of program participants and are necessary to assist them in obtaining and maintaining housing throughout the duration of their residence in the project. For participants who exit PSH, supportive services may only be provided if the resident was homeless in the prior six months (i.e. they were in the program less than six months). Eligible supportive services are detailed in Appendix A.

If the service is being directly delivered by the grantee, eligible costs for those services include the labor or supplies, and materials incurred by the grantee in directly providing support services to program participants and the salary and benefit packages of the grantee staff that directly delivers the services.

If the supportive services are provided in a facility that is separate from the housing structure, the costs of the day-to-day operation of the supportive service facility, including maintenance, repair, building security, furniture, utilities, and equipment are eligible as a supportive service. Staff training and the costs of obtaining professional licenses or certifications needed to provide support services are not eligible costs.

LEASING

Leasing projects involve the leasing of property or portions of property (including single units) not owned by the recipient for use in providing PSH or supportive services. With leasing projects, the lease is between the grantee and the landowner while the occupancy agreement or sublease is between the grantee and program participant.

Leasing funds may be used to pay up to 100% of the costs of leasing a structure for up to three years. When electricity, gas, and water are included in the rent, these utilities may be paid from leasing funds. If the landlord does not provide utilities, these utility costs are an operating cost, except for supportive service facilities.

Exhibit 5: Summary of Eligible Leasing Costs

Eligible Leasing Costs

CoC-PSH leasing funds can pay for:

- Leasing of property or portions of property for use in providing permanent housing
- Security deposits (up to 2 months' rent)
- First and/or last month's rent of an individual unit

Leasing funds cannot be used to lease units or structures owned by the recipient, sub-recipient, or their parent, subsidiary, or affiliated organization. HUD has the authority, however, to grant an exception to the ownership clause for good cause.

Other Eligible Costs

As summarized by Exhibit 5, recipients of leasing grants may also use funds to pay for security deposits, in an amount not to exceed 2 months of actual rent. An advance payment of the last month's rent may be provided to the landlord in addition to the security deposit and payment of the first month's rent.

Occupancy Charges

For leasing awards, grantees are not required to impose occupancy charges on program participants as a condition of residing in the housing. However, if occupancy charges are imposed, grantees must treat all participants the same by having a clearly outlined process for determining the amount of charge that follows a specific calculation procedure to ensure participants are not overcharged. Occupancy charges may not exceed the highest of:

- 30% of the family's monthly adjusted income
- 10% of the family's monthly income
- The portion of welfare payments specifically designated by the public welfare agency to meet the family's housing costs

In addition, grantees can require the program participants to pay for utilities. If the participant is required to pay utilities (excluding telephone) then a utility allowance must be factored into the rent calculation determination. Alternatively, grantees can use program operating funds or other sources to pay for the utilities.

Administration of Funds

With leasing grants, recipients pay rent directly to the landowner. If required, participants pay their portion of the occupancy charge (i.e. rent) directly to the grant recipient.

RENTAL ASSISTANCE

Rental assistance grants are differentiated from leasing grants in that these grants provide rental assistance to eligible persons for permanent housing. For rental assistance grants, the lease is between the program participant and the landowner or sub lessor. Grant funds may be used for permanent supportive housing rental assistance. The rental assistance may be tenant-based, project-based, or sponsor-based, as detailed below and summarized in Exhibit 6.

Rental assistance cannot be provided to a program participant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.

Tenant-Based Rental Assistance

Tenant-based rental assistance (TBRA) allows people to choose their own housing unit from the private rental housing market. Participants receive vouchers, entitling them to a reduced rent, which can be used to rent a unit of their choice from a landlord who agrees to accept the voucher. TBRA helps to ensure that participant's individual preferences and needs are met and that participants are fully integrated into the community.

For TBRA, the rent subsidy is portable, meaning that tenants who have complied with all program requirements retain the rental assistance if they move within the Continuum of Care geographic area. Although TBRA

Exhibit 6: Types of Rental Assistance

Tenant-Based	Sponsor-Based	Project-Based
Rental assistance follows the program participant	**Rental assistance stays with the sponsor/unit**	**Rental assistance stays with the unit**
○ Participant locates housing of their choice ○ If the participant moves, they can take the rental assistance to a new unit	○ Grantee contracts with Sponsor who locates and rents housing units ○ Sponsor then subleases the units to participants ○ If the participant moves out of the unit, the sponsor can then sublease it to the next eligible participant	○ Grantee contracts with building owner ○ Owner agrees to lease the subsidized unit to program participants ○ If the participant moves out of the unit, the unit is rented to another eligible participant

program participants have the ability to move and retain the rental assistance, grantees may limit where participants may live if it is necessary to facilitate the coordination of supportive services.

Program participants who have complied with all program requirements during their residence and who have been a victim of domestic violence, dating violence, sexual assault, or stalking, and who reasonably believe they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, or stalking (which would include threats from a third party, such as a friend or family member of the perpetrator of the violence) may retain the rental assistance and move to a different Continuum of Care geographic area if they move out of the assisted unit to protect their health and safety and are able to document the violence and basis for their belief. See recordkeeping requirements to ensure proper documentation of imminent threat of harm.

Sponsor-Based Rental Assistance

Sponsor-based rental assistance uses sponsor agencies to locate and rent housing units in the private market and then sublease these units to people who are homeless. Sponsors may be private, non-profit organizations or community mental health agencies established as a public non-profit organization.

In this model, a sponsor agency owns units or leases units and then subleases the unit to a program participant. Units that receive sponsor-based rental assistance can be owned or leased by the recipient, sub recipient, or private owner in the community.

If the program participant moves out of the unit, the sponsor can then sublease it to the next eligible participant. Or the sponsor can elect to continue SBRA to support the participant in his new unit, or the sponsor can locate another unit in the community and then sublet that unit to the same or a different eligible program participant. The decision is up to the sponsor because the rental assistance stays with the sponsor.

Project-Based Rental Assistance

Project-based rental assistance (PBRA) is provided through a contract with the owner of a building who agrees to lease the subsidized units to program participants. With this model, the program participant does not retain rental assistance if they move. Rather, the unit would be rented to another eligible participant that would benefit from the PBRA.

Other Eligible Costs

As summarized in Exhibit 7, in addition to paying the rent, grantees may use up to two months of rent to pay a security deposit to an owner. In addition, an advance payment of the first and last month's rent may be provided to the landlord.

Grantees may also use rental assistance funds to provide vacancy payments to landlords participating in the program if the unit is vacated before the end of the lease. In this situation, rental assistance may continue for a maximum of 30 days from the end of the month in which the unit is vacated unless occupied by another eligible person. This policy is intended to allow grantees time to engage another person who is homeless to move into the unit without losing the participation of the landlord.

Grantees can also cover up to one month's rent for property damages, but this is limited to one time per participant. Finally, staff time delivering rental assistance such as contracting for the units or inspecting the units, can be covered by rental assistance funds.

Participant Rent

Grantees receiving rental assistance must require program participants to pay a portion of their rent in accordance with section 3(a)(1) of the U.S. Housing Act of 1937, unless they have no income at all. The program participant's rent contribution must be equal to the highest of:

- 30% of the family's monthly adjusted income (adjustment factors include allowances and deductions for disabled household members, member expenses, childcare expenses, etc.)
- 10% of the family's monthly gross income
- The portion of welfare payments specifically designated by the public welfare agency to meet the family's housing costs

If the participant is required to pay utilities (excluding telephone) then a utility allowance must be factored into the rent calculation determination.

Exhibit 7: Summary of Eligible Rental Assistance Costs

Eligible Rental Assistance Costs

CoC-PSH rental assistance funds can pay for:

- Unit rent
- First and/or last month's rent
- Security Deposits (up to 2 months' rent)
- Property damages (up to one month)
- Vacancy payments (up to 30 days)
- Staff costs carrying out eligible activities

Administration of Funds

Program participants pay their portion of rent directly to the landlord. Either the grantee or the rental assistance administrator then pays the difference between the total rent and the amount paid by the program participant. Recipients can never cover the cost of the program participant's rent if the program participant fails to pay his or her portion of rent.

The Consolidated Appropriations Act of 2014 (Public Law 113-76, approved January 17, 2014) and the Consolidated and Further Continuing Appropriations Act of 2015 (Public Law 113-235, approved December 16, 2014) authorized nonprofit organizations to administer rental assistance to landlords in permanent housing funded with fiscal year (FY) 2012, FY 2013, FY 2014, or FY 2015. A rental assistance administrator must make rental assistance payments to the landlord for all other rental assistance grants.

Administering rental assistance in the CoC program is:

1. Contracting for and making rental assistance payments to the landlord/landowner; and
2. Conducting the HQS Inspections

The costs of administering rental assistance are considered service delivery costs of rental assistance and are eligible in the CoC Program as rental assistance costs.

[Program Requirements]

RENT LIMITS

HUD mandates specific rent requirements for all PSH rental assistance and leasing awards. As detailed below, both types of awards are subject to rent reasonableness standards. Additionally, leasing awards that provide assistance to participants for individual units are required to meet Fair Market Rent standards.

Rent Reasonableness

Annual certification that rent complies with HUD's standard of rent reasonableness is required for both rental assistance and leasing awards (including structures and individual units). This means that the rent charged for a unit must be reasonable in relation to rents currently being charged for comparable units in the private unassisted market and must not be in excess of rents currently being charged by the owner for comparable unassisted units.

Form: The Rent Reasonableness Checklist and Certification form in Appendix B may be used to ensure this guideline has been met.

Fair Market Rent

Rents for individual units paid with CoC leasing grants may not exceed the Fair Market Rent (FMR). Recipients, however, may use other funds to pay rent amounts in excess of FMR. There is no FMR limitation for structures paid with CoC leasing grants.

With rental assistance grants, while awards are calculated based on Fair Market Rent amounts for the applicable unit sizes, a recipient is allowed to pay rents up to the rent reasonable amount even if it is higher than the FMR. If the recipient pays rent beyond FMR levels for some units in a project, they must ensure that they have sufficient funding—such as program participant rent contributions or lower rents in other areas of the community—to serve the contracted number of program participants for the remainder of the grant term.

All units that are required to meet FMR guidelines must be assessed at entry and annually thereafter.

Form: Los Angeles County Fair Market Rent Guidelines in Appendix B provides current FMR and guidelines for calculating rent.

LEASING & OCCUPANCY AGREEMENTS

A key component in CoC leasing and rental assistance is leasing and occupancy agreements. All participants must have a signed agreement outlining the terms of their housing. Two individuals in a shared housing situation must have their own lease and their own bedroom unless the two individuals are presented together as a household. As pictured in Exhibit 8, the type of leasing arrangement depends on funding type.

Leasing Grants

In projects that receive leasing funds, the recipient contracts for the space from a landowner, and therefore is primarily responsible for the housing or office space, if it's being contracted to provide supportive services. If the space is to be used for permanent housing, the grantee must execute an occupancy agreement with the program participant (i.e. tenant) to formalize his or her rights in the housing and to specify program expectations

regarding continued occupancy in the housing. The occupancy agreement must be for a term of at least one year and be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

Tenant-Based and Project-Based

For tenant-based and project-based rental assistance, landowners have a contract with the grantee and a lease with the program participant (i.e. tenant). The lease agreement must be for a term of at least one year and be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

Sponsor-Based

For sponsor-based rental assistance, grantees have a subrecipient agreement with the sponsor to administer the rental assistance on their behalf. Landowners then enter a contract with the sponsor and a lease with the program participant (i.e. tenant). The lease agreement must be for a term of at least one year and be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

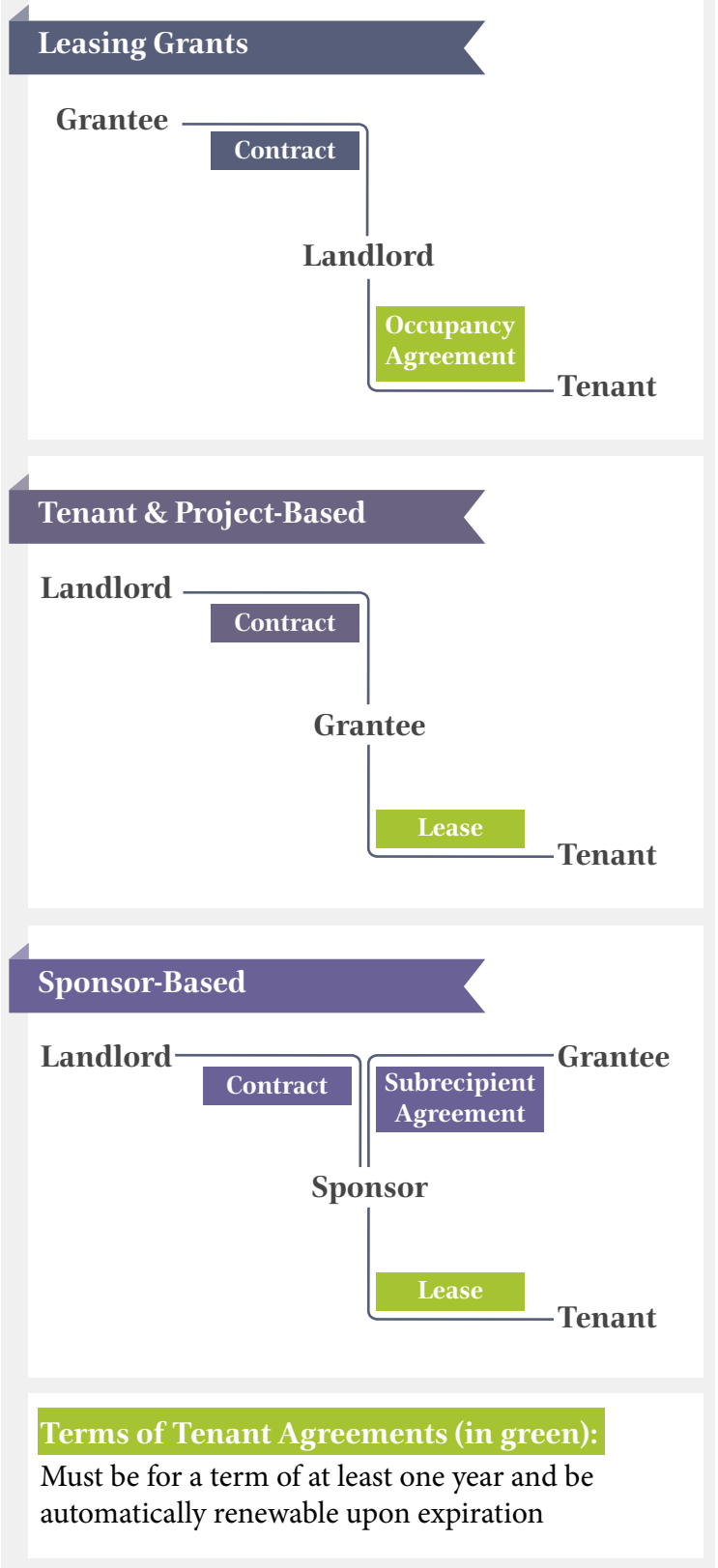
HOUSING STANDARDS

CoC-funded programs with housing programs occupied by program participants are subject to certain housing standards defined by HUD. These standards include Housing Quality Standards (HQS), Suitable Dwelling Unit Size standards, and lead-based paint requirements. Grantees must retain documentation of compliance with these housing standards, including HQS inspection reports.

Housing Quality Standards

All CoC-funded programs with housing programs occupied by program participants must meet the applicable HQS under 24 CFR 982.401 of this title, except that 24 CFR 982.401(j) only applies to

Exhibit 8: Types of Leasing Arrangements



program participants receiving TBRA. Before any assistance is provided, each unit must be physically inspected to assure that the unit meets HQS. In addition, grantees must inspect all units at least annually during the grant period to ensure that the units continue to meet HQS.

Assistance will not be provided for units that fail to meet HQS, unless the owner corrects any deficiencies within 30 days from the date of the initial inspection and the grantee verifies that all deficiencies have been corrected.

Form: The CoC Housing Quality Standards Inspection Guidelines form in Appendix B may be used to ensure this guideline has been met. Appendix D and F provide the accompanying HQS Long Form and HQS Short Form respectively.

Suitable Dwelling Size

Each CoC-funded unit must have at least one bedroom or living/sleeping room for each two persons. Children of the opposite sex, other than very young children, may not be required to occupy the same bedroom or living/sleeping room. If household composition changes during the term of assistance, grantees may relocate the household to a more appropriately sized unit. The household must still have access to appropriate supportive services.

Lead-Based Paint

All CoC-funded programs with housing programs occupied by program participants are required to incorporate lead-based paint remediation and disclosure requirements. Generally, these provisions require the recipient to screen for, disclose the existence of, and take reasonable precautions regarding the presence of lead-based paint in leased or assisted units constructed prior to 1978.

- **Rehabilitation.** For housing rehabilitated with CoC-PSH funds, the lead-based paint requirements in 24 CFR part 35, subparts A, B, J, and R apply.
- **Rental Assistance.** For housing that receives project-based or sponsor-based rental assistance, 24 CFR part 35, subparts A, B, H, and R apply. Projects that receive tenant-based rental assistance are required to comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851-4856), and implementing regulations at part 35, subparts A, B, M, and R apply.
- **Acquisition, Leasing, Services or Operating Costs.** For residential property for which CoC-PSH funds are used for acquisition, leasing, services, or operating costs, 24 CFR part 35, subparts A, B, K, and R apply.

ENVIRONMENTAL REVIEW

Before any funds are committed, the City of Pasadena will conduct an environmental review of the grantee project site(s) to demonstrate there are no hazardous materials present that could affect the health and safety of the occupants. Environmental reviews will be conducted by the City of Pasadena and are acceptable for a 5-year time period. The costs of carrying out environmental review responsibilities are an eligible use of administrative funds.

Form: The Environmental Review Flowchart in Appendix B provides assistance in correctly identifying what level of environmental review is required for the CoC project.

PROGRAM INCOME

HUD defines program income as the income received by the grantee directly generated by a grant-supported activity. For example, rents and occupancy charges collected from program participants are considered program income.

Program income earned during the grant term shall be retained by the recipient, added to funds committed to the project by HUD and the recipient, and used for eligible activities in accordance with the requirements of this part. Costs incident to the generation of program income may be deducted from gross income to calculate program income, provided the costs have not been charged to grant funds.

Security & Utility Deposits

If a program participant leaves the program but remains in the unit for which the deposits were paid, the landlord will continue to hold the security deposit as provided in the lease, and/or the utility company will continue to hold any utility deposit as provided in the utility contract. State or local law and the terms of the lease and/or utility contract will dictate what the landlord and utility company may do with their respective deposits when the tenant leaves the unit and the utility contract terminates.

Programs need not require that security or utility deposits be returned to the program when the participant leaves the program, or when the lease or utility contract terminate. Any repayment of a security or utility deposit is considered program income and must be used as match in accordance with match regulations, and must be tracked in accordance with the recordkeeping requirements for match and program income.

NONDISCRIMINATION & REASONABLE ACCOMMODATION POLICY

CoC-PSH programs must have written policies regarding nondiscrimination and reasonable accommodations/modifications. CoC Programs must operate in compliance with federal nondiscrimination and equal opportunity requirements including the Fair Housing Act, Title VI of the Civil Rights Act, the Age Discrimination Act, Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act. Programs may not discriminate on the basis of actual or perceived sexual orientation, gender identity or marital status. For persons with disabilities, it is unlawful to: (1) fail to make reasonable accommodation in rules, policies, and services to give a person with a disability equal opportunity to occupy and enjoy the full use of a housing unit and (2) fail to allow reasonable modification to the premises if the modification is necessary to allow full use of the premises.

RETENTION AFTER EXTENUATING CIRCUMSTANCES

Surviving members of any household who were living in a unit assisted with CoC-PSH funds at the time of the qualifying member's death, long-term incarceration, or long-term institutionalization, have the right to rental assistance until the expiration of the lease in effect at the time of the qualifying member's death, long-term incarceration, or long-term institutionalization.

TERMINATION POLICIES

The grantee may terminate assistance to a program participant who violates program requirements or conditions of occupancy. Grantees that are providing PSH for hard-to-house populations of homeless persons must exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participant's assistance is terminated only in the most severe cases. Termination does not bar the grantee from providing further assistance at a later date to the same individual or family.

In terminating assistance to a program participant, the grantee must provide a formal process that recognizes

the rights of the individual receiving assistance under the due process of law. This process, at a minimum, must consist of:

1. Providing the participant with a written copy of the program rules and the termination process before the participant begins to receive assistance;
2. Written notice to the program participant containing a clear statement of the reasons for termination
3. A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
4. Prompt written notice of the final decision to the program participant.

EXITS FROM PERMANENT SUPPORTIVE HOUSING

The CoC requires all permanent housing providers to initiate a case conference with the CoC prior to exiting clients or in cases of warnings from landlords, eviction, notices to vacate, or termination. Case conferencing occurs monthly before the CES Team meetings. The case conferencing process includes the Case Manager as well as other CoC service providers who together help to ensure clients successfully exit to permanent housing and have a safety net upon exit, thus preventing any returns to homelessness.

To monitor the successful achievement of this goal, the City of Pasadena will run monthly reports from HMIS to ensure that programs are successfully exiting clients to permanent housing. The City will also monitor returns to homelessness on a monthly basis with notifications sent to Program Managers of any clients that have returned to homelessness to ensure these clients are re-engaged.

[Recordkeeping Requirements]

All CoC-funded programs must establish and maintain policies and procedures for ensuring that CoC program funds are used in accordance with the recordkeeping requirements set forth in 24 CFR 578.103 and Notice CPD-16-11. This section provides an overview of those requirements and the Pasadena CoC's additional recordkeeping requirements.

ESTABLISHING CHRONIC HOMELESS STATUS

To ensure each of the three conditions for chronic homeless status have been met (see Exhibit 1) and verified through the recordkeeping requirements detailed below, the Pasadena CoC has established a Certification of Chronic Homeless Status form. This form is intended to be used as a cover sheet for staff to certify chronic homeless status and must be completed prior to program entry (see Appendix C or www.pasadenapartnership.org).

Evidence of Homeless Status and Length/Frequency of Homelessness

HUD has established four options to document homeless status (and any breaks), as well as an order of priority for documentation. To document the length/frequency of the homeless status, the start and end date must be included in the documentation. To help ensure compliance with HUD's requirements, the Pasadena Partnership has developed a set of recordkeeping forms to document each of these methods of verification. Homeless Status Recordkeeping Forms, available in Appendix C as well as on the CoC's website, www.pasadenapartnership.org.

These four options for documenting homeless status are as follows (in order of priority):

1. **HMIS data.** To document a client's homeless status through HMIS data (or a comparable database used by victim service or legal service providers), a program may print an exit report or screen shot that indicates a client's homeless status as described above.

   Required Form: Greater Los Angeles and Orange County Interagency Data Sharing Consent Form (to obtain individual client records)

2. **Third party referral.** Evidence of current living situation may also be documented by a written referral by a housing or service provider (such as emergency shelters, institutional care facilities, police officers, business owners, etc) that demonstrates the individual or head of household's homeless status. Institutional stays may also be documented through an oral third party verification or discharge paperwork that indicates the dates of stay.

   Required Forms: Written Third Party Verification of Homeless Status or Oral Third Party Verification of Homeless Status (for institutional stays only).

3. **A written observation by an outreach worker.** Evidence of the current living situation may be documented by a written observation of an outreach worker.

   Required Form: Observation of Homeless Status by Outreach Worker

4. **Self-declaration.** In addition, when a written observation by an outreach worker or third party referral is not available, three (3) of the (12) months, as well as all of the breaks, may be documented through a signed statement by the applicant verifying his or her homeless status. This self-declaration must include evidence of the efforts made to obtain third-party evidence as well as documentation of the severity of the situation in which the individual or head of household has been living.

   Required Form: Self Declaration of Homeless Status

Please note that in the most rare and extreme cases, HUD would allow a certification from the individual or head of household seeking assistance in place of third-party documentation for up to the entire period of homelessness. HUD has set a maximum of 25 percent of chronically homeless individuals and families use self-declarations to document more than three (3) months of living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter.

Where third-party documentation could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and evidence of the efforts made to obtain third-party evidence (self-declaration of homeless status) as well as documentation of the severity of the situation in which the individual or head of household has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than 1 year and has not had any contact with anyone during that entire period.

Finally, in establishing the duration of homelessness, a single encounter with a homeless service provider on a single day within one (1) month that is documented through third-party documentation is sufficient to consider an individual or family as homeless for the entire month unless there is any evidence that the household has and a break in homeless status during that month (e.g. evidence in HMIS of a stay in transitional housing).

Evidence of Disabling Condition

In addition being homeless for an extended period of time, to be considered chronically homeless, an individual or head of household must be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in Section 103 of the Developmental Disabilities Assistance Bill of Rights Act of 2000, 42 U.S.C.15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability. Documentation of diagnosis must include one of the following:

Written certification. Written verification of the condition from a professional licensed by the State of California to diagnose and treat the condition.
Required Form: Certification of Disability

Verification from SSA. Written verification from the Social Security Administration.

Disability check. Copies of a disability check (e.g. Social Security Disability Insurance check or Veterans Disability Compensation)

Written observation & written certification (45 days after). Intake staff (or referral staff) observation that is confirmed by written verification of the condition from a professional licensed by the state to diagnose and treat the condition that is confirmed no later than 45 days after the application for assistance and accompanied with one of the types of evidence above.
Required Forms: Observation of Homeless Status & Certification of Disability

Evidence of Institutional Stay

Individuals residing in an institution for less than 90 days (including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility) must provide evidence of homeless status, length/frequency of homelessness and disability (see above requirements) as well as documentation of their stay. Acceptable evidence includes either:

Discharge paperwork or a written or oral referral. Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution that demonstrates the person resided there for less than 90 days. All oral statements must be recorded by the intake worker.

Required Forms: Written Third Party Verification of Homeless Status or Oral Third Party Verification of Homeless Status documenting their stay in the institution and evidence of homeless status as described above.

Certification from the person seeking assistance. Where the evidence above is not obtainable, a written record of the intake worker's due diligence in attempting to obtain the evidence described in the paragraph above and a certification by the individual seeking assistance that states that they are exiting or have just exited an institution where they resided for less than 90 days.

Required Form: Self Declaration of Homeless Status documenting their stay in the institution and evidence of homeless status as described above.

CLIENTS TRANSFERRING FROM RRH[1] OR PSH

For the purpose of transferring to a different CoC-PSH program, participants maintain their chronically homeless status during the time period that they are receiving rapid re-housing or permanent supportive housing assistance through other programs (so long as they met any other additional eligibility criteria for the new program prior to entering the original program). These additional permanent housing programs may include those funded by the Emergency Solutions Grants (ESG) Program, the CoC Program, the Supportive Services for Veterans Families (SSVF) Program, or the Veterans Homelessness Prevention Demonstration Program (VHPD).

Recordkeeping requirements for clients who transfer into a CoC-PSH from a rapid re-housing or PSH program includes the original chronic homeless documentation (prior to entering the original permanent housing), documentation of the reasons for the transfer, as well as documentation that it's the client's choice to switch programs.

BRIDGE HOUSING & MAINTAINING CH STATUS[2]

The Pasadena Partnership understands that once a chronically homeless household has been determined eligible and accepted into a CoC-PSH program, a unit is not always immediately available. During this time, unless they have other options such as temporarily living with friends or family, the household will generally continue to reside in an emergency shelter or on the streets, prolonging their period of homelessness. Thus, after an individual or family has been accepted into a program but before an appropriate unit has been identified, a household may stay with a friend or family in a hotel or motel without losing their eligibility for a CoC-PSH program in which they have already been accepted. In

1. HUD Ask a Question Frequently Asked Question ID 530
2. HUD Ask a Question Frequently Asked Question ID 1913

addition, the individual or family member may be temporarily housed in an available transitional housing bed while a permanent housing unit is identified. This allowance is only permitted in the circumstances described below and only applies to persons that were considered chronically homeless prior to entry into the program:

1. **Housing First.** Since the program participant has been accepted into a CoC-PSH program, the transitional housing provider cannot place any requirements on the program participant, including requiring a program participant to participate in additional services as a condition of occupancy or requiring the program participant to meet sobriety requirements.
2. **Active Housing Search.** The CoC-PSH provider must be actively assisting the program participant to identify a unit as quickly as possible and must be able to document attempts at locating a unit in the case file. Under no circumstance, should the placement in transitional housing slow down placement into permanent housing. This means that placing a program participant into a permanent housing unit should not take any longer than the time it would normally take to place someone in permanent housing who is residing on the streets or in an emergency shelter.
3. **No Duplication of Services.** There cannot be duplication in billing for the program participant. For example, both programs cannot provide and then seek reimbursement from HUD for housing search or other services. The CoC-PSH provider and the transitional housing provider must coordinate to ensure that the appropriate services are provided and the same services are not being paid for out of both grants.

SERVICES PROVIDED

CoC-PSH grantees are required to document and keep records of services provided in HMIS. In addition, grantees are required to document that client records were reviewed at least annually and that the service package offered was adjusted as necessary.

PARTICIPANT INCOME

To determine the amount of contribution towards rent, grantees must examine a program participant's income at entry and annually thereafter (as applicable). If there is a change in family composition (e.g., birth of a child) or a decrease in the resident's income during the year, the resident may request an interim reexamination, and the occupancy charge will be adjusted accordingly. To ensure proper evaluation of a participant's income, the grantee must keep the following documentation:

Income Evaluation Form

Participants must complete an income evaluation form as specified by HUD to determine contribution towards rent.

Verification of Income

In addition to completing an income evaluation form, participants must provide verification of income. The order of priority for verifying income is:

1. **Source Documents.** Source documents (e.g. most recent wage statement, unemployment compensation statement, public benefits statement, bank statement) for the assets held by the program participant and income received before the date of evaluation.
2. **Third-Party Verification.** To the extent that source documents are unobtainable, a written statement by

the relevant third party (e.g. employer, government benefits administrator) or the written certification by the grantee's intake staff of the oral verification by the relevant third party of the income the program participant received over the most recent period.

Forms: Written Third Party Verification of Income or Oral Third Party Verification of Income

3. **Written Certification by the Program Participant.** To the extent that source documents and third-party verification are unobtainable, the written certification by the program participant of the amount of income that the program participant is reasonably expected to receive over the 3-month period following the evaluation.

   Form: Written Self Declaration of Income

RECORDS OF IMMINENT THREAT OF HARM

For each program participant who moved to a difference CoC due to imminent threat of further domestic violence, dating violence, sexual assault, or stalking, grantees must retain documentation of the original incidence and documentation of reasonable belief of imminent threat of further harm.

Original Incidence

Documentation of the original incidence of domestic violence, dating violence, sexual assault, or stalking, only if the original violence is not already documented in the program participant's case file. This may be any of the following:

- A written observation of the housing or service provider
- A letter or documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom the victim has sought assistance
- Medical or dental records
- Court records or law enforcement records
- Written certification by the program participant to whom the violence occurred by the head of households

Reasonable Belief of Imminent Threat of Further Harm

Documentation of the reasonable belief of imminent threat of further domestic violence, dating violence, or sexual assault or stalking, which would include threats form a third-party, such as a friend or family member of the perpetrator of the violence. This may be any of the following:

- A written observation by the housing or service provider, a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom the victim has sought assistance
- Current restraining order
- Recent court order of the other court records
- Law enforcement reports or records
- Communication records from the perpetrator of the violence or family members or friends of the perpetrator of the violence, including emails, voicemails, text messages, and social media posts
- A written certification by the program participant to whom the violence occurred or the head of household

[Appendix A: Eligible Supportive Services]

Housing Services & Related Services

Assist participants in locating, obtaining, and retaining suitable housing, including:

- Housing search
- Tenant counseling
- Understanding leases
- Arranging for utilities
- Making moving arrangements
- Mediation with property owners and landlords
- Credit counseling, assessing a free personal credit report, and resolving personal credit issues
- Payment of rental application fees

Case Management

The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of program participant(s) including:

- Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking
- Using the Coordinated Entry System (CES)
- Counseling
- Developing, securing, and coordinating services
- Obtaining Federal, State, and local benefits
- Monitoring and evaluating program participant progress
- Providing information and referrals to other providers
- Developing an individualized service plan, including planning a path to permanent housing stability
- Conducting required annual assessment of service needs (re-evaluation)

Moving Costs

Reasonable one-time moving costs are eligible and include truck rental and hiring a moving company.

Legal Services

Costs of legal advice and representation in matters that interfere with the homeless individual's or family's ability to obtain and retain housing. Legal services or activities include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling. Filing fees and other necessary court costs are also eligible. If the subrecipient is a legal services provider and performs the services itself, the eligible costs are the subrecipient's employees' salaries and other costs necessary to perform the services.

Legal services are subject to the following provisions:

Eligible Billing Arrangements

CoC funds may be used only for legal advice from and representation by licensed attorneys and by person(s) under the supervision of licensed attorneys.

Costs may be based on:

- Hourly fees
- Fees based on the actual service performed (i.e. fee for service) but only if the cost would be less than the cost of hourly fees

Ineligible Billing Arrangements

Funds must not be used for legal advice and representation purchased through retainer fee arrangements or contingency fee arrangements.

Eligible Subject Matters

Landlord/tenant disputes; child support; guardianship; paternity; emancipation; legal separation; orders of protection and other civil remedies for victims of domestic violence, dating violence, sexual assault, and stalking; appeal of veterans and public benefit claim denials; resolution of outstanding criminal warrants.

Ineligible Subject Matters

Legal services related to immigration and citizenship matters or related to mortgages and homeownership.

Utility Deposits

Payment of utility deposit, which constitutes a one-time fee paid to utility companies.

Food

The costs of providing program participants with meals or groceries is eligible.

Education Services

The costs of improving knowledge and basic educational skills are eligible. Services include instruction or training in consumer education, health education, substance abuse prevention, literacy, English as a Second Language, and General Educational Development (GED).
Component services or activities are:

- Screening, assessment and testing
- Individual or group instruction
- Tutoring
- Provision of books, supplies, and instruction material
- Counseling
- Referral to community resources

Child Care

The costs of establishing and operating child care and providing child care vouchers for children from families experiencing homelessness, including providing meals and snacks, and comprehensive and coordinated developmental activities, are eligible.

- The children must be under the age of 13, unless they are disabled children.
- Disabled children must be under the age of 18
- The child-care center must be licensed by the jurisdiction in which it operates in order for its costs to be eligible

Employment Assistance & Job Training

The costs of establishing and operating employment assistance and job training programs are eligible, including classroom, online, and/or computer instruction, on-the-job instruction, services that assist individuals in securing employment, acquiring learning skills, and/or increasing earning potential. The cost of providing reasonable stipends to program participants in employment assistance and job training programs is also an eligible cost. Learning skills include those skills that can be used to secure and retain a job, including the acquisition of vocational licenses and/or certificates. Services that assist individuals in securing employment consist of:

- Employment screening, assessment, or testing
- Structured job skills and job-seeking skills
- Special training and tutoring, including literacy training and prevocational training
- Books and instructional material
- Counseling or job coaching
- Referral to community resources

Life Skills Training

The costs of teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, domestic violence, substance abuse, and homelessness but that are necessary to function independently in the community are eligible. Components of life skills training include:

- Budgeting of resources and money management
- Household management
- Conflict management
- Shopping for food or other needed items
- Nutrition
- The use of public transportation
- Parent training

Mental Health Services

The direct outpatient treatment of mental health conditions by licensed professionals are eligible costs. Components of mental health services include:

- Crisis interventions
- Counseling
- Individual, family, or group therapy sessions
- The prescription of psychotropic medications or explanations about the use and management of medications
- Combinations of therapeutic approaches to address multiple problems

Outpatient Health Services

The direct outpatient treatment of medical conditions by licensed medical professionals are eligible including:

- Providing an analysis or assessment of an individual's health problems and the development of a treatment plan
- Assisting individuals to understand their health needs
- Providing directly or assisting individuals to obtain and utilize appropriate medical treatment
- Preventative medical care and health maintenance services, including in-home health services and emergency services
- Providing follow-up services
- Preventative and non-cosmetic dental care

Outreach Services

Activities to engage persons for the purpose of providing immediate support and intervention and for identifying potential program participants are eligible. Eligible costs include the outreach worker's transportation costs and a cell phone to be used by the individual performing the outreach. The costs of program participant intake and assessment, outpatient treatment, group and individual counseling, and drug testing are eligible. Inpatient detoxification and other inpatient drug or alcohol treatment are ineligible. Component activities and services consist of:

- Initial assessment
- Crisis counseling
- Addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries
- Actively connecting and providing people with information and referrals to homeless and mainstream programs
- Publicizing the availability of housing and/or services provided within the geographic area covered by the Continuum of Care Substance abuse treatment services

Transportation

Eligible costs are:

- The costs of program participant's travel on public transportation or in a vehicle provided by the grantee to and from medical care, employment, child care, or other services eligible under this section
- Mileage allowance for service workers to visit program participants and to carry out housing quality inspections
- The costs of purchasing or leasing a vehicle in which staff transports program participants and/or staff serving program participants
- The cost of gas, insurance, taxes, and maintenance for the vehicle
- The costs of grantee staff to accompany or assist program participants to utilize public transportation

If public transportation options are not sufficient within the area, the recipient may make a one-time payment on behalf of a program participant needing car repairs or maintenance required to operate a personal vehicle, subject to the following:

- Payments for car repairs or maintenance on behalf of the program participant may not exceed 10 percent of the Blue Book value of the vehicle
- Payments for car repairs or maintenance must be paid by the grantee directly to the third-party that repairs or maintains the car
- The grantee may require program participants to share in the cost of car repairs or maintenance as a condition of receiving assistance with car repairs or maintenance

[Appendix B: Property Related Forms]

Rent Reasonableness Checklist & Certification

The rent charged for a unit must be reasonable in relation to rents currently being charged for comparable units in the private, unassisted market and must not be in excess of rents currently being charged by the owner for comparable unassisted units.

Gross Rent Calculation

Proposed Contract Rent + Utility Allowance = Proposed Gross Rent

Comparable Units

	Proposed Unit	Unit #1	Unit #2	Unit #3
Address				
Number of Bedrooms				
Square Feet				
Type of Unit/Construction				
Housing Condition				
Location/Accessibility				
Amenities: **Unit:** **Site:** **Neighborhood:**				
Age in Years				
Utilities (type)				
Unit Rent **Utility Allowance** **Gross Rent**				
Handicap Accessible?				

Staff Certification

Based upon a comparison with rents for comparable units, I have determined that the proposed rent for the unit:

☐ is reasonable

☐ is not reasonable.

Name: _____ **Signature:** _____ **Date:** _____

Los Angeles County Fair Market Rent Guidelines

Calculating the Gross Rent Amount for FMR Standard
The gross rent of a unit that is being tested by the FMR standard is the:

Total contract rent amount of the unit
+
Any fees required for occupancy under the lease (excluding late fees and pet fees)
+
Monthly utility allowance* (excluding telephone) established by local PHA

**Note: The monthly utility allowance is added only for those utilities that the tenant pays for separately (for more information on utility allowances established by the local public housing agency (PHA), see 24 CFR 982.517). The utility allowance does not include telephone, cable or satellite television service, and internet service. If all utilities are included in the rent, there is not utility allowance.*

Los Angeles County Fair Market Rent (FY 2016)
FMRs for each fiscal year can be found by visiting HUD's website at: www.huduser.org/portal/datasets/fmr.html.

Unit Bedrooms	Final FY 2016 FMR
Efficiency	$947
1-Bedroom	$1,154
2-Bedroom	$1,490
3-Bedroom	$2,009
4-Bedroom	$2,227

CoC Housing Quality Standards Inspection Guidelines

The U.S. Department of Housing and Urban Development (HUD) has developed Housing Quality Standards (HQS) that define the minimum health and safety regulations that must be met in housing for which rental assistance payments are made with CoC program funds.

Initial Inspection
Before any assistance may be provided on behalf of a program participant, the grantee must physically inspect each unit using the HQS Long Form (52580-a) to assure that the unit meets HQS. Assistance will not be provided for units that fail to meet HQS, unless the owner corrects any deficiencies within 30 days from the dat of the initial inspection and the grantee verifies that all deficiencies have been corrected.

Annual
Grantees must also inspect all units at least annually during the grant period to ensure that the units continue t meet HQS (annual must be started within 365 days of the last inspection). The HQS short form 52580 can be utilized on subsequent annual inspections.

[Appendix C: Intake & Assessment Forms]

Certification of Chronic Homelessness

This checklist may be used for staff persons to assess a client's chronic homeless status. It should be accompanied by supporting documentation of both disability and time homeless. Together, these documents must be maintained in the client's file.

APPLICANT NAME:

DIAGNOSIS WITH DISABILITY

Individual or adult head of household (or if there is no adult, a minor head of household) has been diagnosed with one (or more) of the following disabilities (check all that apply). Disability is of long, continued, and indefinite duration, substantially impedes the individual's ability to live independently, and could be improved by more suitable housing conditions:

- ☐ Substance use disorder
- ☐ Serious mental illness
- ☐ Developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000)
- ☐ Post-traumatic stress disorder
- ☐ Cognitive impairments resulting from brain injury
- ☐ Chronic physical illness or disability

Evidence of Disability

- ☐ Certification of Disability form; or
- ☐ Written verification from the Social Security Administration; or
- ☐ Copies of a disability check (e.g. Social Security Disability Insurance or Veterans Disability Compensation); or
- ☐ Outreach Worker observation confirmed by a Certification of Disability form < 45 days after application for assistance

12 MONTHS CONTINUOUS OR CUMULATIVE HOMELESSNESS

Individual or adult head of household (or if there is no adult, a minor head of household) is homeless and has been living in a place not meant for human habitation, a safe haven, or an emergency shelter:

- ☐ Continuously for at least 12 months; or
- ☐ On at least 4 separate occasions in the last 3 years, where the combined occasions equal to at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described above.

Notes:

Individuals residing in institutional care facilities < 90 days who were homeless (as described above) immediately prior to entering that facility are considered homeless. Institutional care facilities include jails, substance abuse or mental health treatment facilities, hospitals, or other similar facilities. Stays in these facilities for < 90 days do not constitute as a break in homelessness, and are included in the 12-month total, as long as the individual was homeless immediately before entering the facility.

A place not meant for human habitation is defined as a place not designated for or ordinarily used as a regular sleeping accommodation for human beings, including car, park, abandoned building, bus/train station, airport, or camping ground. This does not include persons living in housing that is substandard and in need of repair or housing is crowded.

Evidence of Homeless Status

To certify duration of homelessness, please complete the table below and attach documentation, which may include: HMIS records; a Written 3rd Party Verification form (institutional stays may also be documented through an Oral 3rd Party Verification Form or discharge paperwork that includes the dates of stay); or an Outreach Worker Observation form. In addition, 3 of the 12 months of continuous or cumulative homelessness, as well as all of the breaks, may be documented with a Self-Certification form.

Location of Stay (Breaks >7 days must be documented)	Verification Type (HMIS/3rd Party/Observation/Self-Cert.)	Begin Date	End Date	Duration
Total Months Homeless (must be >12 months)				

Note: *A single encounter with a homeless service provider on a single day within 1 month that is documented through third-party documentation is sufficient to consider an individual or family as homeless for the entire month unless there is any evidence that the household has had a break in homeless status during that month (e.g. evidence in HMIS of a stay in transitional housing).*

EVIDENCE OF SEVERITY OF SERVICE NEEDS

- ☐ To establish prioritization due to severe service needs, needs must be identified and verified through VI-SPDAT

STAFF CERTIFICATION

I certify that the above applicant meets both of the criteria above (diagnosis with disability and 12 months continuous homelessness or 4 or more episodes of homelessness in the past 3 years that cumulatively totals 12+ months) on his or her own.

Printed Name: _____ Title: _____

Signature: _____ Date: _____

Pasadena Partnership

Updated 2/11/16

Los Angeles & Orange County Homeless Management Information System (LA/OC HMIS)

Greater Los Angeles and Orange County
Interagency Data Sharing Consent Form

Client Name:_____

SSN/Client ID:_____

Date of Birth:_____

Name of Originating Organization:_____

Name of Organization with which to extend Client Data Sharing:

_____

Client Information to Share **(Client: please INITIAL all forms you want to share)**:

____Program Entry Required Questions
____Services Provided
____Case Notes
____Assessment (Client Profile)
____Savings Record
____Program Exit Information
____Group Meetings
____Any information as necessary

_____

Client Signature Date

Written Third Party Verification of Homeless Status

This document may be used by housing and service providers (such as emergency shelters, institutional care facilities, police officers, business owners, etc.) to document the housing status of a homeless applicant.

Applicant Name:

Applicant/Tenant Release Authorization:

I hereby authorize release to _____ the specific information requested below.
(name of organization)

Signature of Applicant: _____ Date: _____

Verifying Agency or Person:

Agency Name: _____ Contact Name: _____

Agency Address: _____ Telephone: _____

Facility Type:

This facility is classified as one of the following types of institutions:

- ☐ Emergency shelter
- ☐ Transitional housing
- ☐ Institutional care facility (e.g. a jail, substance abuse or mental health treatment facility, hospital, or other similar facility; stay must be less than 90 days)
- ☐ Other (describe): _____

Dates of Stay:

I certify that the applicant above resided at our facility for the following time period(s) of time within the last (3) years:

Location of Stay	Begin Date	End Date	Number of Days
Total Days			

Prior Residence:

I further certify that immediately prior to entering this facility the person named above was residing at/in:

_____

Verifying Agency/Person Certification

I certify that the timeline documented above is true and accurate.

Name: _____ Signature: _____

Title: _____ Date: _____

Observation of Homeless Status by Outreach Worker or Intake Staff

This document may be used by outreach workers to certify that the below named individual or household is currently homeless based on the check mark, other indicated information, and signature indicating their current living situation.

Applicant Name

Family Type

☐ Individual

☐ Family with an adult head of household (or if there is no adult in the family, a minor head of household), including a family whose composition has fluctuated while the head of household has been homeless

Number of persons in the household: _____

Living Situation

The person(s) named above is/are currently living in a public or private place not designed for, or ordinarily used as a regular sleeping accommodation, including a car, park, abandoned building, streets/sidewalks or bus station.

Description of current living situation: _____

_____

_____

_____

_____

Duration of Homelessness

The person(s) named has been observed living in the above living situation during the following time period:

_____

_____

_____

Outreach Worker Certification

I certify that the above applicant was observed as homeless and living in a place not designed for, or ordinarily used as a regular sleeping accommodation.

Name: _____ Signature: _____

Title: _____ Date: _____

Agency Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Oral Third Party Verification of Homeless Status

Applicant Name:

Applicant/Tenant Release Authorization:

I hereby authorize release to: _____ the specific information requested below.
(name of organization)

Signature of Applicant: _____ Date: _____

Oral Verification

Oral verification was made on _____ through a conversation with _____
(date) (relevant third-party representative)

Verification was provided:

☐ Over the phone ☐ In person

The following information was provided regarding the applicant's homeless status and victim status:

_____

_____

_____

_____

_____

Staff/Intake worker Observation Verification

I have observed the following conditions which serve as evidence related to the applicant's housing status, victim status and available resources. Due to the following factors I certify this applicant's eligibility for assistance.

_____

_____

_____

_____

_____

Efforts to Obtain Third Party Verification

I understand that obtaining written third party verification of eligibility or risk factors is the preferred method of certifying eligibility for an individual who is applying for assistance, but cannot meet this standard. I made the following efforts to obtain written third party verification:

_____

_____

_____

_____

Staff Certification

I understand that securing third party documentation is the preferred method of certifying homelessness or risk for homelessness for an individual who is applying for assistance, but cannot obtain source documents. Above, I am providing details of oral third party verification of eligibility or risk factors and certifying all statements to be true, accurate and complete.

Name: _____ Title/Position: _____

Staff Signature: _____ Date: _____

Self-Declaration of Homeless Status

When a written observation by an outreach worker or written referral by housing or service provider is not available, an applicant may submit this signed statement verifying his or her situation.

Applicant Information
Applicant Name: _____ Number of persons in household: _____
Family Type:
☐ Individual
☐ Family

Self-Declaration of Literally Homeless Status (Category 1) (Check only one)
☐ I am currently living in a place not meant for human habitation; or
☐ I am currently living in a privately operated shelter providing temporary living arrangements (including emergency shelters, transitional housing, and hotels and motels paid for by charitable organizations or by government programs); or
☐ I am currently living in an institution where I have resided for 90 days or less and resided in an emergency shelter or place not meant for human habitation before entering that institution

Housing History Summary (Current & Prior)
To certify duration of homelessness, please complete the table below, indicating time homeless (in a place not meant for human habitation such as living on the streets or a homeless emergency shelter) as well as any breaks in homelessness:

Location of Stay & Location Type (e.g. a car, shelter, etc.)	Begin Date	End Date	Number of Days
Total Days			

Self-Declaration of Imminent Risk of Homelessness Status (Category 2) (Check all)
I am at imminent risk of losing my primary nighttime residence homelessness and have all of the following circumstances:
☐ My residence will be lost within 14 days of the date of this notice; and
☐ No subsequent residence has been identified; and
☐ I (and my children) lack the resources or support networks needed to obtain permanent housing

Self-Declaration of Fleeing/Attempting to Flee Domestic Violence (Category 4) (Check all)
☐ I am fleeing, or attempting to flee, domestic violence (where the safety of the individual or family is not jeopardized this statement must be verified for non-victim service providers); and
☐ I have no other residence; and
☐ I lack the resources or support networks to obtain permanent housing

Additional Details
What else would you like to share about your housing history, victim status or available resources? For example, "*I cannot remember the name of the place where I was living during the fall of 2013 but I believe that it was an emergency shelter. I have problems with my memory from that time due to an illness.*"

_____
_____
_____

Applicant Certification
I certify that the above information is correct Applicant Signature: _____ Date: _____

Staff Certification
I understand that 3rd party verification is the preferred method of certifying homelessness for an individual or family who is applying for assistance and self-declaration is only permitted when I have attempted but cannot obtain such verification.
Documentation of attempts made for third-party verification:

_____
_____
_____

I certify that the above information is correct. Staff Signature: _____ Date: _____

Pasadena Partnership

Updated 3/16/16

Certification of Disability

Dear Physician / Qualified Health Personnel:

The applicant listed below has claimed eligibility for a federally funded housing program due to a disability. A professional licensed by the State of California to diagnose and treat the condition must certify the claim. For the purpose of this program, a disabled person is one who is diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability. This disability must be expected to be of a long-continued and indefinite duration, substantially impede his/her ability to live independently, and is of such a nature that the disability could improve under more suitable housing conditions. This disability may also be developmental.

To certify disability, please provide the information requested below.

Thank you for your prompt reply.

Applicant Name:

Applicant/Tenant Release Authorization:
I hereby authorize release to the City of Pasadena Housing Department the specific information requested below.

Signature of Applicant: _____ Date: _____

Certification of Disability:
In my opinion, as a professional licensed by the State of California to diagnose and treat such conditions the applicant as the following disability(s) (check all that apply):

- ☐ Substance use disorder
- ☐ Serious mental illness
- ☐ Developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002))
- ☐ Post-traumatic stress disorder
- ☐ Cognitive impairments resulting from brain injury
- ☐ Chronic physical illness or disability

Medical Certification by Professional:

Signature of Licensed Professional: _____ Print Name: _____

Professional Title: _____ Telephone: _____

License Number: _____ Name of Medical Group: _____

Address: _____ Date: _____

Pasadena Partnership

Updated 12/29/15

Written Third Party Verification of Income

This document is to certify the income received by the below named individual for purposes of participating in the ESG program. This information will be used only to determine the eligibility status and level of household benefit. Complete only the applicable section (employment income or payments and/or benefits).

Applicant Release:

I hereby authorize the release of the following employment or payment and/or benefit information.

Applicant Name: _____

Applicant Signature: _____ Date: _____

☐ **Employment Income**

The person(s) named above is/are currently living in a public or private place not designed for, or ordinarily used as a regular sleeping accommodation, including a car, park, abandoned building, streets/sidewalks or bus station.

The person named above is employed by _____ since _____. He/she is paid $_____ on a _____ basis and is currently working an average of _____ hours per _____.

Please specify any additional compensation: _____

Probability of continued employment: _____

Authorized Employer Representative Signature: _____ Date: _____

Name: _____ Title: _____

Address: _____ Phone: _____

☐ **Payment and/or Benefit Income**

Complete one form for each distinct source of income for each adult member of household and attach supporting evidence to this form in case file.

Type of Payment or Benefit:

☐ Social Security/SSI
☐ Public Assistance
☐ Alimony Payments
☐ Armed Forces Income
☐ Other (please specify): _____
☐ Pension/Retirement
☐ Unemployment Compensation
☐ Foster Care Payments
☐ TANF
☐ Workers Compensation
☐ Child Support Payments

Payments or benefits in the amount of $_____ are paid on a _____ basis. The expected duration of the payments or benefits is: _____.

Authorized Payment Source Representative Signature: _____ Date: _____

Name: _____ Title: _____

Address: _____ Phone: _____

Please return this form to:

Name: _____ Phone: _____

Title: _____ Fax: _____

Address: _____ Email: _____

Oral Third Party Verification of Income

Income (need name of employer, client name, pay amount and frequency, average hours worked per week, amount of any additional compensation)

Applicant Name

Third Party Verifier Information

Name: _____ Position/Title: _____

Agency Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Verification Type

☐ Over the phone ☐ In person

Income Information

Pay Amount _____ Pay frequency _____

Average hours worked per week _____ Amount of any additional compensation _____

Additional Details

Please provide any additional details discussed about the client's income.

_____

_____

Efforts to Obtain Third Party Verification

I understand that obtaining third party verification of eligibility or risk factors is the preferred method of certifying eligibility for an individual who is applying for assistance, but cannot meet this standard. I made the following efforts to obtain third party verification:

_____

_____

_____

Staff Certification

I understand that securing written third party documentation is the preferred method of certifying homelessness or risk for homelessness for an individual who is applying for assistance, but cannot obtain source documents. Above, I am providing details of oral third party verification of eligibility or risk factors and certifying all statements to be true, accurate and complete.

Name _____ Title/Position: _____

Staff Signature _____ Date: _____

Self-Declaration of Income

This is to certify the income status for the above named individual. Income includes but is not limited to:

- The full amount of gross income earned before taxes and deductions
- The net income earned from the operation of a business, i.e., total revenue minus business operating expenses. This includes any withdrawals of cash from the business or profession for your personal use.
- Monthly interest and dividend income credited to an applicant's bank account and available for use.
- The monthly payment amount received from Social Security, annuities, retirement funds, pensions, disability and other similar types of periodic payments.
- Any monthly payments in lieu of earnings, such as unemployment, disability compensation, SSI, SSDI, and worker's compensation.
- Monthly income from government agencies excluding amounts designated for shelter, utilities, WIC, food stamps, and childcare.
- Alimony, child support and foster care payments received from organizations or from persons not residing in the dwelling.
- All basic pay, special day and allowances of a member of the Armed Forces excluding special pay for exposure to hostile fire.

Staff Verification must be completed

Applicant Name:

_____

☐ **I certify, under penalty of perjury, that I currently receive the following income:**

Source: _____ Amount: _____ Frequency: _____
Source: _____ Amount: _____ Frequency: _____
Source: _____ Amount: _____ Frequency: _____

☐ **I certify, under penalty of perjury, that I do not have any income from any source at this time.**

Applicant Verification

I understand that the information on this form will be used to determine income eligibility. I do not possess acceptable verification of current annual income and request that this form serve as sufficient certification. I understand that false, misleading or incomplete information may result in the termination of assistance.

Applicant Signature: _____ Date: _____

Staff Verification

I understand that third-party verification is the preferred method of certifying income for assistance. I understand self declaration is only permitted when I have attempted to but cannot obtain third-party verification.

Documentation of attempt made for thid-party verification:

_____

_____

_____

Staff Signature: _____ Date: _____

[Appendix D: HQS Long Form]

Inspection Form

Housing Choice Voucher Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0169
(exp. 9/30/2012)

Public reporting burden for this collection of information is estimated to average 0. 25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Privacy Act Statement. The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of the name and address of both the family and the owner is mandatory. The information is used to determine if a unit meets the housing quality standards of the section 8 rental assistance program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family participation.

Assurances of confidentiality are not provided under this collection.
This collection of information is authorized under Section 8 of the U.S. Housing Act of l937 (42 U.S.C. 1437f). The information is used to determine if a unit meets the housing quality standards of the section 8 rental assistance program.

PHA	Tenant ID Number	Date of Request (mm/dd/yyyy)
Inspector	Date Last Inspection (mm/dd/yyyy)	Date of Inspection (mm/dd/yyyy)
Neighborhood/Census Tract	Type of Inspection ☐ Initial ☐ Special ☐ Reinspection	Project Number

A. General Information

Street Address of Inspected Unit

City	County	State	Zip

Name of Family	Current Telephone of Family

Current Street Address of Family

City	County	State	Zip

Number of Children in Family Under 6	

Name of Owner or Agent Authorized to Lease Unit Inspected	Telephone of Owner or Agent

Address of Owner or Agent

Housing Type (check as appropriate)

- ☐ Single Family Detached
- ☐ Duplex or Two Family Row
- ☐ House or Town House
- ☐ Low Rise: 3,4 Stories, Including Garden Apartment
- ☐ High Rise; 5 or More Stories
- ☐ Manufactured Home
- ☐ Congregate
- ☐ Cooperative
- ☐ Independent Group Residence
- ☐ Single Room Occupancy
- ☐ Shared Housing
- ☐ Other:(Specify)

B. Summary Decision on the Unit
(to be completed after the form has been filled in)

Housing Quality Standard Pass or Fail

☐ 1. **Fail** If there are any checks under the column headed "Fail" the **unit** fails the minimum housing quality standards. Discuss with the owner the repairs noted that would be necessary to bring the unit up to the standard.

☐ 2. **Inconclusive** If there are no checks under the column headed "Fail" and there are checks under the column headed "Inconclusive," obtain additional information necessary for a decision (question owner or tenant as indicated in the item instructions given in this checklist). Once additional information is obtained, change the rating for the item and record the date of verification at the far right of the form.

☐ 3. **Pass** If neither (1) nor (2) above is checked, the unit passes the minimum housing quality standards. Any additional conditions described in the right hand column of the form should serve to (a) establish the precondition of the unit, (b) indicate possible additional areas to negotiate with the owner, (c) aid in assessing the reasonableness of the rent of the unit, and (d) aid the tenant in deciding among possible units to be rented. The tenant is responsible for deciding whether he or she finds these conditions acceptable.

☐ **Unit Size:** Count the number of bedrooms for purposes of the FMR or Payment Standard. Record in the box provided.

☐ **Year Constructed:** Enter from Line 5 of the Request for Tenancy Approval form. Record in the box provided.

☐ **Number of Sleeping Rooms**: Count the number of rooms which could be used for sleeping, as identified on the checklist. Record in the box provided.

C. How to Fill Out This Checklist

Complete the checklist on the unit to be occupied (or currently occupied) by the tenant. Proceed through the inspection as follows:

Area	Checklist Category
room by room	1. Living Room
	2. Kitchen
	3. Bathroom
	4. All Other Rooms Used for Living
	5. All Secondary Rooms Not Used for Living
basement or utility room	6. Heating & Plumbing
outside	7. Building Exterior
overall	8. General Health & Safety

Each part of the checklist will be accompanied by an explanation of the item to be inspected.

Important: For each item numbered on the checklist, **check one box only** (e.g., check one box only for item 1.4 "Security "in the Living Room.)

In the space to the right of the description of the item, if the decision on the item is: "Fail" write what repairs are necessary; If "Inconclusive" write in details.

Also, if "Pass" but there are some conditions present that need to be brought to the attention of the owner or the tenant, write these in the space to the right.

If it is an annual inspection, record to the right of the form any repairs made since the last inspection. If possible, record reason for repair (e.g., ordinary maintenance, tenant damage).

If it is a complaint inspection, fill out only those checklist items for which complaint is lodged. Determine, if possible, tenant or owner cause.

Once the checklist has been completed, return to Part B (Summary Decision on the Unit).

Previous editions are obsolete

1. Living Room

1.1 Living Room Present

Note: If the unit is an efficiency apartment, consider the living room present.

1.2 Electricity

In order to qualify, the outlets must be present and properly installed in the baseboard, wall or floor of the room. Do not count a single duplex receptacle as two outlets, i.e., there must be **two** of these in the room, or **one** of these **plus a permanently installed ceiling or wall light fixture**.

Both the outlets and/or the light must be working. Usually, a room will have sufficient lights or electrical appliances plugged into outlets to determine workability. Be sure light fixture does not fail just because the bulb is burned out.

Do not count any of the following items or fixtures as outlets/fixtures: Table or floor lamps (these are **not** permanent light fixtures); ceiling lamps plugged into socket; extension cords.

If the electric service to the unit has been temporarily turned off check ''Inconclusive.'' Contact owner or manager after inspection to verify that electricity functions properly when service is turned on. Record this information on the checklist.

1.3 Electrical Hazards

Examples of what this means: broken wiring; non-insulated wiring; frayed wiring; improper types of wiring, connections or insulation; wires lying in or located near standing water or other unsafe places; light fixture hanging from electric wiring without other firm support or fixture; missing cover plates on switches or outlets; badly cracked outlets; exposed fuse box connections; overloaded circuits evidenced by frequently ''blown'' fuses (ask the tenant).

Check "Inconclusive'' if you are uncertain about severity of the problem and seek expert advice.

1. 4 Security

"Accessible to outside" means: doors open to the outside or to a common public hall; windows accessible from the outside (e.g. basement and first floor); windows or doors leading onto a fire escape, porch or other outside place that can be reached from the ground.

"Lockable" means: the window or door has a properly working lock, or is nailed shut, or the window is not designed to be opened. A storm window lock that is working properly is acceptable. Windows that are nailed shut are acceptable only if these windows are not needed for ventilation or as an alternate exit in case of fire.

1.5 Window Condition

Rate the windows in the room (including windows in doors).

"Severe deterioration" means that the window no longer has the capacity to keep out the wind and the rain or is a cutting hazard. Examples are: missing or broken-out panes; dangerously loose cracked panes; windows that will not close; windows that, when closed, do not form a reasonably tight seal.

If more than one window in the room is in this condition, give details in the space provided on the right of the form.

If there is only " moderate deterioration" of the windows the item should "Pass." "Moderate deterioration" means windows which are reasonably weather-tight, but show evidence of some aging, abuse, or lack of repair. Signs of deterioration are: minor crack in window pane; splintered sill; signs of some minor rotting in the window frame or the window itself; window panes loose because of missing window putty. Also for deteriorated and peeling paint see 1.9. If more than one window is in this condition, give details in the space provided on the right of the form.

1.6 Ceiling Condition

"Unsound or hazardous" means the presence of such serious defects that either a potential exists for structural collapse or that large cracks or holes allow significant drafts to enter the unit. The condition includes: severe bulging or buckling; large holes; missing parts; falling or in danger of falling loose surface materials (other than paper or paint).

Pass ceilings that are basically sound but haves some nonhazardous defects, including: small holes or cracks; missing or broken ceiling tiles; water stains; soiled surfaces; unpainted surfaces; peeling paint (for peeling paint see item 1.9).

1.7 Wall Condition

"Unsound or hazardous" includes: serious defects such that the structural safety of the building is threatened, such as severe buckling, bulging or leaning; damaged or loose structural members; large holes; air infiltration.

Pass walls that are basically sound but have some non hazardous defects, including: small or shallow holes; cracks; loose or missing parts; unpainted surfaces; peeling paint (for peeling paint see item 1.9).

1.8 Floor Condition

"Unsound or hazardous" means the presence of such serious defects that a potential exists for structural collapse or other threats to safety (e.g., stripping) or large cracks or holes allow substantial drafts from below the floor. The condition includes: severe buckling or major movements under walking stress; damaged or missing parts.

Pass floors that are basically sound but have some nonhazardous defects, including: heavily worn or damaged floor surface (for example, scratches or gouges in surface, missing portions of tile or linoleum, previous water damage). If there is a floor covering, also note the condition, especially if badly worn or soiled. If there is a floor covering, including paint or sealant, also note the conditions, specially if badly worn, soiled or peeling (for peeling paint, see 1.9).

1.9 Lead-Based Paint

Housing Choice Voucher Units If the unit was built January 1, 1978, or after, no child under age six will occupy or currently occupies it, is a 0-BR, elderly or handicapped unit with no children under age six on the lease or expected, has been certified lead-based paint free by a certified lead-based paint inspector (no lead-based paint present or no lead-based paint present after removal of lead-based paint.), check NA and do not inspect painted surfaces.

This requirement applies to all painted surfaces (building components) within the unit. (Do not include tenant belongings). Surfaces to receive a visual assessment for deteriorated paint include walls, floors, ceilings, built in cabinets (sink bases), baseboards, doors, door frames, windows systems including mullions, sills, or frames and any other painted building component within the unit. Deteriorated paint includes any painted surface that is peeling, chipping, chalking, cracking, damaged or otherwise separated from the substrate.

All deteriorated paint surfaces **more than 2 sq. ft. in any one interior room or space, or more than 10% of the total surface area of an interior type of component with a small surface area (i.e., window sills, baseboards, and trim)** must be stabilized (corrected) in accordance with all safe work practice requirements and clearance is required. **If the deteriorated painted surface is less than 2 sq. ft. or less than 10% of the component, only stabilization is required. Clearance testing is not required.** Stabilization means removal of deteriorated paint, repair of the substrate, and application of a new protective coating or paint. Lead-Based Paint Owner Certification is required following stabilization activities, except for *de minimis level* repairs.

1. Living Room

For each numbered item, check one box only.

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
1.1	**Living Room Present** Is there a living room?	☐	☐			
1.2	**Electricity** Are there at least two working outlets or one working outlet and one working light fixture?	☐	☐	☐		
1.3	**Electrical Hazards** Is the room free from electrical hazards?	☐	☐	☐		
1.4	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
1.5	**Window Condition** Is there at least one window, and are all windows free of signs of severe deterioration or missing or broken out panes?	☐	☐			
1.6	**Ceiling Condition** Is the ceiling sound and free from hazardous defects?	☐	☐			
1.7	**Wall Condition** Are the walls sound and free from hazardous defects?	☐	☐			
1.8	**Floor Condition** Is the floor sound and free from hazardous defects?	☐	☐			
1.9	**Lead-Based Paint** Are all painted surfaces free of deteriorated paint?	☐	☐			
	If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	☐	☐		☐ Not Applicable	

Additional Comments: (Give Item Number)

Comments continued on a separate page Yes ☐ No ☐

2. Kitchen

2.1 Kitchen Area Present

Note: A kitchen is an area used for preparation of meals. It may be either a separate room or an area of a larger room (for example, a kitchen area in an efficiency apartment).

2.2 - 2.9 Explanation for these items is the same as that provided for "Living Room'' with the following modifications:

2.2 Electricity

Note: The requirement is that at least one outlet and one permanent light fixture are present and working.

2.5 Window Condition

Note: The absence of a window does not fail this item in the kitchen. If there is no window, check "Pass."

2.10 Stove or Range with Oven

Both an oven and a stove (or range) with top burners must be present and working. If either Is missing and you know that the owner is responsible for supplying these appliances, check "Fail.'' Put check in ''Inconclusive'' column if the tenant is responsible for supplying the appliances and he or she has not yet moved in. Contact tenant or prospective tenant to gain verification that facility will be supplied and is in working condition. Hot plates are not acceptable substitutes for these facilities.

An oven is not working if it will not heat up. To be working a stove or range must have all burners working and knobs to turn them off and on. Under " working condition," also look for hazardous gas hook-ups evidenced by strong gas smells; these should fail. (Be sure that this condition is not confused with an unlit pilot light -a condition that should be noted, but does not fail.)

If both an oven and a stove or range are present, but the gas or electricity are turned off, check " Inconclusive." Contact owner or manager to get verification that facility works when gas is turned on. If both an oven and a stove or range are present and working, but defects exist, check "Pass" and note these to the right of the form. Possible defects are marked, dented, or scratched surfaces; cracked burner ring; limited size relative to family needs.

A microwave oven may be substituted for a tenant-supplied oven and stove (or range).

A microwave oven may be substituted for an owner-supplied oven and stove (or range) if the tenant agrees and microwave ovens are furnished instead of ovens and stoves (or ranges) to both subsidized and unsubsidized tenants in the building or premises.

2.11 Refrigerator

If no refrigerator is present, use the same criteria for marking either "Fail" or "Inconclusive" as were used for the oven and stove or range.

A refrigerator is not working if it will not maintain a temperature low enough to keep food from spoiling over a reasonable period of time. If the electricity is turned off, mark ''Inconclusive.'' Contact owner (or tenant if unit is occupied) to get verification of working condition. If the refrigerator is present and working but defects exist, note these to the right of the form. Possible minor defects include: broken or missing interior shelving; dented or scratched interior or exterior surfaces; minor deterioration of door seal; loose door handle.

2.12 Sink

If a permanently attached kitchen sink is not present in the kitchen or kitchen area, mark ''Fail.'' A sink in a bathroom or a portable basin will not satisfy this requirement. A sink is not working unless it has running hot and cold water from the faucets and a properly connected and properly working drain (with a "gas trap"). In a vacant apartment, the hot water may have been turned off and there will be no hot water. Mark this "Inconclusive." Check with owner or manager to verify that hot water is available when service is turned on.

If a working sink has defects, note this to the right of the item. Possible minor defects include: dripping faucet; marked, dented, or scratched surface; slow drain; missing or broken drain stopper.

2.13 Space for Storage, Preparation, and Serving of Food

Some space must be available for the storage, preparation, and serving of food. If there is no built-in space for food storage and preparation, a table used for food preparation and a portable storage cabinet will satisfy the requirement. If there is no built-in space, and no room for a table and portable cabinet, check "Inconclusive" and discuss with the tenant. The tenant makes the final determination as to whether or not this space is acceptable.

If there are some minor defects, check "Pass" and make notes to the right. Possible defects include: marked, dented, or scratched surfaces; broken shelving or cabinet doors; broken drawers or cabinet hardware; limited size relative to family needs.

2. Kitchen

For each numbered item, check one box only.

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
2.1	**Kitchen Area Present** Is there a kitchen?	☐	☐			
2.2	**Electricity** Are there at least one working outlet and one working, permanently installed light fixture?	☐	☐	☐		
2.3	**Electrical Hazards** Is the kitchen free from electrical hazards?	☐	☐	☐		
2.4	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
2.5	**Window Condition** Are all windows free of signs of deterioration or missing or broken out panes?	☐	☐			
2.6	**Ceiling Condition** Is the ceiling sound and free from hazardous defects?	☐	☐			
2.7	**Wall Condition** Are the walls sound and free from hazardous defects?	☐	☐			
2.8	**Floor Condition** Is the floor sound and free from hazardous defects?	☐	☐			
2.9	**Lead-Based Paint** Are all painted surfaces free of deteriorated paint?	☐	☐			
	If no, does deteriorated surfaces exceed two square feet and/or less than 10% of a component?	☐	☐		☐ Not Applicable	
2.10	**Stove or Range with Oven** Is there a working oven, and a stove (or range) with top burners that work?	☐	☐	☐		
	If no oven and stove (or range) are present, is there a microwave oven and, if microwave is owner-supplied, do other tenants have microwaves instead of an oven and stove (or range)?	☐	☐	☐		
2.11	**Refrigerator** Is there a refrigerator that works and maintains a temperature low enough so that food does not spoil over a reasonable period of time?	☐	☐	☐		
2.12	**Sink** Is there a kitchen sink that works with hot and cold running water?	☐	☐	☐		
2.13	**Space for Storage, Preparation, and Serving of Food** Is there space to store, prepare, and serve food?	☐	☐	☐		

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

3. Bathroom

3.1 Bathroom Present

Most units have easily identifiable bathrooms (i.e., a separate room with toilet, washbasin and tub or shower). In some cases, however, you will encounter units with scattered bathroom facilities (i.e., toilet. washbasin and tub or shower located in separate parts of the unit). At a minimum, there must be an enclosure around the toilet. In this case, count the enclosure around the toilet as the bathroom and proceed with 3.2-3.9 below, with respect to this enclosure. If there is more than one bathroom that is normally used, rate the one that is in best condition for Part 3. If there is a second bathroom that is also used, complete Part 4 of the checklist for this room. (See Inspection Manual for additional notes on rating the second bathroom.)

3.2 - 3.9 Explanation for these items is the same as that provided for "Living Room'' with the following modifications:

3.2 Electricity

Note: The requirement is that at least one permanent light fixture is present and working

3.3 Electrical Hazards

Note: In addition to the previously mentioned hazards, outlets that are located where water might splash or collect are considered an electrical hazard.

3.5 Window Condition

Note: The absence of a window does not fail this item in the bathroom (see item 3.13, Ventilation, for relevance of window with respect to ventilation). If there is no window, but a working vent system is present, check "Pass."

3.7 Wall Condition

Note: Include under nonhazardous defects (that would pass, but should be noted) the following: broken or loose tile; deteriorated grouting at tub/wall and tub/floor joints, or tiled surfaces; water stains.

3.8 Floor Condition

Note: Include under nonhazardous defects (that would pass, but should be noted) the following: missing floor tiles; water stains.

3.10 Flush Toilet in Enclosed Room in Unit

The toilet must be contained within the unit, be in proper operating condition, and be available for the exclusive use of the occupants of the unit (i.e., outhouses or facilities shared by occupants of other units are not acceptable). It must allow for privacy.

Not working means: the toilet is not connected to a water supply; it is not connected to a sewer drain; it is clogged; it does not have a trap; the connections, vents or traps are faulty to the extent that severe leakage of water or escape of gases occurs; the flushing mechanism does not function properly. If the water to the unit has been turned off, check " Inconclusive.'' Obtain verification from owner or manager that facility works properly when water is turned on.

Comment to the right of the form if the toilet is "present, exclusive, and working," but has the following types of defects: constant running; chipped or broken porcelain; slow draining.

If drain blockage is more serious and occurs further in the sewer line, causing backup, check item 7.6, "Fail," under the plumbing and heating part of the checklist. A sign of serious sewer blockage is the presence of numerous backed-up drains.

3.11 Fixed Wash Basin or Lavatory in Unit

The wash basin must be permanently installed (i.e., a portable wash basin does not satisfy the requirement). Also, a kitchen sink used to pass the requirements under Part 2 of the checklist (kitchen facilities) cannot also serve as the bathroom wash basin. The wash basin may be located separate from the other bathroom facilities (e.g., in a hallway).

Not working means: the wash basin is not connected to a system that will deliver hot and cold running water; it is not connected to a properly operating drain; the connectors (or vents or traps) are faulty to the extent that severe leakage of water or escape of sewer gases occurs. If the water to the unit or the hot water unit has been turned off, check "Inconclusive." Obtain verification from owner or manager that the system is in working condition.

Comment to the right of the form if the wash basin is "present and working," but has the following types of minor defects: insufficient water pressure; dripping faucets; minor leaks; cracked or chipped porcelain; slow drain (see discussion above under 3.10).

3.12 Tub or Shower in Unit

Not present means that neither a tub nor shower is present in the unit. Again, these facilities need not be in the same room with the rest of the bathroom facilities. They must, however, be private.

Not working covers the same requirements detailed above for wash basin (3.11).

Comment to the right of the form if the tub or shower is present and working, but has the following types of defects: dripping faucet; minor leaks; cracked porcelain; slow drain (see discussion under 3.10); absent or broken support rod for shower curtain.

3.13 Ventilation

Working vent systems include: ventilation shafts (non -mechanical vents) and electric fans. Electric vent fans must function when switch is turned on. (Make sure that any malfunctions are not due to the fan not being plugged in.) If electric current to the unit has not been turned on (and there is no operable window), check "Inconclusive." Obtain verification from owner or manager that system works. Note: exhaust vents must be vented to the outside, attic, or crawlspace.

3. Bathroom

For each numbered item, check one box only.

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
3.1	**Bathroom Present** (See description) Is there a bathroom?	☐	☐			
3.2	**Electricity** Is there at least one permanently installed light fixture?	☐	☐	☐		
3.3	**Electrical Hazards** Is the bathroom free from electrical hazards?	☐	☐	☐		
3.4	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
3.5	**Window Condition** Are all windows free of signs of deterioration or missing or broken out panes?	☐	☐			
3.6	**Ceiling Condition** Is the ceiling sound and free from hazardous defects?	☐	☐			
3.7	**Wall Condition** Are the walls sound and free from hazardous defects?	☐	☐			
3.8	**Floor Condition** Is the floor sound and free from hazardous defects?	☐	☐			
3.9	**Lead-Based Paint** Are all painted surfaces free of deteriorated paint?	☐	☐			
	If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	☐	☐		☐ Not Applicable	
3.10	**Flush Toilet in Enclosed Room in Unit** Is there a working toilet in the unit for the exclusive private use of the tenant?	☐	☐	☐		
3.11	**Fixed Wash Basin or Lavatory in Unit** Is there a working, permanently installed wash basin with hot and cold running water in the unit?	☐	☐	☐		
3.12	**Tub or Shower** Is there a working tub or shower with hot and cold running water in the unit?	☐	☐	☐		
3.13	**Ventilation** Are there operable windows or a working vent system?	☐	☐	☐		

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

4. Other Room Used for Living and Halls

Complete an " Other Room" checklist for as many " other rooms used for living" as are present in the unit and not already noted in Parts I, 2, and 3 of the checklist. See the discussion below for definition of ''used for living.'' Also complete an ''Other Room" checklist for all entrance halls, corridors, and staircases that are located within the unit and are part of the area used for living. If a hall, entry and/or stairway are contiguous, rate them as a whole (i.e., as part of one space).

Additional forms for rating "Other Rooms" are provided in the check-list.

Definition of "used for living." Rooms "used for living" are areas of the unit that are walked through or lived in on a regular basis. Do not include rooms or other areas that have been permanently, or near permanently, closed off or areas that are infrequently entered. For example, do not include a utility room, attached shed, attached closed-in porch, basement, or garage if they are closed off from the main living area or are infrequently entered. Do include any of these areas if they are frequently used (e.g., a finished basement/play-room, a closed-in porch that is used as a bedroom during summer months). Occasional use of a washer or dryer in an otherwise unused room does not constitute regular use.

If the unit is vacant and you do not know the eventual use of a particular room, complete an ''Other Room'' checklist if there is any chance that the room will be used on a regular basis. If there is no chance that the room will be used on a regular basis, do not include it (e.g., an unfinished basement) since it will be checked under Part 5, All Secondary Rooms (Rooms not used for living).

4.1 Room Code and Room Location

Enter the appropriate room code given below:

Room Codes:

1 = Bedroom or any other room used for sleeping (regardless of type of room)

2 = Dining Room or Dining Area

3 = Second Living Room, Family Room, Den, Playroom, TV Room

4 = Entrance Halls, Corridors, Halls, Staircases

5 = Additional Bathroom (also check presence of sink trap and clogged toilet)

6 = Other

Room Location: Write on the line provided the location of the room with respect to the unit's width, length and floor level as if you were standing outside the unit facing the entrance to the unit:

right/left/center: record whether the room is situated to the right, left, or center of the unit.

front/rear/center: record whether the room is situated to the back, front or center of the unit.

floor level: identify the floor level on which the room is located.

If the unit is vacant, you may have some difficulty predicting the eventual use of a room. Before giving any room a code of 1 (bedroom), the room must meet all of the requirements for a ''room used for sleeping'' (see items 4. 2 and 4.5).

4.2 - 4.9 Explanations of these items are the same as those provided for "Living Room" with the following modifications:

4.2 Electricity/Illumination

If the room code is not a "1," the room must have a means of natural or artificial illumination such as a permanent light fixture, wall outlet present, or light from a window in the room or near the room. If any required item is missing, check "Fail." If the electricity is turned off, check "Inconclusive."

4.5 Window Condition

Any room used for sleeping must have at least one window. If the windows in sleeping rooms are designed to be opened, at least one window must be operable. The minimum standards do not require a window in "other rooms." Therefore, if there is no window in another room not used for sleeping, check "Pass," and note "no window" in the area for comments.

4.6 Smoke Detectors

At least one battery-operated or hard-wired smoke detector must be present and working on each level of the unit, including the basement, but not the crawl spaces and unfinished attic.

Smoke detectors must be installed in accordance with and meet the requirements of the National Fire Protection Association Standard (NFPA) 74 (or its successor standards).

If the dwelling unit is occupied by any hearing-impaired person, smoke detectors must have an alarm system designed for hearing-impaired persons as specified in NFPA 74 (or successor standards).

If the unit was under HAP contract prior to April 24, 1993, owners who installed battery-operated or hard-wired smoke detectors in compliance with HUD's smoke detector requirements, including the regulations published on July 30, 1992 (57 FR 33846), will not be required subsequently to comply with any additional requirements mandated by NFPA 74 (i.e. the owner would not be required to install a smoke detector in a basement not used for living purposes, nor would the owner be required to change the location of the smoke detectors that have already been installed on the other floors of the unit). In this case, check "Pass" and note under comments.

Additional Notes

For staircases, the adequacy of light and condition of the stair rails and railings is covered under Part 8 of the checklist (General Health and Safety)

4. Other Rooms Used for Living and Halls

For each numbered item, check one box only.

4.1 Room Location

_____ right/left/center: the room is situated to the right, left, or center of the unit.

_____ front/rear/center: the room is situated to the back, front or center of the unit.

_____ floor level: the floor level on which the room is located.

Room Code ☐

1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)
2 = Dining Room or Dining Area
3 = Second Living Room, Family Room, Den, Playroom, TV Room
4 = Entrance Halls, Corridors, Halls, Staircases
5 = Additional Bathroom (also check presence of sink trap and clogged toilet)
6 = Other:

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
4.2	**Electricity/Illumination** If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture? If Room Code is not a 1, is there a means of illumination?	☐ ☐	☐ ☐	☐ ☐		
4.3	**Electrical Hazards** Is the room free from electrical hazards?	☐	☐	☐		
4.4	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
4.5	**Window Condition** If Room Code is a 1, is there at least one window? And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	☐ ☐	☐ ☐			
4.6	**Ceiling Condition** Is the ceiling sound and free from hazardous defects?	☐	☐			
4.7	**Wall Condition** Are the walls sound and free from hazardous defects?	☐	☐			
4.8	**Floor Condition** Is the floor sound and free from hazardous defects?	☐	☐			
4.9	**Lead-Based Paint** Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	☐ ☐	☐ ☐		☐ Not Applicable	
4.10	**Smoke Detectors** Is there a working smoke detector on each level? Do the smoke detectors meet the requirements of NFPA 74? In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	☐ ☐ ☐	☐ ☐ ☐			

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

4. Supplemental for Other Rooms Used for Living and Halls

For each numbered item, check one box only.

4.1 Room Location

_____ right/left/center: the room is situated to the right, left, or center of the unit.

_____ front/rear/center: the room is situated to the back, front or center of the unit.

_____ floor level: the floor level on which the room is located.

Room Code ☐

1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)
2 = Dining Room or Dining Area
3 = Second Living Room, Family Room, Den, Playroom, TV Room
4 = Entrance Halls, Corridors, Halls, Staircases
5 = Additional Bathroom (also check presence of sink trap and clogged toilet)
6 = Other:

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
4.2	**Electricity/Illumination** If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture? If Room Code is not a 1, is there a means of illumination?	☐ ☐	☐ ☐	☐ ☐		
4.3	**Electrical Hazards** Is the room free from electrical hazards?	☐	☐	☐		
4.4	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
4.5	**Window Condition** If Room Code is a 1, is there at least one window? And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	☐ ☐	☐ ☐			
4.6	**Ceiling Condition** Is the ceiling sound and free from hazardous defects?	☐	☐			
4.7	**Wall Condition** Are the walls sound and free from hazardous defects?	☐	☐			
4.8	**Floor Condition** Is the floor sound and free from hazardous defects?	☐	☐			
4.9	**Lead-Based Paint** Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	☐ ☐	☐ ☐		☐ Not Applicable	
4.10	**Smoke Detectors** Is there a working smoke detector on each level? Do the smoke detectors meet the requirements of NFPA 74? In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	☐ ☐ ☐	☐ ☐ ☐			

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

4. Supplemental for Other Rooms Used for Living and Halls

For each numbered item, check one box only.

4.1 Room Location

_____ right/left/center: the room is situated to the right, left, or center of the unit.

_____ front/rear/center: the room is situated to the back, front or center of the unit.

_____ floor level: the floor level on which the room is located.

Room Code ☐

1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)
2 = Dining Room or Dining Area
3 = Second Living Room, Family Room, Den, Playroom, TV Room
4 = Entrance Halls, Corridors, Halls, Staircases
5 = Additional Bathroom (also check presence of sink trap and clogged toilet)
6 = Other:

Item No. Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
4.2 Electricity/Illumination If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture?	☐	☐	☐		
If Room Code is not a 1, is there a means of illumination?	☐	☐	☐		
4.3 Electrical Hazards Is the room free from electrical hazards?	☐	☐	☐		
4.4 Security Are all windows and doors that are accessible from the outside lockable?	☐	☐			
4.5 Window Condition If Room Code is a 1, is there at least one window?	☐	☐			
And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	☐	☐			
4.6 Ceiling Condition Is the ceiling sound and free from hazardous defects?	☐	☐			
4.7 Wall Condition Are the walls sound and free from hazardous defects?	☐	☐			
4.8 Floor Condition Is the floor sound and free from hazardous defects?	☐	☐			
4.9 Lead-Based Paint Are all painted surfaces free of deteriorated paint?	☐	☐			
If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	☐	☐		☐ Not Applicable	
4.10 Smoke Detectors Is there a working smoke detector on each level?	☐	☐			
Do the smoke detectors meet the requirements of NFPA 74?	☐	☐			
In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	☐	☐			

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

4. Supplemental for Other Rooms Used for Living and Halls

For each numbered item, check one box only.

4.1 Room Location

_____ right/left/center: the room is situated to the right, left, or center of the unit.

_____ front/rear/center: the room is situated to the back, front or center of the unit.

_____ floor level: the floor level on which the room is located.

Room Code ☐

1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room)
2 = Dining Room or Dining Area
3 = Second Living Room, Family Room, Den, Playroom, TV Room
4 = Entrance Halls, Corridors, Halls, Staircases
5 = Additional Bathroom (also check presence of sink trap and clogged toilet)
6 = Other:

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
4.2	**Electricity/Illumination** If Room Code is a 1, are there at least two working outlets or one working outlet and one working, permanently installed light fixture? If Room Code is not a 1, is there a means of illumination?	☐ ☐	☐ ☐	☐ ☐		
4.3	**Electrical Hazards** Is the room free from electrical hazards?	☐	☐	☐		
4.4	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
4.5	**Window Condition** If Room Code is a 1, is there at least one window? And, regardless of Room Code, are all windows free of signs of severe deterioration or missing or broken-out panes?	☐ ☐	☐ ☐			
4.6	**Ceiling Condition** Is the ceiling sound and free from hazardous defects?	☐	☐			
4.7	**Wall Condition** Are the walls sound and free from hazardous defects?	☐	☐			
4.8	**Floor Condition** Is the floor sound and free from hazardous defects?	☐	☐			
4.9	**Lead-Based Paint** Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed two square feet and/or more than 10% of a component?	☐ ☐	☐ ☐		☐ Not Applicable	
4.10	**Smoke Detectors** Is there a working smoke detector on each level? Do the smoke detectors meet the requirements of NFPA 74? In units occupied by the hearing impaired, is there an alarm system connected to the smoke detector?	☐ ☐ ☐	☐ ☐ ☐			

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

5. All Secondary Rooms (Rooms not used for living)

5. Secondary Rooms (Rooms not used for living)

If any room in the unit did not meet the requirements for "other room used for living" in Part 4, it is to be considered a "secondary room (not used for living)," Rate all of these rooms together (i.e., a single Part 5 checklist for all secondary rooms in the unit).

Inspection is required of the following two items since hazardous defects under these items could jeopardize the rest of the unit, even if present in rooms not used for living: 5. 2 Security, 5. 3 Electrical Hazards. Also, be observant of any other potentially hazardous features in these rooms and record under 5.4

5.1 None

If there are no "Secondary Rooms (rooms not used for living)," check "None" and go on to Part 6.

5.2 - 5.4 Explanations of these items is the same as those provided for ''Living Room''

Additional Note

In recording "other potentially hazardous features," note (in the space provided) the means of access to the room with the hazard and check the box under ''Inconclusive." Discuss the hazard with the HA inspection supervisor to determine ''Pass'' or ''Fail.'' Include defects like: large holes in floor, walls or ceilings; evidence of structural collapse; windows in condition of severe deterioration; and deteriorated paint surfaces.

6. Building Exterior

6.1 Condition of Foundation

''Unsound or hazardous'' means foundations with severe structural defects indicating the potential for structural collapse; or foundations that allow significant entry of ground water (for example, evidenced by flooding of basement).

6.2 Condition of Stairs, Rails, and Porches

"Unsound or hazardous" means: stairs, porches, balconies, or decks with severe structural defects; broken, rotting, or missing steps; absence of a handrail when there are extended lengths of steps (generally four or more consecutive steps); absence of or insecure railings around a porch or balcony which is approximately 30 inches or more above the ground.

6.3 Condition of Roof and Gutters

"Unsound and hazardous" means: The roof has serious defects such as serious buckling or sagging, indicating the potential of structural collapse; large holes or other defects that would result in significant air or water infiltration (in most cases severe exterior defects will be reflected in equally serious surface defects within the unit, e.g., buckling, water damage). The gutters, downspouts and soffits (area under tee eaves) shows serious decay and have allowed the entry of significant air or water into the interior of the structure. Gutters and downspouts are, however, not required to pass. If the roof is not observable and there is no sign of interior water damage, check "Pass."

6.4 Condition of Exterior Surfaces

See definition above for roof, item 6.3.

6.5 Condition of Chimney

The chimney should not be seriously leaning or showing evidence of significant disintegration (i.e., many missing bricks).

6.6 Lead-Based Paint: Exterior Surfaces

Housing Choice Voucher Units If the unit was built January 1, 1978 or after, no child under age six will occupy or currently occupies, is a 0-BR, elderly or handicapped unit with no children under age six on the lease or expected, has been certified lead-based paint free by a certified lead-based paint inspector (no lead-based paint present or no lead -based paint present after removal of lead), check NA and do not inspect painted surfaces . Visual assessment for deteriorated paint applies to all exterior painted surfaces (building components) associated with the assisted unit including windows, window sills, exterior walls, floors, porches, railings, doors, decks, stairs, play areas, garages, fences or other areas if frequented by children under age six.

All deteriorated paint surfaces **more than 20 sq. ft. on exterior surfaces** must be stabilized (corrected) in accordance with all safe work practice requirements. **If the painted surface is less than 20 sq. ft., only stabilization is required. Clearance testing is not required.** Stabilization means removal of deteriorated paint, repair of the substrate, and application of a new protective coating or paint. Lead-Based Paint Owner Certification is required following stabilization activities except for *de minimis level* repairs.

6.7 Manufactured Homes: Tie Downs

Manufactured homes must be placed on a site in a stable manner and be free from hazards such as sliding and wind damage. Manufactured homes must be securely anchored by a tie down device which distributes and transfers the loads imposed by the unit to appropriate ground anchors so as to resist wind overturning and sliding, unless a variation has been approved by the HUD Field Office.

5. All Secondary Rooms (Rooms not used for living)

For each numbered item, check one box only.

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
5.1	**None** ☐ **Go to Part 6**					
5.2	**Security** Are all windows and doors that are accessible from the outside lockable?	☐	☐			
5.3	**Electrical Hazards** Are all these rooms free from electrical hazards?	☐	☐	☐		
5.4	**Other Potentially Hazardous Features** Are all of these rooms free of any other potentially hazardous features? For each room with an "other potentially hazardous feature," explain the hazard and the means of control of interior access to the room.	☐	☐	☐		
6.0	**Building Exterior**					
6.1	**Condition of Foundation** Is the foundation sound and free from hazards?	☐	☐			
6.2	**Condition of Stairs, Rails, and Porches** Are all the exterior stairs, rails, and porches sound and free from hazards?	☐	☐			
6.3	**Condition of Roof and Gutters** Are the roof, gutters, and downspouts sound and free from hazards?	☐	☐			
6.4	**Condition of Exterior Surfaces** Are exterior surfaces sound and free from hazards?	☐	☐			
6.5	**Condition of Chimney** Is the chimney sound and free from hazards?	☐	☐			
6.6	**Lead-Based Paint: Exterior Surfaces** Are all painted surfaces free of deteriorated paint? If no, does deteriorated surfaces exceed 20 sq. ft. of total exterior surface area?	☐ ☐	☐ ☐		☐ Not Applicable	
6.7	**Manufactured Homes: Tie Downs** If the unit is a manufactured home, is it properly placed and tied down? If not a manufactured home, check "Not Applicable."	☐ ☐	☐ ☐		☐ Not Applicable	

Additional Comments: (Give Item Number)(Use an additional page if necessary)

Comments continued on a separate page Yes ☐ No ☐

7. Heating and Plumbing

7.1 Adequacy of Heating Equipment

"Adequate heat" means that the heating system is capable of delivering enough heat to assure a healthy environment in the unit (appropriate to the climate). The HA is responsible for defining what constitutes a healthy living environment in the area of the country in which it operates. Local codes (city or state codes) should be instructive in arriving at a reasonable local definition. For example, for heat adequacy, local codes often require that the unit's heating facility be capable of maintaining a given temperature level during a designated time period. Portable electric room heaters or kitchen stoves or ranges with a built-in heat unit are not acceptable as a primary source of heat for units located in areas where climate conditions require regular heating.

"Directly or indirectly to all rooms used for living" means:

> "Directly" means that each room used for living has a heat source (e.g., working radiator; working hot air register; baseboard heat)
>
> ''indirectly'' means that, if there is no heat source present in the room, heat can enter the room easily from a heated adjacent room (e.g a dining room may not have a radiator, but would receive heat from the heated living room through a large open archway).

If the heating system in the unit works, but there is some question whether a room without a heat source would receive adequate indirect heat, check "Inconclusive" and verify adequacy from tenant or owner (e.g., unheated bedroom at the end of a long hallway).

How to determine the capability of the heating system: If the unit is occupied, usually the quickest way to determine the capability of the heating system over time is to question the tenant. If the unit is not occupied, or the tenant has not lived in the unit during the months when heat would be needed, check "Inclusive." It will be necessary to question the owner on this point after the inspection has been completed and, if possible, to question other tenants (if it is a multi-unit structure) about the adequacy of heat provided. Under some circumstances, the adequacy of heat can be determined by a simple comparison of the size of the heating system to the area to be heated. For example, a small permanently installed space heater in a living room is probably inadequate for heating anything larger than a relatively small apartment.

7.2 Safety of Heating Equipment

Examples of "unvented fuel burning space heaters" are: portable kerosene units; unvented open flame portable units.

''Other unsafe conditions'' include: breakage or damage to heating system such that there is a potential for fire or other threats to safety; improper connection of flues allowing exhaust gases to enter the living area; improper installation of equipment (e.g., proximity of fuel tank to heat source, absence of safety devices); indications of improper use of equipment (e.g., evidence of heavy build-up of soot, creosote, or other substance in the chimney); disintegrating equipment; combustible materials near heat source or flue. See Inspection Manual for a more detailed discussion of the inspection of safety aspects of the heating systems.

If you are unable to gain access to the primary heating system in the unit check ' 'Inconclusive." Contact the owner or manager for verification of safety of the system. If the system has passed a recent local inspection, check ' 'Pass." This apppies especially to units in which heat is provided by a large scale, complex central heating system that serves multiple units (e.g., a boiler in the basement of a large apartment building). In most cases, a large scale heating system for a multi-unit building will be subject to periodic safety inspections by a local public agency. Check with the owner or manager to determine the date and outcome of the last such inspection, or look for an inspection certificate posted on the heating system.

7.3 Ventilation and Adequacy of Cooling

If the tenant is present and has occupied the unit during the summer months, inquire about the adequacy of air flow. If the tenant is not present or has not occupied the unit during the summer months, test a sample of windows to see that they open (see Inspection Manual for instruction).

"Working cooling equipment'' includes: central (fan) ventilation system; evaporative cooling system; room or central air conditioning.

Check " Inconclusive" if there are no operable windows and it is impossible, or inappropriate, to test whether a cooling system works. Check with other tenants in the building (in a multi-unit structure) and with the owner or manager for verification of the adequacy of ventilation and cooling.

7.4 Water Heater

"Location presents hazard'' means that the gas or oil water heater is located in living areas or closets where safety hazards may exist (e.g., water heater located in very cluttered closet with cloth and paper items stacked against it). Gas water heaters in bedrooms or other living areas must have safety dividers or shields.

Water heaters must have a temperature- pressure relief valve and discharge line (directed toward the floor or outside of the living area) as a safeguard against build up of steam if the water heater malfunctions. If not, they are not properly equipped and shall fail.

To pass, gas or oil fired water heaters must be vented into a properly installed chimney or flue leading outside. Electric water heaters do not require venting.

If it is impossible to view the water heater, check "Inconclusive." Obtain verification of safety of system from owner or manager.

Check "Pass" if the water heater has passed a local inspection. This applies primarily to hot water that is supplied by a large scale complex water heating system that serves multiple units (e.g., water heating system in large apartment building). Check in the same manner described for heating system safety, item 7.2, above.

7.5 Water Supply

If the structure is connected to a city or town water system, check ''Pass." If the structure has a private water supply (usually in rural areas) inquire into the nature of the supply (probably from the owner) and whether it is approvable by an appropriate public agency.

General note: If items 7.5, 7.6, or 7,7 are checked "Inconclusive," check with owner or manager for verification of adequacy.

7.6 Plumbing

"Major leaks" means that main water drain and feed pipes (often located in the basement) are seriously leaking. (Leaks present at specific facilities have already been evaluated under the checklist items for "Bathroom" and "Kitchen.")

"Corrosion" (causing serious and persistent levels of rust or contamination in the drinking water) can be determined by observing the color of the drinking water at ssveral taps. Badly corroded pipes will produce noticeably brownish water. If the tenant is currently occupying the unit, he or she should be able to provide information about the persistence of this condition. (Make sure that the "rusty water" is not a temporary condition caused by city or town maintenance of main water lines.) See general note under 7.5.

7.7 Sewer Connection

If the structure is connected to the city or town sewer system, check "Pass." If the structure has its own private disposal system (e.g., septic field), inquire into the nature of the system and determine whether this type of system can meet appropriate health and safety regulations.

The following conditions constitute "evidence of sewer back up": strong sewer gas smell in the basement or outside of unit; numerous clogged or very slow drains; marshy areas outside of unit above septic field. See general note under 7.5.

7. Heating and Plumbing

For each numbered item, check one box only.

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
7.1	**Adequacy of Heating Equipment** Is the heating equipment capable of providing adequate heat (either directly or indirectly) to all rooms used for living?	☐	☐	☐		
7.2	**Safety of Heating Equipment** Is the unit free from unvented fuel burning space heaters or any other types of unsafe heating conditions?	☐	☐	☐		
7.3	**Ventilation and Adequacy of Cooling** Does the unit have adequate ventilation and cooling by means of openable windows or a working cooling system?	☐	☐	☐		
7.4	**Water Heater** Is the water heater located, equipped, and installed in a safe manner?	☐	☐	☐		
7.5	**Water Supply** Is the unit served by an approvable public or private sanitary water supply?	☐	☐	☐		
7.6	**Plumbing** Is plumbing free from major leaks or corrosion that causes serious and persistent levels of rust or contamination of the drinking water?	☐	☐	☐		
7.7	**Sewer Connection** Is plumbing connected to an approvable public or private disposal system, and is it free from sewer back-up?	☐	☐	☐		

Additional Comments: (Give Item Number)

Comments continued on a separate page Yes ☐ No ☐

8. General Health and Safety

8.1 Access to Unit

"Through another unit" means that access to the unit Is only possible by means of passage through another dwelling unit.

8.2 Exits

"Acceptable fire exit" means that the building must have an alternative means of exit that meets local or State regulations in case of fire; this could include:

An openable window if the unit is on the first floor or second floor or easily accessible to the ground.

A back door opening on to a porch with a stairway leading to the ground.

Fire escape, fire ladder, or fire stairs.

"Blocked" means that the exit is not useable due to conditions such as debris, storage, door or window nailed shut, broken lock.

Important note: The HA has the final responsibility for deciding whether the type of emergency exit is acceptable, although the tenant should assist in making the decision.

8.3 Evidence of Infestation

"Presence of rats, or severe infestation by mice or vermin" (such as roaches) is evidenced by: rat holes; droppings; rat runs; numerous settings of rat poison. If the unit is occupied, ask the tenant,

8.4 Garbage and Debris

"Heavy accumulation" means large piles of trash and garbage, discarded furniture, and other debris (not temporarily stored awaiting removal) that might harbor rodents, This may occur inside the unit, in common areas, or outside. It usually means a level of accumulation beyond the capacity of an individual to pick up within an hour or two.

8.5 Refuse Disposal

"Adequate covered facilities" includes: trash cans with covers, garbage chutes, "dumpsters" (i.e., large scale refuse boxes with lids); trash bags (if approvable by local public agency). "Approvable by local public agency" means that the local Health and Sanitation Department (city, town or county) approves the type of facility in use. Note: During the period when the HA is setting up its inspection program, it will check with the local health and sanitation department to determine which types of facilities are acceptable and include this in the inspection requirements.

If the unit is vacant and there are no adequate covered facilities present, check " Inconclusive." Contact the owner or manager for verification of facilities provided when the unit is occupied.

8.6 Interior Stairs and Common Halls

''Loose, broken, or missing steps'' should fail if they present a serious risk of tripping or falling.

A handrail is required on extended sections of stairs (generally four or more consecutive steps). A railing is required on unprotected heights such as around stairwells.

"Other hazards" would be conditions such as bare electrical wires and tripping hazards.

Housing Choice Voucher Units If the unit was built January 1, 1978, or after, no child under six will occupy or currently occupies it, is a 0-BR, elderly or handicapped unit with no children under six on the lease or expected, has been certified lead-based paint free by a certified lead-based paint inspector (no lead-based paint present or no lead-based paint present after removal of lead-based paint.), check NA and do not inspect painted surfaces.

This requirement applies to all painted surfaces (building components) within the unit. (Do not include tenant belongings).

Surfaces to receive a visual assessment for deteriorated paint include walls, floors, ceilings, built in cabinets (sink bases), baseboards, doors, door frames, windows systems including mullions, sills, or frames and any other painted building component within the unit. Deteriorated paint includes any painted surface that is peeling, chipping, chalking, cracking, damaged or otherwise separated from the substrate.

All deteriorated paint surfaces **more than 2 sq. ft. in any one interior room or space, or more than 10% of the total surface area of an interior type of component with a small surface area (i.e., window sills, baseboards, and trim)** must be stabilized (corrected) in accordance with all safe work practice requirements and clearance is required. **If the deteriorated painted surface is less than 2 sq. ft. or less than 10% of the component, only stabilization is required. Clearance testing is not required.** Stabilization means removal of deteriorated paint, repair of the substrate, and application of a new protective coating or paint. Lead-Based Paint Owner Certification is required following stabilization activities, except for *de minimis level* repairs.

8.7 Other Interior Hazards

Examples of other hazards might be: a broken bathroom fixture with a sharp edge in a location where it represents a hazard; a protruding nail in a doorway.

8.8 Elevators

Note: At the time the HA is setting up its inspection program, it will determine local licensing practices for elevators. Inspectors should then be aware of these practices in evaluating this item (e.g., check inspection date). If no elevator check "Not Applicable."

8.9 Interior Air Quality

If the inspector has any questions about whether an existing poor air quality condition should be considered dangerous, he or she should check with the local Health and Safety Department (city, town or county).

8.10 Site and Neighborhood Conditions

Examples of conditions that would "seriously and continuously endanger the health or safety of the residents" are:

other buildings on, or near the property, that pose serious hazards (e.g., dilapidated shed or garage with potential for structural collapse),

evidence of flooding or major drainage problems,

evidence of mud slides or large land settlement or collapse,

proximity to open sewage,

unprotected heights (cliffs, quarries, mines, sandpits),

fire hazards,

abnormal air pollution or smoke which continues throughout the year and is determined to seriously endanger health, and continuous or excessive vibration of vehicular traffic (if the unit is occupied, ask the tenant).

8.11 Lead-Based Paint: Owner Certification

If the owner is required to correct any lead- based paint hazards at the property including deteriorated paint or other hazards identi-fied by a visual assessor, a certified lead-based paint risk asses-sor, or certified lead -based paint inspector, the PHA must obtain certification that the work has been done in accordance with all applicable requirements of 24 CFR Part 35. The Lead -Based Paint Owner Certification must be received by the PHA before the execution of the HAP contract or within the time period stated by the PHA in the owner HQS violation notice. Receipt of the completed and signed Lead-Based Paint Owner Certification signifies that all HQS lead-based paint requirements have been met and no re-inspection by the HQS inspector is required.

8. General Health and Safety

For each numbered item, check one box only.

Item No.	Description	Decision: Yes, Pass	Decision: No, Fail	Decision: Inconclusive	If Fail, what repairs are necessary? If Inconclusive, give details. If Pass with comments, give details.	If Fail or Inconclusive, date (mm/dd/yyyy) of final approval
8.1	**Access to Unit** Can the unit be entered without having to go through another unit?	☐	☐			
8.2	**Exits** Is there an acceptable fire exit from this building that is not blocked?	☐	☐			
8.3	**Evidence of Infestation** Is the unit free from rats or severe infestation by mice or vermin?	☐	☐			
8.4	**Garbage and Debris** Is the unit free from heavy accumulation of garbage or debris inside and outside?	☐	☐			
8.5	**Refuse Disposal** Are there adequate covered facilities for temporary storage and disposal of food wastes, and are they approvable by a local agency?	☐	☐	☐		
8.6	**Interior Stairs and Common Halls** Are interior stairs and common halls free from hazards to the occupant because of loose, broken, or missing steps on stairways; absent or insecure railings; inadequate lighting; or other hazards?	☐	☐	☐		
8.7	**Other Interior Hazards** Is the interior of the unit free from any other hazard not specifically identified previously?	☐	☐			
8.8	**Elevators** Where local practice requires, do all elevators have a current inspection certificate? If local practice does not require this, are they working and safe?	☐	☐	☐	☐ Not Applicable	
8.9	**Interior Air Quality** Is the unit free from abnormally high levels of air pollution from vehicular exhaust, sewer gas, fuel gas, dust, or other pollutants?	☐	☐			
8.10	**Site and Neighborhood Conditions** Are the site and immediate neighborhood free from conditions which would seriously and continuously endanger the health or safety of the residents?	☐	☐			
8.11	**Lead-Based Paint: Owner Certification** If the owner of the unit is required to correct any deteriorated paint or lead-based paint hazards at the property, has the Lead-Based Paint Owner's Certification been completed, and received by the PHA? If the owner was not required to correct any deteriorated paint or lead-based paint hazards, check NA.	☐	☐		☐ Not Applicable	

Additional Comments: (Give Item Number)

Comments continued on a separate page Yes ☐ No ☐

[Appendix E: HQS Short Form]

Inspection Checklist

Housing Choice Voucher Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0169
(Exp. 9/30/2010)

Public reporting burden for this collection of information is estimated to average 0.50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

This collection of information is authorized under Section 8 of the U.S. Housing Act of l937 (42 U.S.C. 1437f). The information is used to determine if a unit meets the housing quality standards of the section 8 rental assistance program.

Name of Family	Tenant ID Number	Date of Request (mm/dd/yyyy)
Inspector	**Neighborhood/Census Tract**	**Date of Inspection (mm/dd/yyyy)**

Type of Inspection	Date of Last Inspection (mm/dd/yyyy)	PHA
☐ Initial ☐ Special ☐ Reinspection		

A. General Information

Inspected Unit **Year Constructed (yyyy)**

Full Address (including Street, City, County, State, Zip)

Number of Children in Family Under 6

Owner

Name of Owner or Agent Authorized to Lease Unit Inspected | Phone Number

Address of Owner or Agent

Housing Type (check as appropriate)

- ☐ Single Family Detached
- ☐ Duplex or Two Family
- ☐ Row House or Town House
- ☐ Low Rise: 3, 4 Stories, IncludingGarden Apartment
- ☐ High Rise; 5 or More Stories
- ☐ Manufactured Home
- ☐ Congregate
- ☐ Cooperative
- ☐ Independent Group Residence
- ☐ Single Room Occupancy
- ☐ Shared Housing
- ☐ Other

B. Summary Decision On Unit (To be completed after form has been filled out)

☐ Pass ☐ Fail ☐ Inconclusive	Number of Bedrooms for Purposes of the FMR or Payment Standard	Number of Sleeping Rooms	

Inspection Checklist

Item No.	1. Living Room	Yes Pass	No Fail	In-Conc.	Comment	Final Approval Date (mm/dd/yyyy)
1.1	Living Room Present					
1.2	Electricity					
1.3	Electrical Hazards					
1.4	Security					
1.5	Window Condition					
1.6	Ceiling Condition					
1.7	Wall Condition					
1.8	Floor Condition					

Clear All Form Fields

* Room Codes: 1 = Bedroom or Any Other Room Used for Sleeping (regardless of type of room); 2 = Dining Room or Dining Area; 3 = Second Living Room, Family Room, Den, Playroom, TV Room; 4 = Entrance Halls, Corridors, Halls, Staircases; 5 = Additional Bathroom; 6 = Other

Item No.	1. Living Room (Continued)	Yes Pass	No Fail	In-Conc.	Comment	Final Approval Date (mm/dd/yyyy)
1.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
	2. Kitchen					
2.1	Kitchen Area Present					
2.2	Electricity					
2.3	Electrical Hazards					
2.4	Security					
2.5	Window Condition					
2.6	Ceiling Condition					
2.7	Wall Condition					
2.8	Floor Condition					
2.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
2.10	Stove or Range with Oven					
2.11	Refrigerator					
2.12	Sink					
2.13	Space for Storage, Preparation, and Serving of Food					
	3. Bathroom					
3.1	Bathroom Present					
3.2	Electricity					
3.3	Electrical Hazards					
3.4	Security					
3.5	Window Condition					
3.6	Ceiling Condition					
3.7	Wall Condition					
3.8	Floor Condition					
3.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
3.10	Flush Toilet in Enclosed Room in Unit					
3.11	Fixed Wash Basin or Lavatory in Unit					
3.12	Tub or Shower in Unit					
3.13	Ventilation					

Item No.	4. Other Rooms Used For Living and Halls	Yes Pass	No Fail	In-Conc.	Comment	Final Approval Date (mm/dd/yyyy)
4.1	Room Code* and Room Location ☐	(Circle One) Right/Center/Left			(Circle One) ont/Center/Rear ____Floor Level	
4.2	Electricity/Illumination					
4.3	Electrical Hazards					
4.4	Security					
4.5	Window Condition					
4.6	Ceiling Condition					
4.7	Wall Condition					
4.8	Floor Condition					
4.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
4.10	Smoke Detectors					
4.1	Room Code* and Room Location ☐	(Circle One) Right/Center/L			(Circle One) Front/Center/Rear ____Floor Level	
4.2	Electricity/Illumination					
4.3	Electrical Hazards					
4.4	Security					
4.5	Window Condition					
4.6	Ceiling Condition					
4.7	Wall Condition					
4.8	Floor Condition					
4.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
4.10	Smoke Detectors					
4.1	Room Code* and Room Location ☐	(Circle One) Right/Center/Left			(Circle One) Front/Center/Rear ____Floor Level	
4.2	Electricity/Illumination					
4.3	Electrical Hazards					
4.4	Security					
4.5	Window Condition					
4.6	Ceiling Condition					
4.7	Wall Condition					
4.8	Floor Condition					
4.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
4.10	Smoke Detectors					

Item No.	4. Other Rooms Used For Living and Halls	Yes Pass	No Fail	In-Conc.	Comment	Final Approval Date (mm/dd/yyyy)
4.1	Room Code* and Room Location ☐	(Circle One) Right/Center/Left			(Circle One) Front/Center/Rear ____Floor Level	
4.2	Electricity/Illumination					
4.3	Electrical Hazards					
4.4	Security					
4.5	Window Condition					
4.6	Ceiling Condition					
4.7	Wall Condition					
4.8	Floor Condition					
4.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
4.10	Smoke Detectors					
4.1	Room Code* and Room Location ☐	(Circle One) Right/Center/Left			(Circle One) Front/Center/Rear ____Floor Level	
4.2	Electricity/Illumination					
4.3	Electrical Hazards					
4.4	Security					
4.5	Window Condition					
4.6	Ceiling Condition					
4.7	Wall Condition					
4.8	Floor Condition					
4.9	Lead-Based Paint Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed two square feet per room and/or is more than 10% of a component?					
4.10	Smoke Detectors					
	5. All Secondary Rooms (Rooms not used for living)					
5.1	None Go to Part 6					
5.2	Security					
5.3	Electrical Hazards					
5.4	Other Potentially Hazardous Features in these Rooms					

Item No.	6. Building Exterior	Yes Pass	No Fail	In-Conc.	Comment	Final Approval Date (mm/dd/yyyy)
6.1	Condition of Foundation					
6.2	Condition of Stairs, Rails, and Porches					
6.3	Condition of Roof/Gutters					
6.4	Condition of Exterior Surfaces					
6.5	Condition of Chimney					
6.6	Lead Paint: Exterior Surfaces Are all painted surfaces free of deteriorated paint?				☐ Not Applicable	
	If not, do deteriorated surfaces exceed 20 square feet of total exterior surface area?					
6.7	Manufactured Home: Tie Downs					
	7. Heating and Plumbing					
7.1	Adequacy of Heating Equipment					
7.2	Safety of Heating Equipment					
7.3	Ventilation/Cooling					
7.4	Water Heater					
7.5	Approvable Water Supply					
7.6	Plumbing					
7.7	Sewer Connection					
	8. General Health and Safety					
8.1	Access to Unit					
8.2	Fire Exits					
8.3	Evidence of Infestation					
8.4	Garbage and Debris					
8.5	Refuse Disposal					
8.6	Interior Stairs and Commom Halls					
8.7	Other Interior Hazards					
8.8	Elevators					
8.9	Interior Air Quality					
8.10	Site and Neighborhood Conditions					
8.11	Lead-Based Paint: Owner's Certification				☐ Not Applicable	

If the owner is required to correct any lead-based paint hazards at the property including deteriorated paint or other hazards identified by a visual assessor, a certified lead-based paint risk assessor, or certified lead-based paint inspector, the PHA must obtain certification that the work has been done in accordance with all applicable requirements of 24 CFR Part 35. The Lead-Based Paint Owner Certification must be received by the PHA before the execution of the HAP contract or within the time period stated by the PHA in the owner HQS violation notice. Receipt of the completed and signed Lead-Based Paint Owner Certification signifies that all HQS lead-based paint requirements have been met and no re-inspection by the HQS inspector is required.

C. Special Amenities (Optional)

This Section is for optional use of the HA. It is designed to collect additional information about other positive features of the unit that may be present. Although the features listed below are not included in the Housing Quality Standards, the tenant and HA may wish to take them into consideration in decisions about renting the unit and the reasonableness of the rent.
Check/list any positive features found in relation to the unit.

1. Living Room

- ☐ High quality floors or wall coverings
- ☐ Working fireplace or stove
- ☐ Balcony, patio, deck, porch
- ☐ Special windows or doors
- ☐ Exceptional size relative to needs of family
- ☐ Other: (Specify)

2. Kitchen

- ☐ Dishwasher
- ☐ Separate freezer
- ☐ Garbage disposal
- ☐ Eating counter/breakfast nook
- ☐ Pantry or abundant shelving or cabinets
- ☐ Double oven/self cleaning oven, microwave
- ☐ Double sink
- ☐ High quality cabinets
- ☐ Abundant counter-top space
- ☐ Modern appliance(s)
- ☐ Exceptional size relative to needs of family
- ☐ Other: (Specify)

3. Other Rooms Used for Living

- ☐ High quality floors or wall coverings
- ☐ Working fireplace or stove
- ☐ Balcony, patio, deck, porch
- ☐ Special windows or doors
- ☐ Exceptional size relative to needs of family
- ☐ Other: (Specify)

4. Bath

- ☐ Special feature shower head
- ☐ Built-in heat lamp
- ☐ Large mirrors
- ☐ Glass door on shower/tub
- ☐ Separate dressing room
- ☐ Double sink or special lavatory
- ☐ Exceptional size relative to needs of family
- ☐ Other: (Specify)

5. Overall Characteristics

- ☐ Storm windows and doors
- ☐ Other forms of weatherization (e.g., insulation, weather stripping)
- ☐ Screen doors or windows
- ☐ Good upkeep of grounds (i.e., site cleanliness, landscaping, condition of lawn)
- ☐ Garage or parking facilities
- ☐ Driveway
- ☐ Large yard
- ☐ Good maintenance of building exterior
- ☐ Other: (Specify)

6. Disabled Accessibility

Unit is accessible to a particular disability. ☐ Yes ☐ No

Disability _____

D. Questions to ask the Tenant (Optional)

1. Does the owner make repairs when asked? Yes ☐ No ☐
2. How many people live there? _____
3. How much money do you pay to the owner/agent for rent? $ _____
4. Do you pay for anything else? (specify) _____
5. Who owns the range and refrigerator? (insert O = Owner or T = Tenant) Range _____ Refrigerator _____ Microwave _____
6. Is there anything else you want to tell us? (specify) Yes ☐ No ☐

E. Inspection Summary/Comments (Optional)

Provide a summary description of each item which resulted in a rating of "Fail" or "Pass with Comments."

Tenant ID Number	Inspector	Date of Inspection (mm/dd/yyyy)	Address of Inspected Unit

Type of Inspection Initial ☐ Special ☐ Reinspection ☐

Item Number	Reason for "Fail" or "Pass with Comments" Rating

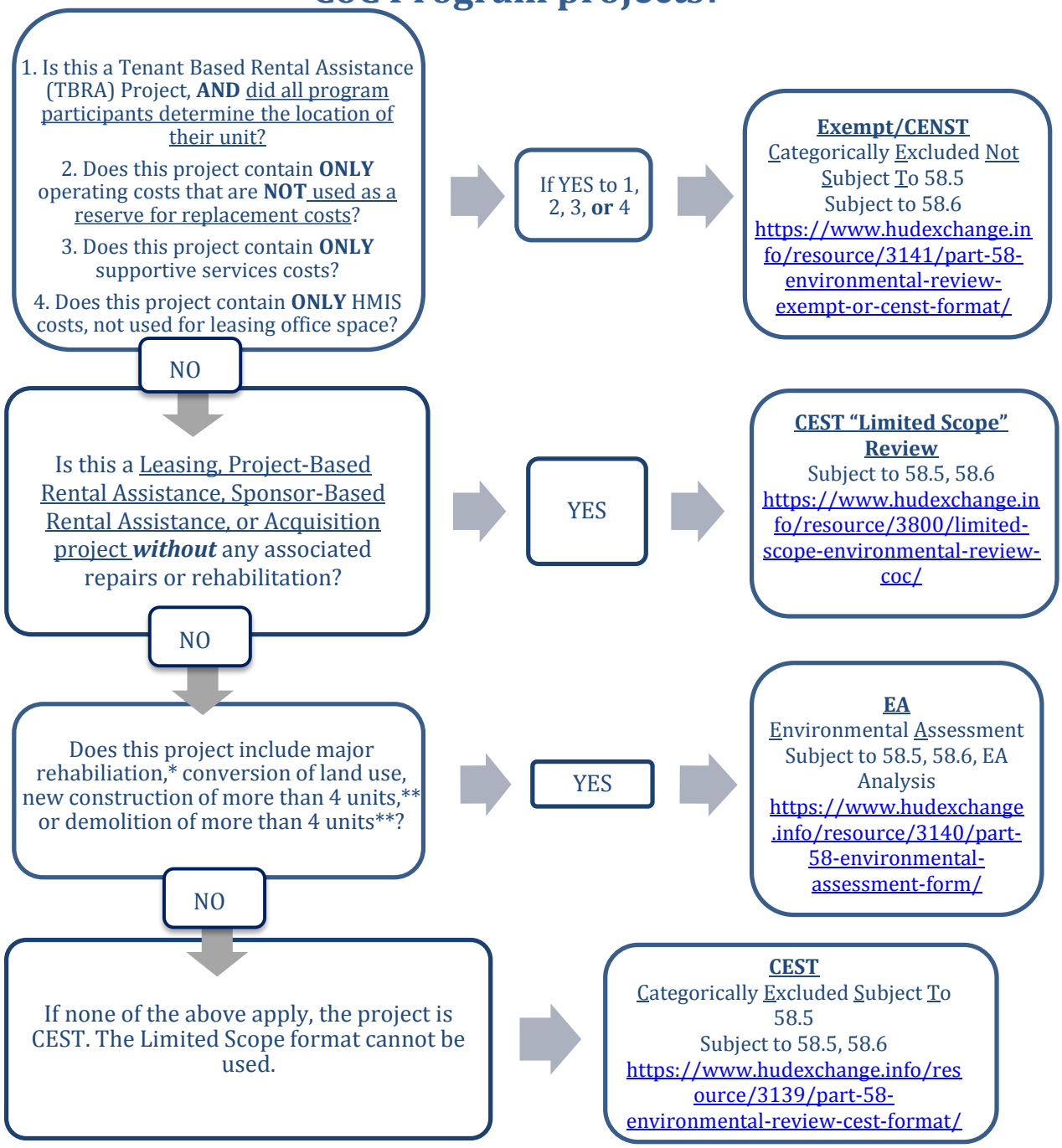
Continued on additional page ☐ Yes ☐ No

Previous editions are obsolete

form **HUD-52580** (3/2001)
ref Handbook 7420.8

[Appendix F: Environmental Review Flowchart]

What level of Environmental Review is needed for CoC Program projects?



This document applies ONLY to CoC Program projects.

For more information on determining level of review, consult 24 CFR 58.

*For purposes of determining level of review, "major rehabilitation" is rehabilitation that does not conform to the limitations listed in 24 CFR 58.35(a)(3).

Select "yes**" if new construction or demolition falls outside the definition of an "individual action" in 24 CFR 58.35(a)(4). If proposed construction or demolition conforms to the requirements in that section, select "**no**."

FY2016 - Performance Measurement Module (Sys PM)

Summary Report for CA-607 - Pasadena CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	735	721	63	75	12	51	66	15
1.2 Persons in ES, SH, and TH	889	861	88	92	4	63	72	9

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	696	-	701	-	-	169	-
1.2 Persons in ES, SH, and TH	-	840	-	651	-	-	181	-

FY2016 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	0	0		0		0		0	
Exit was from ES	113	6	5%	6	5%	12	11%	24	21%
Exit was from TH	111	2	2%	4	4%	5	5%	11	10%
Exit was from SH	0	0		0		0		0	
Exit was from PH	59	0	0%	1	2%	1	2%	2	3%
TOTAL Returns to Homelessness	283	8	3%	11	4%	18	6%	37	13%

FY2016 - Performance Measurement Module (Sys PM)

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	632	530	-102
Emergency Shelter Total	83	100	17
Safe Haven Total	0	0	0
Transitional Housing Total	107	78	-29
Total Sheltered Count	190	178	-12
Unsheltered Count	442	352	-90

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	889	869	-20
Emergency Shelter Total	753	729	-24
Safe Haven Total	0	0	0
Transitional Housing Total	208	176	-32

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults (system stayers)	104	118	14
Number of adults with increased earned income	11	11	0
Percentage of adults who increased earned income	11%	9%	-2%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults (system stayers)	104	118	14
Number of adults with increased non-employment cash income	28	35	7
Percentage of adults who increased non-employment cash income	27%	30%	3%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults (system stayers)	104	118	14
Number of adults with increased total income	35	42	7
Percentage of adults who increased total income	34%	36%	2%

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	43	30	-13
Number of adults who exited with increased earned income	13	2	-11
Percentage of adults who increased earned income	30%	7%	-23%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	43	30	-13
Number of adults who exited with increased non-employment cash income	5	9	4
Percentage of adults who increased non-employment cash income	12%	30%	18%

FY2016 - Performance Measurement Module (Sys PM)

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	43	30	-13
Number of adults who exited with increased total income	15	11	-4
Percentage of adults who increased total income	35%	37%	2%

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	785	746	-39
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	145	107	-38
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	640	639	-1

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	875	828	-47
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	166	134	-32
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	709	694	-15

FY2016 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in 2016.

FY2016 - Performance Measurement Module (Sys PM)

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2015	Current FY	Difference
Universe: Persons who exit Street Outreach	6	12	6
Of persons above, those who exited to temporary & some institutional destinations	0	1	1
Of the persons above, those who exited to permanent housing destinations	5	11	6
% Successful exits	83%	100%	17%

Metric 7b.1 – Change in exits to permanent housing destinations

	Submitted FY 2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	757	713	-44
Of the persons above, those who exited to permanent housing destinations	212	159	-53
% Successful exits	28%	22%	-6%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	351	392	41
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	337	380	43
% Successful exits/retention	96%	97%	1%

FY2016 - SysPM Data Quality

CA-607 - Pasadena CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	90	94	94	68	128	131	101	84	189	227	269	307				4				
2. Number of HMIS Beds	90	90	90	62	97	100	54	84	184	214	246	307				4				
3. HMIS Participation Rate from HIC (%)	100.00	95.74	95.74	91.18	75.78	76.34	53.47	100.00	97.35	94.27	91.45	100.00				100.00				
4. Unduplicated Persons Served (HMIS)	716	574	213	681	176	150	88	79	120	134	151	200	416	422	538	701	291	246	73	176
5. Total Leavers (HMIS)	676	535	176	637	96	100	47	37	16	11	17	19	320	316	393	534	290	222	63	171
6. Destination of Don't Know, Refused, or Missing (HMIS)	446	402	32	489	0	9	0	0	0	0	1	3	5	8	17	19	1	2	2	19
7. Destination Error Rate (%)	65.98	75.14	18.18	76.77	0.00	9.00	0.00	0.00	0.00	0.00	5.88	15.79	1.56	2.53	4.33	3.56	0.34	0.90	3.17	11.11