

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2022 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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. Coordination and Engagement–Inclusive Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or	
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	No
5.	Disability Service Organizations	Yes	Yes	No
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
7.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
8.	Hospital(s)	Yes	Yes	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
10.	Law Enforcement	Yes	No	Yes
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	Yes
14.	Local Jail(s)	Yes	No	No
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes

17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
18.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
19.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
23.	State Domestic Violence Coalition	No	No	No
24.	State Sexual Assault Coalition	No	No	No
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	Yes	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	No
30.	Other Victim Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	No
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
Other: (limit 50 characters)				
34.	Veteran Organizations	Yes	Yes	Yes
35.	Faith-Based Organizations	Yes	Yes	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.B.1.a.(2)	

	Describe in the field below how your CoC:
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 characters)

1. Membership is officially solicited annually at a minimum & proactive recruitment is conducted throughout the year to ensure diverse stakeholder participation. The CoC has a transparent, open-ended invitation process that is communicated in our Governance. Charter & via our website, emails, public meetings, & funding solicitations. Staff attend community events/meetings to provide information about the CoC, how to get involved & re-engage agencies w/ low attendance. CoC staff, Board & current members are encouraged to connect w/ their networks & communicate membership opportunities. Staff further identify attendance gaps in essential sectors and reach out w/ personalized invitations to encourage CoC involvement.

2. The CoC makes appropriate accommodations to meet individual needs as requested, such as making available accessible electronic documents (i.e. PDFs) and recordings on the CoC website & in alternative formats. The CoC utilizes the WAVE Web Accessibility Evaluation Tool to ensure web content is accessible, including alternative text for images, form labels & large font. The CoC consults with the City's Accessibility Coordinator who regularly provides guidance to ensure effective communication with people with disabilities via web and document accessibility (i.e. accessibility of remote meetings, multimedia synchronization accessibility).

3. The CoC is currently revising our homelessness plan which will inform funding, policy decisions & service provision. Organizations serving culturally specific communities experiencing homelessness, including BIPOC, Latinx/Spanish-speaking, DV survivors, disability advocate groups & LGBTQ+ populations were invited to participate in a community survey to provide feedback, including identifying opportunities to improve equity and ensure people receive equitable access to services and housing. The CoC engaged in targeted/robust outreach to ensure diversity of responses. Encouragingly, 62% of the survey respondents identified as BIPOC. Organizations serving people of color also recruited participants for two separate focus groups specifically for BIPOC and Spanish-speaking communities with lived experience of homelessness. The CoC also regularly engages with a Lived Experience Advisory Panel, which includes representatives from culturally specific communities, to provide feedback on CoC policies & procedures that directly impact equity, including CES prioritization and matching.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section VII.B.1.a.(3)	
	Describe in the field below how your CoC:	
	1. solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;	
	2. communicated information during public meetings or other forums your CoC uses to solicit public information; and	
	3. took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

(limit 2,500 characters)

1. The CoC undertook a robust community engagement process to inform our updated homelessness plan & solicited opinions from a broad array of orgs, including:
 - 8 focus groups (chronically homeless, families, youth, older adults, BIPOC, Latinx/Spanish speakers, DV survivors, veterans) inclusive of 57 people w/ lived experience
 - 7 listening sessions with service providers, the CoC Board/committees (faith community & healthcare), & City commissions (Human Services, BIPOC groups)
 - 9 targeted interviews with regional & system partners (LA CoC, education, healthcare, criminal justice, foster care, DPSS)
 - A community survey (216 responses received) focusing on system gaps & opportunities for improvement.

Intentional outreach ensured that feedback from underrepresented groups, (i.e. BIPOC & LGBTQ+ advocates) was included. Staff, providers & advocates also attended meetings to gather opinions outside the CoC, including multidisciplinary workgroups.

2. The CoC utilized its website to publicly communicate meeting dates/times, which are also announced via email using general membership & targeted listservs. Recipients are encouraged to share these invites within their networks as meetings are open to the public. Meetings consist of regular requests for input on CoC policies & priorities, PIT count planning, funding opportunities, & population-specific best practices. Public listening sessions with stakeholders solicited feedback on the CoC's strengths, opportunities, desired aspirations & results. CoC staff attended/presented at public meetings, including City Council & various committees/commissions & received meaningful public comment. The CoC also utilized City social media accounts (Facebook, Twitter, Instagram) to solicit public information.

3. CoC & other public meetings are critical platforms to gather input & provide opportunities for cross-system collaboration. Input is recorded by CoC staff & used to inform system-level priorities, policy recommendations, & resource allocation decisions. The CoC utilized preliminary feedback from the DV lived experience focus group to revise questions included in the CoC's DV Bonus funding application, including how barriers to accessing services would be reduced. The CoC also utilized a community survey to gather input from over 200 stakeholders focusing on strategies to advance equity in the provision of homeless services. These responses will be used to inform the CoC's finalized homelessness plan.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section VII.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	

3.	about how your CoC would determine which project applications it would submit to HUD for funding; and
4.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,500 characters)

1. The CoC considers project applications from all qualified organizations & gives no preference to previously CoC-funded agencies. The CoC sent targeted emails to leadership at 28 non-CoC-funded regional service providers encouraging them to apply, including DV & LGBTQ+ orgs. The Request For Applications (RFA) was widely advertised using a dedicated page on the CoC's website & high-traffic social media channels (FB, Instagram & Twitter). TA was provided to ensure adequate support & accessibility for new agencies. 2 organizations that have not received CoC funding submitted applications.

2. The CoC announced via email & online postings on 8/5 that our local competition would open on 8/8 & began accepting new applications on 8/12. Renewal projects were required to submit their intent to renew by 7/20 & applications were due 8/23. The CoC hosted a mandatory workshop on 8/10 to review the renewal application & submission process. The CoC undertook an open RFA for new projects w/ submissions due online by 8/31. The CoC hosted an optional workshop on 8/16 describing the application submission process/timeline. Agencies interested in submitting applications were required to complete an Intent to Apply form by 8/19. Links to the renewal & new application materials, workshop recordings, evaluation criteria/ranking tools, & other resources were available on the CoC's website. All applicants were directed to submit their applications via an online portal on the CoC's website.

3. The evaluation procedures & project review/selection process (which determines applications that will be submitted for funding) were publicly available & outlined in the RFA packet/workshop recordings. Applications that met threshold requirements were reviewed & scored by a non-conflicted evaluation panel using the scoring tools posted on the CoC's website & reviewed in the workshop. Projects were assigned a score based on agency experience, project design & service delivery, financial efficiency & management, & ability to enhance system performance. The panel recommended the highest scoring applications to the CoC Board for approval/inclusion in the CoC app.

4. Accessible electronic PDFs of the RFA & workshop recordings were posted on the CoC's website to ensure effective communication w/ people w/ disabilities. The CoC utilizes the WAVE Web Accessibility Evaluation Tool to ensure content is accessible. Staff was also available to make appropriate reasonable accommodations.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section VII.B.1.b.	
	In the chart below:	
1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	No
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.	Public Health Department and Healthcare Organizations	Yes
-----	---	-----

1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

	Describe in the field below how your CoC:
1.	consulted with ESG Program recipients in planning and allocating ESG and ESG-CV funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions within your CoC's geographic area so it could be addressed in Consolidated Plan update.

(limit 2,500 characters)

1. CoC staff are responsible for the management, planning & allocation of Pasadena ESG/ESG-CV funds. CoC staff regularly participate in phone/zoom meetings to strategize how to best maximize funds to fill gaps/meet service needs & integrate ESG funding w/ other funds the CoC manages, including CoC & state sources. The CoC refers to federal, state & local data/reports on the landscape of homelessness & current/emerging evidence-based best practices, which inform the planning process & determine which services should be prioritized for funding. The CoC also reviews data from local & private agencies on outstanding/emerging needs to inform funding allocation decisions. The CoC Board votes to finalize funding recommendations for annual ESG dollars.

2. CoC staff work directly w/ ESG subrecipients to establish outcome metrics for all projects based on System Performance Measures (SPM) goals, regularly review data quality & evaluate performance. Staff routinely meet w/ ESG and ESG-CV funded agencies to provide technical assistance & data support to ensure programs are high performing. The CoC evaluates & reports on ESG/ESG-CV-funded project-level outcomes & compiles/submits data for the CAPER & quarterly ESG-CV reports. All providers are expected to implement programs that comply w/ the CoC's ESG written standards.

3. The CoC provides PIT, HIC, CES, & SPM data regarding the nature & extent of homelessness & current availability of services/resources to the Pasadena Housing Department for incorporation in the Five-Year Con Plan & Annual Action Plans, which are publicly available on the Housing Department website.

4. The Pasadena Housing Department is responsible for the Consolidated Plan as the ESG/CDBG entitlement jurisdiction administrator & acting collaborative applicant. The CoC & ESG Entitlement Jurisdiction geography overlap 100%, thus staff responsible for CoC planning are also responsible for ESG/ESG-CV planning/administration & coordinate w/ CDBG staff to ensure the Con Plan fully represents & addresses the needs of people experiencing homelessness. CoC staff write portions of the Con Plan & provide data for updates.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	
	Funded providers must comply w/ ES, PSH & RRH Written Standards which prohibit denying admission/separating families due to self-reported gender.	Yes

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section VII.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

The CoC has a formal MOU w/ Pasadena Unified School District's (PUSD) Office of Families in Transition (FIT), which establishes a working relationship to support collaborations & programs that serve families w/ school-aged children experiencing homelessness in accordance w/ the McKinney-Vento Act. The CoC also received written letters of support from FIT for the creation of homelessness prevention programs that provide financial assistance, eviction prevention & case management services. FIT participates in CoC meetings, promotes CoC-funded programs among eligible families, & provides referrals for assistance. The CoC is also in the process of executing an MOU w/ the Los Angeles County Office of Education (LACOE) to formalize our collaborative partnership. Presently the CoC coordinates w/ LACOE via the Youth & Family CES (YCES, FCES) to increase collaboration & ensure homeless youth/families are quickly connected to housing/services. The local McKinney-Vento homeless liaisons (Local LEA) & the LACOE CES Education Coordinator attend all monthly FCES & biweekly YCES meetings to give presentations/provide updates on available resources/services. Similarly, YCES/FCES housing & service providers regularly attend SEA/LEA meetings & the local LEA representing YCES/FCES attend all regional LACOE meetings. YCES school liaisons work closely w/ LACOE CES Education Coordinators to connect homeless youth to education & career services. LACOE also provides support in advocating/accessing records for youth who need it. LEA staff participate in semi-annual CoC meetings/planning events & are available to provide presentations for providers to better understand the requirements of HUD/McKinney-Vento.

The CoC's YCES & FCES have formal partnerships w/ local youth education providers to identify homeless youth/families, provide education about CES, & assist w/ linkages to appropriate resources. The CoC's YCES lead also has an MOU w/ PUSD to provide school-based mental health (SBMH) & educationally-related mental health services (ERMHS) to K-12 students. The SBMH program has assigned space on a school campus & designated hours each week to see students for individual/group services. The ERMHS program provides therapeutic, behavioral, academic support, & crisis intervention to students & families. Further, the YCES has an MOU w/ the CoC's local community college where a part-time on-campus peer navigator helps link youth to access centers & CES resources.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section VII.B.1.d.	

Describe in the field below written policies and procedures your CoC adopted to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

The CoC's Written Standards ensure that homeless individuals & families are informed of their eligibility for education services. As mandated in the CoC's Governance Charter & contracts, all subrecipients are responsible for designating a staff person to be responsible for ensuring that children are enrolled in school & connected to appropriate services within the community, including early childhood education programs. Specifically, subrecipients are required to establish policies & procedures that are consistent with, & do not restrict, the rights provided by the McKinney-Vento Act & other laws relating to the provision of educational & related services to families w/ children. Further, grantees that receive CoC funding are contractually obligated to comply w/ the McKinney-Vento Act.

To carry out these CoC policies, Youth & Family CES (YCES, FCES) teams meet w/ a local school district liaison (LACOE Coordinator) on a regular basis & mutually provide information/resources. YCES & FCES staff attend monthly care coordination meetings w/ a co-located LACOE Coordinator to discuss families & resources. As part of the intake process, providers share information about eligibility for/rights related to education services & then provide support to ensure access. CoC providers also work w/ LEAs to address the educational needs of children in shelters by placing families close to their schools of origin so as not to disrupt the children's education. Formal partnerships have resulted in CoC & school district liaisons developing safeguards to protect students from discrimination by having local education stakeholders, who are involved in strategic planning activities regarding homelessness & children, on committees. As such, policies & procedures have brought about a joint process to identify families experiencing/at risk of homelessness. Efforts to confirm living situations are grounded in sensitivity & respect, bearing in mind the best interest of the student. Thus, verifying the living status of students through landlords/law enforcement is not practiced. Relationships have been established with shelters & transitional housing programs to assist in identifying students through processes that do not create barriers or embarrass families by conducting minimal investigation to verify living situations.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	Yes
2.	Child Care and Development Fund	No	Yes
3.	Early Childhood Providers	No	Yes
4.	Early Head Start	No	Yes
5.	Federal Home Visiting Program--(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	No	Yes
7.	Healthy Start	No	Yes
8.	Public Pre-K	No	Yes

9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaborating with Victim Service Providers.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:	
	1. update CoC-wide policies; and	
	2. ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.	

(limit 2,500 characters)

1. The CoC attends quarterly DV-CES meetings that include local CES-participating agencies & VSPs (e.g. Peace Over Violence [POV], Shepherd's Door, House of Ruth, YWCA, Valley Oasis, Haven Hills, Su Casa, & Door of Hope) to gather feedback which informs CoC policies & procedures, funding opportunities, & the CoC's Homelessness Plan. The CoC sits on the LA CES Policy Council (LACESPC) & collaborates w/ 25 stakeholder groups, including the DV community (Rainbow Services), to develop & approve system-wide policies which meet the needs of DV survivors safely, confidentially, and quickly. In the past year LACESPC updated PH policy in order to improve access to EHV's for & prioritize households fleeing DV. The CoC provides TA to DV providers & VSPs to bring them into compliance w/ HUD & CoC reqs. for comparable databases. The CoC coalesced w/ DV providers to establish referral procedures for Mainstream & Emergency Housing Vouchers to protect client safety/confidentiality while also promoting access. In lieu of an online referral system, in-person appts were scheduled to drop off/review paperwork (best practice).

2. A CoC-funded DV Coordinator within CES provides low-barrier, trauma-informed, client-centered services & coordinates access to resources between DV & homeless services providers (HSPs). The DV Coordinator facilitates annual training for HSPs & hosts quarterly resource sharing meetings to bridge gaps between systems & promote best practices. The CoC's DV RRH provider, Volunteers of America Los Angeles (VOALA), holds monthly meetings to discuss client needs & facilitate cross-sector collaboration. VOALA has an MOU in place w/ POV, the CoC's leading VSP, to provide trauma-informed case management services, including crisis intervention/follow-up, personal/criminal advocacy & accompaniments, counseling, & legal services. POV presents at the meetings outlined above & is a member of the California Partnership to End Domestic Violence & Valor, 2 state coalitions for DV & SA. The CoC hosted a DV focus group w/ 8 DV survivors (7/26/22) to elicit feedback on their experiences w/ accessing services/shelter/permanent housing resources. Responses informed the DV Bonus RFA & ensured projects were trauma-informed. The CoC also received new state funding to expand homelessness prevention programming for families, including families w/ a history of DV. The CoC is collaborating w/ a local VSP which operates 2 shelter sites for DV survivors to administer the program.

1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

1&2. The CoC works w/ VSPs & the CoC's DV Coordinator to provide training at least annually for CoC project staff & CES staff. Most recently, training was conducted on 8/25/22. Training also takes place at CES case conferencing meetings. The CoC's DV Coordinator led the training which covered trauma-informed, victim-centered best practices to effectively serve DV survivors & prevent retraumatization, including safety, trustworthiness/transparency, peer support, empowerment, collaboration, mutuality, & choice. Topics included screening for & DV dynamics, the cycle of abuse/power dynamics, types of abuse, signs/symptoms of trauma, common red flags/indicators of DV, practices to avoid & essential practices, safety planning, privacy & confidentiality, complexity of needs, resource availability, & prioritizing client choice. The training's trauma-informed approach also addressed vicarious trauma. Project & CES staff can also access a supplemental 2 hr DV training via the LAHSA Centralized Training Academy which incorporates the expertise of survivors' lived experience and covers additional topics such as systemic barriers to services, working w/ marginalized communities of color, & legal remedies. CoC staff also share outside training opportunities w/ providers. VSPs are state-mandated to complete a 40-hour DV training which addresses the history of DV, DV-related civil & criminal law, DV victim-counselor privilege, confidentiality laws, societal attitudes towards DV, and available resources.

Best practices/planning protocols used to promote safety include assessing participants in a confidential manner that maximizes privacy (i.e. interviewing adult household members separately at program intake), not leaving survivor information in an unsecure location (i.e. out on desk, caller ID), conducting safety screenings face-to-face whenever possible, adjusting the sequence/necessity of screening questions to be trauma-informed, and developing safety plans. Safety plans are survivor-led & include the consideration of personal items such as a list of safe contacts, IDs/birth certificates/immigration paperwork, credit/debit cards/cash, vaccination records, clothes/glasses, & medication/medical devices while reinforcing that these items are replaceable & human life is not. Staff also utilize the My Plan app developed by Johns Hopkins & the National Domestic Violence Hotline to help assess current situations & build individualized, dynamic & confidential safety plans.

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC uses for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

(limit 2,500 characters)

1. To better understand and address the needs of survivors, the CoC uses survey data from our annual Point-in-Time count, HIC data, de-identified HMIS data, and client-level data from two projects using comparable databases-a DV transitional housing program and a DV CES SSO program. Additionally, the CoC utilizes the state HDIS database to review DV from neighboring CoCs to identify opportunities for collaborative responses. The CoC also works closely with local law enforcement who share de-identified aggregate data regarding domestic violence. Finally, as part of our homelessness plan development process, the CoC recently conducted (7/26/22) a DV survivor focus group to elicit direct qualitative data on the specific needs of DV survivors.

2. Data from these multiple de-identified aggregate data sources is used to improve the CoC's response system to meet safely, confidentially, and quickly meet the unique needs of DV survivors, particularly those who are fleeing DV. PIT data and HMIS/comparable database data are used to identify service gaps, quantify the local need for DV-specific housing and services, and plan the programs that will fill these gaps. Recent analyses highlighted the CoC's need for additional rapid rehousing resources for survivors of domestic violence, dating violence, sexual assault, and stalking. In addition, the CoC uses HIC data and HMIS/comparable database data to understand how the CoC is currently serving this population, including outcomes for DV survivors in DV-specific projects and non-DV projects. In addition, the homelessness plan DV survivor focus group offered insight into specialized needs related to domestic violence and homelessness such as survivor-driven trauma-informed care, flexible support, and the rebuilding of support networks through community partnerships. Lastly, data from HMIS and comparable databases were used in all 2022 CoC competition analyses. Finally, de-identified data from comparable databases are used in the local review, rating, and ranking processes to assess new project needs and provider capacity.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	the emergency transfer plan policies and procedures; and	
2.	the process for individuals and families to request an emergency transfer.	

(limit 2,500 characters)

1. The CoC requires, both contractually and through the CoC's Written Standards, that all CoC-funded agencies adopt the Model Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking (HUD Form 5381) or an equivalent plan where all Violence Against Women Act (VAWA) requirements are met. Funded agencies are further required to provide all applicants and participants, regardless of survivor status, with a Notice of Occupancy Rights under VAWA (HUD Form 5380) which explains the VAWA protections and their rights, including their right to an emergency transfer.

2. Per the VAWA, tenants may request an emergency transfer from their current unit to another available unit regardless of sex, gender identity, or sexual orientation. A tenant who is a victim of DV/SA/stalking is eligible for an emergency transfer if the tenant has expressly requested the transfer and reasonably believes there is a threat of imminent harm from further violence if they were to remain in the same unit. While the CoC does not prescribe how emergency transfer requests must be made, funded agencies must establish their own protocols (i.e. in writing or orally, to management or any staff, documentation requirements, etc.) and relay them to program applicants and participants while reviewing the agency's Emergency Transfer Plan and VAWA rights and protections. Per the CoC's Written Standards, all funded agencies must also provide all applicants and participants, regardless of survivor status, a Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternative Documentation form (HUD Form 5382) which is an optional form that can be used to document domestic violence when requesting an emergency transfer. The CoC also encourages program staff to review this information with all clients at annual assessment or more frequently as needed to remind them of their rights, the resources available, and how to access them. In addition, the CES Permanent Housing Transfer Policy (approved 7/28/21) outlines the types of transfers that are allowed within CES, including emergency transfers under VAWA. Although emergency transfers were allowable prior to the creation of the CES Permanent Housing Transfer Policy, the policy serves to facilitate faster emergency transfers by informing all CES and housing staff of the allowability of such transfers and embedding them in existing transfer/matching protocols.

1C-5d.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section VII.B.1.e.	
<div>Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.</div>		

(limit 2,500 characters)

The CoC ensures that DV survivors are provided the same access to housing and services as all other populations experiencing homelessness, and assistance is not confined to Victim Service Providers. In 2017 the CoC's shared CES (with LA and Glendale CoCs) adopted the Equal Access Policy which provides procedures and guidelines to ensure that DV survivors can equitably access all CES-affiliated resources. The CES also has a dedicated DV Coordinator for each of the 8 service planning areas who works to align the historically siloed homeless services and DV services systems. The CoC funds an additional Pasadena-specific DV Coordinator (2018 DV Bonus) to provide direct housing navigation services to DV survivors to ensure that they are able to move through the system, access all services and housing resources, and connect with VSPs if desired while maintaining safety and confidentiality. The CoC's DV Coordinator also provides training to all CES and program staff within the CoC to promote trauma-informed, survivor-centered care and equips all staff with the necessary skills to meet the safety and housing needs of any individual or family who has experienced DV, dating or other intimate partner violence, sexual assault, or stalking. The DV Coordinators hold monthly case conferencing meetings and quarterly meetings which bring together VSPs and homeless service providers to share resource availability. The CoC established alternative, non-HMIS methods of submitting referrals and applications for Mainstream Vouchers and Emergency Housing Vouchers to enable VSPs and other non-HMIS participating agencies to connect their clients with these resources while also implementing heightening safety and confidentiality protocols. Additionally, in response to an increase in DV during the pandemic, the CoC's CES placed households fleeing DV among the top three groups prioritized for EHVs.

As part of the CoC's Homelessness Plan development process which is currently underway, the CoC recently conducted eight focus groups made up of people with lived expertise of homelessness in our community, including one group that was devoted to DV survivors. Input from this group will inform the CoC's Homelessness Plan, was incorporated into the rating and ranking process for new DV Bonus project applications, and has shaped the development of the DV RRH project which was awarded in the 2021 CoC competition and will start on 10/1/22.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety protocols,	
2.	planning protocols, and	
3.	confidentiality protocols.	

(limit 2,500 characters)

1. The CoC's CES safety protocols include: accommodating DV survivors to meet at their preferred location & responding quickly to ensure immediate safety. DV screening questions are embedded in the CES assessment. If DV is disclosed, staff are trained to create safety plans in collaboration w/ the participant. If there is an immediate safety concern that requires law enforcement response, staff work to ensure that mandated reporting protocols are followed in a way that promotes safety.

2. The CoC's DV Coordinator provides specialized housing navigation for survivors. DV clients identified through CES assessment are referred to the DV CES program & complete an individualized service plan within 1 week of enrollment. All services are optional & grounded in participant choice. The DV Coordinator also trains CES-participating providers on best practices in serving DV survivors to ensure appropriate support is safely provided & accommodations are made. The CoC issues guidance to CES-participating providers regarding the VAWA & the Emergency Transfer Plan (ETP). All CoC grantees are required to adopt the Model ETP or an equivalent plan where all VAWA requirements are met. If a unit becomes unsafe, the CoC's ETP allows survivors to transfer to an available safe unit or temporarily move between housing types to ensure safety. The CES Permanent Housing Transfer Policy outlines allowable transfer types, including emergency transfers. Although emergency transfers were allowable prior to the creation of this policy, formalizing them facilitates faster emergency transfers by embedding them in the existing system.

3. Grantees are required to follow strict confidentiality standards & not disclose participant information unless the participant gives written permission of release or disclosure as required by law. Participants in DV programs can access services through CES using a coded ID number, which only VSPs are able to decode to ensure confidentiality. To further safeguard confidentiality, clients can de-identify their record in HMIS w/ non-VSPs so they can move through the system and access non-DV resources while maintaining their privacy. Providers ensure victims' PII is always secure (i.e. never out on a desk, wiping caller ID, etc) and email communications (when necessary) are encrypted. The CoC has also established non-HMIS, alternative methods of submitting referrals/applications for housing resources with heightened confidentiality measures.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+--Anti-Discrimination Policy and Training.	
	NOFO Section VII.B.1.f.	

1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy--Updating Policies--Assisting Providers--Evaluating Compliance--Addressing Noncompliance.	
	NOFO Section VII.B.1.f.	
	Describe in the field below:	
1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;	
2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;	
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and	
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.	

(limit 2,500 characters)

1. The CoC reviews our anti-discriminatory policy regularly & updates are incorporated based on stakeholder feedback. The CoC's consultant for ensuring compliance w/ federal regs reviewed the CoC's Nondiscrimination/Equal Access policy in Aug 2022 & advised it was consistent w/ the Equal Access Final Rule & Gender Identity Final Rule & no additional updates were needed. Feedback is also solicited during trainings, CoC Board & committee meetings, & from people w/ lived expertise.

2. The CoC coordinates w/ local non-profits/consultants to provide anti-discrimination training annually at a minimum to keep service providers up-to-date & inform project-level policies to ensure they are consistent w/ the CoC's anti-discrimination policy. Laws & regs covered in the training include The Fair Housing Act, Title VI of the Civil Rights Act, Section 504 of the Rehabilitation Act, Titles II & III of the Americans w/ Disabilities Act, Section 3 of the Housing & Urban Development Act, Equal Access Rule, 24 CFR 578, Violence Against Women Act & State laws. The CoC also offers resources to providers, including HUD's Equal Access Agency Self Assessment Tool & Equal Access Decision Tree, sample docs/flyers, recommendations for public posting of policies, case examples, & practical tips for designing/implementing environments that are non-discriminatory. Suggestions are offered for each phase of the process, from outreach through housing placement & follow-up. CoC staff are available to review provider policies & provide feedback as needed.

3. The CoC evaluates agency compliance w/ its anti-discrimination policies during annual program monitoring visits. The CoC also evaluates compliance w/ its own anti-discrimination policies when reviewing renewal project applications during the CoC competition. All CoC-funded agencies are contractually obligated to have a grievance procedure per the CoC's Written Standards. Providers are required to report to CoC staff any formal complaints received from participants & document the actions taken to resolve the issues.

4. During the annual monitoring process the CoC issues a finding (requiring corrective action) to projects that are not in compliance w/ the CoC's anti-discrimination policy. TA is provided to bring the project into compliance. CoC staff schedule meetings w/ renewal projects after the CoC competition closes if concerns are raised & provide TA as needed. Agencies may also be subject to legal action if warranted.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.	
	NOFO Section VII.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2021 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
City of Pasadena Housing Department	61%	Yes-Both	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section VII.B.1.g.	

Describe in the field below:

1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference--if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 characters)

1. The City of Pasadena Housing Department (CoPHD) PHA serves the entire CoC's geographic area. CoPHD has several homeless admission preferences within the Administrative Plan (attached). CoPHD grants a General Preference to homeless households on the HCV waitlist, in addition to dedicating 161 project-based vouchers to projects which fill vacancies with chronically homeless individuals and families through the CES. CoPHD also maintains a preference for PSH in project-based voucher RFPs and because of these practices, the homeless admission rate is 61% (an increase from 49% in 2020).

CoPHD project-based 134 additional vouchers to two PSH projects in 2020. When complete, these new construction projects will serve homeless seniors (65 units) and homeless individuals, including veterans (69 units, 16 VASH).

The CoPHD was awarded funding for 75 Mainstream vouchers in 2020 and a homeless preference was applied in consultation with the CoC. The CoC and CoPHD continue to work together to ensure that unhoused households are being matched to these vouchers through CES, thereby increasing the percentage of new PHA admissions who are homeless at admission.

The CoPHD offers two Limited Preferences that set aside 15 tenant-based HCVs for households exiting homeless programs. 10 tenant-based vouchers are set aside for households exiting RRH programs who no longer have supportive services needs but require an ongoing rental subsidy to remain stably housed. 5 tenant-based vouchers are set aside for households exiting non-project-based PSH programs who no longer have a need for intensive services but still require an ongoing rental subsidy to remain stably housed. These 15 vouchers free up vacancies in homeless programs to serve vulnerable families and individuals experiencing homelessness. These limited preferences support CoPHD's Moving On Strategy, which allows residents in project-based permanent supportive housing or PHA-administered tenant-based CoC Rental Assistance (PSH) to transfer into the HCV program when they no longer need intensive supportive services.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored-For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	No
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	No
4.	Local low-income housing programs	No
	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section VII.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process?

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
	Two PSH buildings with PBV and two additional buildings with committed PBV under construction.	Yes

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section VII.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Mainstream vouchers

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section VII.B.1.g.	

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
--	--	-----

1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored-For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
City of Pasadena ...		

1C-7e.1. List of PHAs with MOUs

Name of PHA: City of Pasadena Housing Department

1D. Coordination and Engagement Cont'd

1D-1.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	15
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition that have adopted the Housing First approach.	15
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2022 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section VII.B.1.i.	

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1. The CoC incorporates commitment to Housing First (HF) in both renewal and new permanent housing (PH) project evaluation criteria. 61% of the total points available under the policy/procedure section for renewal projects and 28% of the points available under the project design section for new projects are assigned to HF. All renewal & new PH projects are further required to provide a narrative response outlining the tools and methods that are regularly used to ensure they are following and maintaining fidelity to HF, which is scored by evaluators. 100% of all project applications included in the Consolidated Application that have a housing component implement a low-barrier HF approach.

2. Factors & performance indicators the CoC uses during its evaluation of HF for renewal/new projects include 1. Enrolling participants with barriers such as having too little or no income, active or history of substance use, having a criminal record, or history of victimization. 2. Preventing participant termination for failure to participate in supportive service or make progress on a service plan, substance use, loss of income/failure to improve income, or any other activity not covered in the lease agreement typically found for unassisted persons. New projects are also evaluated on narrative responses specific to 1. The process for accepting a new client into the project, 2. Eligibility criteria (no preconditions for entry), 3. Circumstances where the applicant will terminate a client, 4. How will housing and supportive services be provided to participants? (i.e. low barrier, best practices, etc).

3. All CoC-funded agencies are contractually obligated to perform all program activities in accordance with the written standards, which requires adherence to HF policies & procedures. The CoC ensures compliance with HF during annual program monitoring & on an as-needed basis. CoC staff routinely evaluate project commitment to HF in day-to-day operations, reinforcing this approach in regular program evaluations. Outside of the CoC competition, projects are required to complete a self-assessment using HUD's HF assessment tool to document alignment. Results are utilized by CoC staff during monitoring visits to provide necessary technical assistance where improvements are needed.

1D-3.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1. The CoC's Street Outreach (SO) teams conduct outreach throughout the entire geographic area & target known hotspots such as parks, churches, train stations, the ER & encampments to quickly identify & engage people experiencing unsheltered homelessness (PEH) to connect them to services & housing resources. SO teams canvass the CoC regularly looking for signs of encampments or people who may be unhoused & approach everyone they encounter. Outreach logs are maintained to track engagement & food/drink is offered as an icebreaker. Outreach is conducted more frequently to "hidden" areas (e.g. freeway embankments) to ensure that all PEH are identified & engaged. A multidisciplinary team (MDT) w/ a firefighter & social worker are integrated w/ the police dept. dispatch center & respond to non-emergency calls & calls from the local hospital. SO teams work closely w/ churches, healthcare & nonprofit service providers & are integrated w/ a publicly available online portal that allows community members to make outreach requests. If appropriate, SO teams will engage family members who can offer support. SO teams meet monthly to discuss opportunities for continued coordination & service improvement.
2. All SO teams cover 100% of the CoC's geographic area at least 1 time each year & outreach is conducted more frequently in some areas than others to ensure consistency/build rapport.
3. At least 3 SO teams have full-time, 40-hour schedules & others have standing weekly scheduled days/times to ensure SO is conducted regularly. Early morning & nighttime SO can be arranged as needed. Weekend coverage is provided by local MDT & county SO teams. Flexibility in schedules is provided to meet client needs.
4. SO teams integrate a harm reduction & trauma-informed framework when working w/ PEH least likely to request assistance. All housing & services are advertised in accordance w/ Fair Housing and Equal Opportunity regulations as detailed in 24 CFR 578.93(c). Teams administer the VI-SPDAT on the street to ensure all PEH are entered into CES. Language lines w/ interpreters for over 150 languages are available to enhance communication & reduce barriers to engagement, as well as bilingual staff & ASL services for people w/ hearing impairments. Large font, dark print, & verbal assistance w/ paperwork are provided for people who are visually impaired, dyslexic or illiterate. Wheelchair-accessible vans & mobility units are available to accommodate people w/ disabilities.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

		Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		
	Expansion of homeless services liaison program to include 2.0 FTE street outreach workers who accompany the police department's HOPE Team to provide service linkages and ongoing follow up to improve connections to shelter and permanent housing and reduce arrests. Expansion of Pasadena Outreach Response Team program, which includes two multidisciplinary teams that provide targeted street outreach and also respond to non-emergency calls to police involving people experiencing homelessness.	Yes	Yes

1D-5.	Rapid Rehousing-RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.i.	

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC-only enter bed data for projects that have an inventory type of "Current."	19	66

1D-6.	Mainstream Benefits-CoC Annual Training of Project Staff.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI-Supplemental Security Income	Yes
3.	TANF-Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
----	---

2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1. The CoC systematically provides up-to-date information on the availability of/changes to mainstream resources for program participants through regular emails to provider listservs, meeting announcements, presentations & webinars. Resource sharing is a regular part of bi-weekly CES meetings, CoC committee meetings, & more often as needed. Email blasts are utilized to push training/other updates out as they arise. The CoC partnered with the Los Angeles County Department of Public Health/Health Services & the Foothill Workforce Development Board to launch a mainstream benefits training series in 2022 for local homeless service providers focused on substance use treatment, employment & Countywide Benefits Entitlement Services Team (CBEST) programs. CBEST is a comprehensive program that provides advocacy, case management services, & linkages to health, mental health & substance abuse services. Trainings were forwarded to all CoC-funded agencies & local homeless service providers with direct service staff & attendance was strongly encouraged. The CoC also partnered with DPSS to host a CalFresh Application Assistants training aimed at assisting current & new participants in receiving/applying for CalFresh benefits.

2. The CoC collaborates w/ healthcare organizations ongoingly to support project staff with assisting people w/ applying for/receiving healthcare services/benefits, including DPSS Medicaid (Medi-Cal) enrollment which provides access to specialty mental health care, drug recovery services, & recovery bridge housing. Service providers are trained to assist clients w/ applying for Medicare/Medicaid & offer ongoing support to ensure effective utilization of benefits. Local healthcare & benefits providers visit sites that serve homeless clients & actively work to assist them w/ enrolling in health insurance. Project staff collaborate w/ healthcare experts & local administrators of benefit programs to ensure full understanding of Medicaid benefits & assist participants with the navigation process to reduce barriers to utilization.

3. A countywide tax revenue (Measure H) funds the regional CBEST program which dedicates staff to assisting clients with applying for either veterans' benefits, SSI, SSDI or Cash Assistance Program for Immigrants (CAPI). The CoC works with service providers to promote SOAR certification among project staff using the CBEST program and/or referrals to the SAMHSA SOAR online training courses.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

Over the last 5 years, the CoC has received an influx of new federal (ESG-CV), state (HEAP, HHAP) & local (Measure H) funding that has supported the expansion of motel-based, non-congregate shelter (NCS) resources as an alternative to congregate shelter (CS). The CoC dramatically increased its investments in/capacity to provide NCS following the launch of an emergency motel program in Mar. 2020 to prevent the spread of disease & protect people identified as highly vulnerable to COVID-19. From 1/1/19 - 6/30/22, the CoC funded 5 homeless service providers & the Pasadena Public Health Department to provide NCS, in addition to directly operating a motel-based NCS during the first quarter of the pandemic. Pre-COVID, funding for NCS accounted for an estimated 10% of the CoC's overall program budget (less than \$1 million). From Mar. 2020 to date, the CoC increased funding for NCS by nearly \$2.5 million, which now accounts for 21% of the CoC's funding, second to PH.

The CoC's shelter strategy has shifted away from CS to primarily NCS using motel vouchers, enabling providers to support individualized services for priority populations (e.g. seniors/youth) & increased exits to PH destinations. The CoC adopted CES policies & procedures to prioritize people who are highly vulnerable to infectious disease for placement in NCS. NCS is also utilized to boost capacity for meeting healthcare needs (e.g. quarantining from COVID/Monkeypox) & supporting vaccination. Per the CoC's HIC data, in 2020 only 2% of shelter inventory was NCS. This number climbed to 51% in 2021 & 62% in 2022, reflecting the decompression of CS sites & a fundamental shift to NCS.

Other strategies to increase NCS capacity: 1. The CoC converted a congregate winter shelter program to a weather-activated NCS program in 2020, which continues to serve people w/ motel vouchers when there is inclement weather. 2. The CoC engaged new partners (e.g. Public Health) to administer funding for NCS to expand access & serve more clients. 3. CoC staff conducted extensive research on "tiny village" NCS models by interviewing 5 local sites, analyzing performance/outcome data & budgets. The CoC is considering this model to address the increased need for NCS & released an RFI in 09/22 to identify privately owned property suitable for a tiny village in addition to reviewing publicly owned land in the CoC's boundaries. The CoC is also actively looking to purchase a motel to use for NCS & eventually convert to PSH.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1. The CoC adopts CES prioritization policies, informed by research & local public health experts, that prioritize people experiencing homelessness (PEH) at high risk of death/severe illness for shelter & available PH resources. The CoC distributes CDPH & CDC guidance for disease-specific & general infection control in congregate settings to all providers & TA is available to assist with the implementation of recommendations to ensure safe operations for ES & PH programs. The CoC also distributes written protocols informed by Public Health staff for encampment cleanups, shelter decompression, quarantine/isolation, cleaning/disinfection, symptom screening/case reporting, & ensuring staff/client safety.

2. The CoC has built upon the existing communication structure w/ the local Pasadena Public Health Department (PPHD), which grew out of COVID response measures to further promote infectious disease outbreak prevention efforts among PEH. The CoC facilitates meetings between the PPHD & local program leadership/staff responsible for direct service provision to provide updates & tailored recommendations for infectious disease prevention (not limited to COVID; e.g. Monkeypox, flu, West Nile virus, etc.). Service providers are also connected w/ the county Dept. of Health Services & Los Angeles County Public Health Department (LAPHD) in addition to the PPHD to promote resource sharing. Additional ongoing collaborative strategies between the CoC & PPHD include: 1) Standing quarterly meetings between CoC & PPHD staff (including an epidemiologist & the interim Director) to remain abreast of current best practices/resources/funding available for disease prevention; 2) Continued funding for mobile showers 2 days/week at local church sites; 3) Co-location of vaccine clinics (COVID, Monkeypox, flu) at trusted locations/community events where PEH are known to frequent, e.g. meal programs, shower sites, drop-in centers, shelters & PSH sites 4) Embedding testing & vaccine distribution within street outreach teams; 5) Utilizing "trusted messengers" within the community to promote safety/effectiveness of vaccines; 6) Increasing vaccination rates by providing motel stays to PEH who otherwise would not agree to vaccination due to concerns about negative side effects while unsheltered; 7) Facilitating the implementation of proactive prevention strategies, e.g. engaging street outreach teams for mosquito abatement near encampments (West Nile virus).

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:	
1.	sharing information related to public health measures and homelessness, and	
2.	facilitating communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1. The CoC in collaboration w/ our Public Health Department (PHD) works closely w/ service providers to ensure they have access to resources/up-to-date information needed to prevent/limit infectious disease outbreaks. 1-on-1 meetings w/ providers are held as needed & resources are available for distribution to clients in multiple languages/at an appropriate reading level. The CoC collaborates w/ the PHD & Public Information Officer to publicize accurate information related to public health measures utilizing various systems/platforms including hotlines, social media & websites. Regular email blasts, a dedicated page on the CoC's website, & CoC/provider meetings are also key information-sharing platforms. The CoC facilitated planning meetings w/ these entities & strategized opportunities to deploy resources (including funding) to address unmet needs, including providing updated information on eligibility for services such as quarantine/isolation, non-congregate shelter & vaccines. The CoC's bimonthly Healthcare Committee which includes the PHD, local FQHC & hospital staff serves as a platform for coordination/resource sharing w/ new & existing partners. Outreach teams were able to overcome barriers to vaccination & partner with healthcare agencies (including county PHD teams) to administer shots & provide testing in the field using connections forged in these meetings. HMIS is utilized to streamline public health measures & infection transmission risk to providers, including public alerts on profiles that flag if a client has tested positive for COVID or has an appointment to receive a vaccine.

2. The CoC in partnership w/ our local PHD maintain open lines of communication with street outreach, shelter & permanent housing providers & equip these groups with cleaning supplies, masks/PPE, test kits, vaccines & incentives to prevent/limit infectious disease outbreaks among program participants. An epidemiologist from the CoC's PHD attends Street Outreach Collaborative meetings to provide real-time information to frontline providers on emerging/ongoing infectious diseases (e.g. COVID, Monkeypox, West Nile virus, Typhus, Valley Fever, Flu, Hepatitis A, HIV, etc) & provides tailored recommendations on how to protect people experiencing homelessness (PEH) as well as themselves. The CoC's PHD has hosted town halls & Q/A forums for homeless service providers to provide updates & answer questions around risk/transmission/protocols for various infectious diseases.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section VII.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	covers 100 percent of your CoC's geographic area;	
2.	uses a standardized assessment process; and	
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

1. The CoC works in collaboration w/ Glendale & Los Angeles CoCs to provide comprehensive CES coverage. The CES covers 100% of the CoC's geographic area using a model that includes outreach teams, 24/7 hotlines, & access points. CoC policy requires that any agency receiving CoC funding participate in CES. Integrated CES for families, individuals & youth function together as a community-wide CES.

2. The CoC utilizes CES Assessment & Triage Tools depending on the population served (CES Survey Tool for Single Adults, VI-FSPDAT for Families, Next Step Tool for Youth). Assessment processes/procedures are client-driven & dependent on participant preference, needs or ability to self-resolve. For single adults, a "No Wrong Door" approach to assessment is utilized. Individuals can complete an assessment w/ a trained service provider & for special populations (e.g. families/DV survivors), providers work w/ outreach teams & stakeholders to follow proper protocol & either conduct the assessment or provide a referral. Families are referred through the 24-hour 2-1-1 centralized referral line & DV survivors are referred to the CoC's DV-SSO program. If an individual is unable to complete the CES Triage Tool due to specific barriers/special needs, a Full SPDAT can be completed to ensure accurate assessment. Acuity scores are taken into consideration by CES Housing Matchers & CES case conferencing to ensure equitable access to resources. Scores are entered into HMIS (unless the household is experiencing DV) & used for PH prioritization. The CES considers a variety of factors that may increase a participant's vulnerability (e.g. length of time homeless, health/wellness, & DV status).

3. All participants are encouraged to provide feedback to staff & organizational leadership. At intake & throughout participation, participants are informed of various informal & formal methods for providing input regarding the CES, including candid communication w/ staff, completing feedback forms, & surveys. All feedback is reviewed by program management & significant issues/recurrent themes are elevated to leadership. Adjustments are made at the program level whenever possible & in a timely manner (e.g. using progressive engagement & motivational interviewing methods to ensure services are low barrier, person-focused & client-driven). Feedback is also reviewed at the CES systems level during case conferencing & at meetings w/ service providers/funders to implement system improvements.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section VII.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
4.	takes steps to reduce burdens on people using coordinated entry.	
FY2022 CoC Application	Page 33	09/29/2022

(limit 2,500 characters)

1. Racially/ethnically diverse MDT teams, including peer workers, serve as CES access points for hard-to-engage/hard-to-reach populations who likely will not access services w/out specialized outreach. CES & CES Access Points are comprehensive & accessible to all, including populations w/ unique needs (DV) & people w/ disabilities or Limited English Proficiency. Bilingual staff & materials are available, including access to a language line for translation & the California Relay Service (CRS) for people who are deaf/hard of hearing. The CoC works alongside our local/regional partners (e.g. law enforcement, healthcare & education providers) to reach clients w/ complex service barriers.

2. CES prioritizes people w/ the greatest service needs/vulnerability through CES triage tools, full SPDAT assessments & case conferencing. Clients participate in an intake using the standardized population-specific CES assessment/triage tool, the results of which are entered into HMIS. Assessments provide a score that is used to determine housing need & high acuity clients are prioritized for resources.

3. CES prioritization policies ensure people most in need of assistance receive it in a timely manner by rapidly matching to available PH resources consistent w/ preferences. Housing location services have also expanded w/ the goal of improving landlord engagement & streamlining unit acquisition.

4. The CoC is committed to reducing burdens on people using CES. During COVID, the CoC worked w/ the CES lead to establish a triage/call referral system as an alternative to walk-ins & worked w/ the City's call center to provide referrals to start the CES process. As of 7/1/22, CES Triage Tools are not a requirement for program intake due to participant feedback, workgroups & research indicating the tool does not accurately assess vulnerability, especially for BIPOC, resulting in racial bias. Existing CES Triage Tools are only being administered for PH prioritization purposes in conjunction w/ CES Case Conferencing to ensure matching is as equitable as possible while additional research/refinements are underway. Providers administer CES Triage Tools in a way that allows for rapport building & the time needed to assess thoroughly using a trauma-informed approach. CES Triage Tools can be administered in whatever setting is most appropriate to create a safe/confidential environment & the assessment can be completed in sections over time so as not to overwhelm participants.

1D-10.	Promoting Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section VII.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/01/2022

1D-10a.	Process for Analyzing Racial Disparities—Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section VII.B.1.q.	
	Describe in the field below:	
1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and	
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

People of color, particularly Black & Latinx, continue to be disproportionately represented among people experiencing homelessness (PEH).

1. To better understand these disparities & provide opportunities for course correction, the CoC compares the demographic composition of all project types (ES, SO, SSO, TH, RRH, PSH) during the last 12 months (9/1/21-8/31/22) to the 2022 PIT count & 2020 Census data. Program outcomes & recidivism rates are also analyzed (in accordance w/ SPM 7). Stella P is used to analyze length of time homeless. The CoC analyzes disparities in enrollment & outcomes (retention/exits to PH) at the program level for CoC-funded renewal projects annually. The CoC requires projects to respond to the analysis during the local competition. Projects are scored based on how the applicant currently works/will work to ensure equitable outcomes & the steps being taken to monitor/address any identified disparities. To better understand where disparities are greatest, the CoC layers key demographic indicators, e.g. age (TAY & 55+), gender, first-time homeless, & household type.

2. In Pasadena, Black people represent 8% of the overall population, 13% of people living in poverty, & 32% of PEH. While Black people represent 38% of people accessing services, a slightly higher share than in the PIT count (32%), they were less likely to exit to PH from ES (9% vs. 13%), lease-up in RRH (25% vs. 54%), & maintain/exit to PH in PSH programs (97% vs 98%) when compared to non-Black participants. The 2022 PIT count revealed a 15% increase from 2020 in Latinx PEH, comprising 44% of the unhoused population (v. 33% of the City's population). Latinos also have the longest LOT homeless of any racial/ethnic group (945 days vs. 445 for White NH & 209 for Black). While Black people are being served at comparable rates, Latinos are underrepresented across all program types, w/ the exception of CES & TH. Disparities are greatest in PH programs (as evidenced in project-specific assessments); while Latinos comprise 44% of PEH, they make up 34% of RRH participants & 29% of PSH participants. When in RRH, however, Latinos lease up at higher rates than the overall population served (67% vs. 43%) & have only slightly lower outcomes for PSH (96% vs. 98%). Particularly impacted in this year's PIT are Latinx families, which comprise 81% of all families experiencing homelessness but only 44% & 43% of families in the CoC's RRH & PSH programs respectively.

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.q.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.	The CoC compares demographic data of participants matched to PH programs by the CES to the PIT count to identify racial & ethnic disparities at the matching level, which impacts program enrollment & provides opportunities for course correction. The CoC also analyzes disparities in enrollment & outcomes (retention/exits to PH) at a program level for its renewal CoC-funded projects & works with providers directly to establish clear, actionable mitigation strategies that can be implemented.	Yes

1D-10c.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

COC: As of 7/1/22, the CoC's shared CES no longer requires CES triage tools (i.e. VI-SPDAT, VI-FSPDAT, Next Step) at program intake & they are currently only used for PSH matching while the LA CES Triage Tool Research & Refinement (CESTTRR) project is underway. The CESTTRR project strives to refine our CES to improve equity. USC researchers, alongside people w/ lived experience, have analyzed the tools' efficacy & effects on equity w/ a focus on assessment, administration, & application. The CESTTRR project has created & is piloting a revised triage tool incorporating best practices in equitable & trauma-informed administration, which will directly impact all people engaged with our CES.

In response to a large increase in family homelessness among the Latinx community (2022 PIT), the CoC applied for & was awarded the CA Family Homelessness Challenge grant to expand a homelessness prevention program by accepting referrals from the predominantly Latinx Pasadena Unified School District. The CoC also funds 2 street outreach liaisons who support law enforcement to reduce arrests & improve service linkages among people experiencing homelessness, who are disproportionately BIPOC. The CoC funds the Housing Rights Center to respond to Fair Housing Act violations.

The CoC hired an independent consultant to conduct a system-level equity analysis, which included a BIPOC lived experience focus group, to inform the CoC's Homelessness Plan's outcome goals & implementation.

PROVIDERS: CoC providers are instituting DEI efforts to inform service provision & to reduce disparities in program enrollment/outcomes. Agencies work to ensure that staff, volunteers, & executive leadership are representative of the diverse community they serve & prioritize employing people with lived experience. The CoC's CES Lead created the Lived Experience Advisory Panel to ensure diverse voices are part of all decision-making. Providers also host dialogue sessions with BIPOC communities to examine issues related to housing obtainment/retention & accessing services, mandate cultural competency training annually, improve data collection & analysis capacity, review participant & staff demographics quarterly, and utilize HUD race/ethnicity analysis tools. In response to disparate outcomes, RRH programs were redesigned to offer more flexible services, such as deeper and longer supportive services and/or rental assistance to support individual needs & promote equity in housing retention.

1D-10d.	Tracking Progress on Preventing or Eliminating Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC tracks progress on preventing and eliminating disparities through regular data analysis. The CoC conducts an annual system equity assessment which analyzes data from HMIS and comparable databases to evaluate the distribution of program enrollments and outcomes across race/ethnicity/gender and by program type (including CES which reflects overall system accessibility) to further understand who is being served and how well people are being served. In June 2022, the CoC submitted a draft Homelessness Plan to the State with the following equity goals to be met by June 2024:

1. Reduce annual homelessness among Black people by 10% & Latinx people by 2%,
2. Reduce first-time homelessness among both Black & Latinx people by 10%,
3. Increase total exits to permanent housing by 20% for Black people and 10% for Latinx people,
4. Maintain a 5% or less recidivism rate for Black and Latinx people in PH, &
5. Increase successful placements from street outreach for Latinx people by 10%.

HUD Stella P, HMIS and quarterly state HDIS data will support this analysis. Progress towards these system outcomes will be analyzed on a quarterly basis. The CoC has contracted with a policy planning/data analysis consulting firm that will guide this work and recommend specific actions to be taken to ensure equity in service delivery, housing placements, and housing retention. Staff participate in monthly meetings, with more as needed, to process recent analyses & identify strategies to make progress towards established system outcome goals. The consulting firm leading the effort to finalize the CoC's updated homelessness plan will also create a written implementation plan which identifies the suggested actions for achieving system outcome & performance measure goals, including a timeline for each and the individuals/organizations responsible for each task.

Staff also monitor demographic trends in CoC PIT count data annually & analyze meaningful changes within different racial/ethnic groups over a 7-year period. In 2022, Hispanic/Latinx people comprised 44% of people experiencing homelessness compared to 37% in 2020, despite making up 33% of Pasadena's general population. The CoC was able to utilize this data in real-time to inform service provision strategies, including homelessness prevention. Finally, HMIS data staff produce reports that are shared with the CoC Board to track progress towards racial equity outcomes & ensure accountability.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.	
	NOFO Section VII.B.1.r.	
<div>Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.</div>		

(limit 2,500 characters)

The CoC regularly involves people with lived experience of homelessness & makes concerted efforts to increase the representation/diversity of these individuals in leadership & decision-making roles to inform service delivery. Staff consult with a Lived Expertise Advisory Panel composed of members who are currently experiencing/have experienced homelessness, which serves in an advisory capacity for service provision & policy efforts. People with lived experience of homelessness (PLEH) also participate on the CES Policy Council, which directly impacts CoC policies. Staff share opportunities with PLEH, such as PIT count planning & CoC Board vacancies, through announcements/presentations at meetings attended by PLEH, targeted outreach to direct service provider staff, & postings on the CoC's website. The CoC has at least 1 Board member with lived expertise of homelessness at all times. The Board reviews & approves funding priorities/recommendations, as well as CoC policies & Written Standards for each program type, which outline baseline requirements for program operations/service provision. This year the CoC recruited & compensated 2 PLEH \$600 each to evaluate renewal & new projects for inclusion in the CoC Application. Scores from the lived experience evaluators informed the selection of projects & final ranking. Feedback from these evaluators regarding the evaluation process was also incorporated into the CoC's procedures to make the experience more accessible to all.

The CoC contracted with an experienced qualitative research consulting firm with a focus on equity to conduct 8 targeted lived experience focus groups in July 2022 to inform the strategies, outcome goals & funding priorities included in the CoC's Homelessness Plan, which will serve as a guiding document for our homelessness response. Each focus group was inclusive of 10 PLEH for specific subpopulations, including 1) Chronically homeless, 2) Families, 3) Veterans, 4) TAY, 5) DV survivors, 6) Older adults (55+), 7) BIPOC, 8) Latinx/Spanish speakers. Recruitment for these focus groups was extensive over several weeks & included engagement of over 20 local service providers to sign clients up, social media posts, targeted emails to street outreach & permanent housing programs, circulation of flyers in English/Spanish at community & drop-in centers, site-based social services & meal programs, & site visits. Participants were compensated with \$40 gift cards for 1.5 hours of their time.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	70	38
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	13	7
3.	Participate on CoC committees, subcommittees, or workgroups.	4	4

4.	Included in the decisionmaking processes related to addressing homelessness.	7	7
5.	Included in the development or revision of your CoC's local competition rating factors.	9	2

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

The CoC has cultivated partnerships w/ private employers willing to provide an adaptive work environment to PH participants & people w/ lived experience of homelessness (PLEH) in clerical, food service, warehouse, janitorial & retail industries. The CoC works w/ our local Foothill Workforce Development Board & has an MOU w/ our education/training agency, Flintridge Center, to provide meaningful education, on-the-job training, internships, & employment opportunities to PLEH. These agencies collaborate to host job fairs & connect participants w/ barriers to employment (e.g. criminal justice involvement/previous incarceration) to job training & apprenticeship opportunities. They also operate subsidized job-specific training programs to help clients gain skills/obtain education & credentials. Many CoC-funded agencies provide vocational & workforce services for professional development & employment reintegration, including job aptitude surveys, job readiness/job training, assistance w/ resumes, interview prep, job search assistance/placement, work clothes, access to resource rooms w/ computers/phones & transportation support. Once employment is obtained, program staff provide ongoing follow-up assistance to promote job satisfaction, retention, & career advancement. The CoC's CES lead for single adults & families has administered the Sources Career Development Program for nearly 25 years & provides connections to employment/skill-based training opportunities, including 1-on-1 career counseling & comprehensive job search resources. Additional services include assistance w/ expunging criminal records, sealing juvenile records, obtaining credit reports, obtaining fingerprints & records, notarization, & petitions to Homeless Court. Alumni are invited to return to the program at any time to receive financial, educational, lifestyle, & career counseling.

The City of Pasadena Housing Department administers the Municipal Assistance, Solutions, & Hiring (MASH) program which provides up to 2 years of paid hands-on training in maintenance & administrative positions throughout various city departments. MASH trainees receive career development & resume writing assistance w/ the goal of supporting transitions to permanent, well-paying jobs with benefits. While MASH does not exclusively employ people who are or have experienced homelessness, recruitment efforts are targeted to agencies that serve people w/ a history of housing instability.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	
	Describe in the field below how your CoC:	
1.	how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and	
2.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness	

(limit 2,500 characters)

1. CoC & ESG-funded programs inform participants of various informal & formal methods for providing feedback regarding their experience in the program at intake & throughout program enrollment, including direct communication w/ service staff, feedback forms, surveys & other methods for communicating formally w/ organizational leadership. Many CoC-funded agencies have advisory boards which include people w/ lived expertise of homelessness (PLEH) who directly inform the development of program policies, planning & evaluation (e.g. reviewing programmatic materials & providing recommendations to strengthen/improve contents). The CoC's Housing Department also developed a Participant Satisfaction Survey in English & Spanish which is sent out to rental assistance participants annually. The survey includes questions related to participants' satisfaction w/ the assistance received, their housing, & program staff. The survey also asks questions related to how the program may have impacted various aspects of participants' quality of life (e.g. health, relationships, stress, etc). The CoC further conducted 8 subpopulation-specific focus groups w/ a combined total of 57 people who are currently experiencing or have recently experienced homelessness to provide feedback on their experience accessing services, shelter, & permanent housing as well as how they were treated during the process to address disparities. This feedback will inform the final recommendations included in the CoC's Homelessness Plan.

2. The CoC takes concrete steps to address challenges raised by PLEH, including revising/ creating questions on grant applications informed by the feedback received in various settings. For example, the DV survivors focus group shared the importance of flexibility in programs/services, particularly w/ financial assistance as situations may change suddenly & the preference to work w/ advocates who have lived experience. Staff quickly incorporated a question into the DV Bonus application asking how projects would ensure the availability of tailored, responsive & flexible services, including how PLEH would be involved in program operations. All applicants seeking federal, state, or local grant funding from the CoC are required to address how the expertise of PLEH will be integrated with the project & within the agency. Participant feedback gathered from existing programs is reviewed by leadership & any significant issues/recurrent themes are elevated to CoC staff.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	

	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that engage city, county, or state governments that represent your CoC's geographic area regarding the following:
1.	reforming zoning and land use policies to permit more housing development; and
2.	reducing regulatory barriers to housing development.

(limit 2,500 characters)

The CoC, in partnership w/ the Housing Production Division within the Pasadena Housing Department, is dedicated to creating more affordable housing.

1. The City initiated a zoning code amendment that was approved by the CoC's City Council on 7/18/22, which allows for the development of affordable housing on properties owned & operated by religious institutions in zones that either do not currently allow housing by-right or allow limited types of housing & only as an accessory use. Sites that have an existing Use Permit (i.e. CUP, MCUP) are not required to make modifications if they decide to pursue housing development. Projects are eligible for a maximum density of 32 units per acre & a maximum 75 units by right. Members of the CoC's Faith Community Committee spearheaded the advocacy in support of this zoning code change by attending Planning Commission & City Council meetings to submit public comment, gathering letters of support from local congregations & affordable housing stakeholders, & facilitating 1-on-1 meetings with City Council members. Further, in March 2022, the CoC Board wrote a formal letter of support for SB 1177, which was ultimately passed & created a \$23 million tri-city Regional Housing Trust Fund between Pasadena, Glendale & Burbank to support new housing projects, procurement of new land/units, & the movement of projects in development through the pipeline.

2. On 5/23/22, the CoC's City Council eliminated the development capacity limits in the Land Use Element that set a maximum number of residential units that would be developed in Specific Plan areas in the CoC's jurisdiction. The City also removed the discretionary hearing from the Affordable Housing Concession Permit process, which can save projects anywhere between 3-6 months time by reducing unnecessary barriers. On 7/18/22, the City Council adopted a Housing Element that includes a number of commitments to remove constraints to developing housing within the CoC's jurisdiction, including a) updating the ADU ordinance & streamlining the ADU review process, b) streamlining the specific plan review process for affordable housing projects, & c) studying ways to streamline the Design review process. CoC & Housing Department staff worked w/ the Planning Dept. to provide feedback on all of these initiatives, including reviewing/providing comment on the approved Housing Element (est. 2 months of staff time) & attending monthly affordable housing task force meetings w/ the mayor.

1E. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC's Local Competition Deadline–Advance Public Notice.	
	NOFO Section VII.B.2.a. and 2.g.	
	You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/12/2022
--	---	------------

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	12
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section VII.B.2.d.	

Describe in the field below:

1.	how your CoC collected and analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

1. CoC staff analyzed data from APR & SPM reports to inform the evaluation criteria for renewal projects, including bed utilization, recidivism, increases in income & exits to/retention of PH. For bed utilization, data from the 2021 HIC was compared to the utilization of each project's total beds averaged between 4 points during the year (Jan, Apr, Jul, Oct) per the APR. Staff also analyzed HMIS data & provided all renewal projects w/ a racial equity analysis that highlighted disparities in program enrollment & outcomes by race/ethnicity.

2. The CoC's evaluation panels analyzed data for new & renewal projects specific to length of time to PH placement. All new projects were required to provide a narrative response detailing the actions that will be taken to assist clients w/ rapidly securing & maintaining PH & the strategies to ensure participants obtain & remain in PH in a manner that fits their needs. Renewal projects were evaluated on activities to maintain/improve bed utilization rates & ability to serve people w/ the longest experiences of homelessness using APR data.

3. All projects received points based on their ability to serve/prioritize people w/ the most severe needs & highest vulnerabilities (e.g. having low/no income, criminal histories, past/current substance use, history of victimization/DV/trauma, chronic health conditions, multiple disabilities, longest histories of homelessness, high acuity, or coming directly from the streets). New projects received points for serving people who are at high risk of illness, utilize crisis/emergency services to meet basic needs, have significant functional impairments or behavioral health disabilities. Projects that serve participants w/ all of these barriers received full points. Points assigned to serving participants w/ severe needs/vulnerabilities contributed to final scores & subsequent ranking.

4. The CoC prioritizes projects that provide housing & services to the hardest to serve populations as reflected through evaluation criteria. Lower performing projects are provided w/ TA & 1-on-1 meetings to identify strategies to improve performance. Renewal projects are also scored on the steps being taken to reintegrate participants into the community (e.g. access to education/training & volunteer/community service) to support retention. New projects are scored based on the actions they will take to support rapid returns to PH, including landlord engagement & integrated supportive services.

1E-3.	Promoting Racial Equity in the Local Competition Review and Ranking Process.	
	NOFO Section VII.B.2.e.	
	Describe in the field below:	
	1. how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;	
	2. how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;	
	3. how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and	
	4. how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	

(limit 2,500 characters)

1. Prior to the release of the NOFO, staff worked w/ the CoC Board, which is racially diverse in membership & inclusive of over-represented racial groups in the CoC's homeless population (Black/Latinx), to obtain input on the rating factors used to review & evaluate projects, including advancing racial equity. Staff facilitate debrief sessions w/ people involved in the CoC's local competition process annually, including people identifying as BIPOC, & record feedback on opportunities for improvement that is reviewed/incorporated in future competitions to refine project rating/ranking factors.
2. Staff conduct an annual review of the evaluation criteria used to score all projects to promote equitable rating instruments. Staff incorporated feedback received from BIPOC panelists in the 2021 competition, including the wording of questions, evaluation criteria, & points available by section to strengthen the process in 2022. The CoC prioritizes representation of people w/ lived experience, who are often racially diverse, & rating factors are subject to revision following input gathered via debrief meetings.
3. The CoC is intentional in including people who are BIPOC on all funding application evaluation panels, including the review, selection & ranking process for all CoC-funded projects. Outreach was done to invite new people to the evaluation panel, which typically consists of 3 racially diverse evaluators, of which 1-2 are BIPOC from communities that are overrepresented within the homeless population (i.e. Black & Latinx). The evaluation panels for renewal & new projects consisted of one person who is BIPOC w/ lived experience of homelessness who reviewed & scored all applications. The evaluation panel's scores inform funding recommendations & project rankings to the CoC Board, whose voting membership is 43% BIPOC.
4. CoC staff built upon a racial equity rating factor introduced in 2021 & this year all renewal & new projects were scored based on how the applicant demonstrated:
 - They have/plan to identify barriers to participation faced by POC overrepresented in the homeless services system,
 - The steps that will be taken to address these barriers/disparities in the provision of assistance to improve racial equity, &
 - The steps that will be taken to address disparities in program enrollment & outcomes.

This question was worth 30% of points assigned to service delivery for renewal & new projects, which factors into the CoC's ranking decisions.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section VII.B.2.f.	
	Describe in the field below:	
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any projects through this process during your local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and	
FY2022 CoC Application		Page 46 09/29/2022

4. why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.
--

(limit 2,500 characters)

1. Reallocation decisions are grounded in a thorough analysis of project performance & local needs & follow the CoC's reallocation policy that was most recently revised on 8/3/22. The CoC follows a set process whereby reallocation can be used to create new evidence-informed projects, eliminate underperforming projects, shift projects to other, more appropriate funding streams, ensure the CoC inventory matches local need, and provide Coordinated Entry. CoC projects are reviewed annually by CoC staff & the Board to identify opportunities for reallocation based on unspent funds, bed utilization, housing retention, system performance measures & other factors. Renewal projects are considered for reallocation if either threshold is met: 1) projects spent less than 80% on average of awarded funds over the past 3 program years or 2) projects receive 60% or fewer of the available points in the renewal application. If a project meets either of these thresholds, the Board will either: A. Direct staff to establish measurable improvement goals w/ the project operator within 60 days of the CoC competition closing & report back on progress or B. Make a reallocation decision without giving the project any opportunity to improve. CoC funds may be reallocated voluntarily during the Intent to Renew process or involuntarily by the Board. Staff notify any project considered for reallocation in writing & provide rationale for the action. Any decision to reallocate is voted on & finalized by the Board.

2. One renewal project voluntarily surrendered all grant funding starting CY 23-24 during the Intent to Renew process. 3 additional projects were identified for reallocation during the competition due to underspending over the last 3 program years (using drawdown information from e-LOCCS/SAGE).

3. Two CoC rental assistance projects were partially reallocated in the collective amount of \$200,000, in addition to the \$204,697 that was voluntarily surrendered by another project operator. The Board voted not to reallocate the remaining project since underspending due to ramp up in the first year impacted the average spending over the last 3 years. In the most recent grant term (12/1/20-11/30/21), this project had less than 5% unspent funds. In total, the CoC reallocated \$404,697 during this year's local competition.

4. N/A

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
--------	---	--

	NOFO Section VII.B.2.f.	
--	-------------------------	--

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	Yes
--	-----

1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/14/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/14/2022
--	--	------------

1E-5b.	Local Competition Selection Results–Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
--	--	-----

1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/28/2022
--	--	------------

1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.B.2.g.	

You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC's website or partner's website.	09/28/2022
--	---	------------

2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	Bitfocus
--	--	----------

2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Multiple CoCs
--	--	---------------

2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

	Enter the date your CoC submitted its 2022 HIC data into HDX.	05/06/2022
--	---	------------

2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in databases that meet HUD's comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

(limit 2,500 characters)

1. The City of Pasadena, as the CoC's HMIS Lead, provides technical assistance using HUD's HMIS Comparable Database Decision Tree to assist service providers in determining if a comparable database is required for their programs. If required, the HMIS Lead works with the service provider to ensure that the provider's comparable database collects required data elements, meets reporting standards and produces comma-separated values files for export as required by current HMIS Data Standards and the HMIS Comparable Database Manual. The CoC has taken these steps with the operators of both CoC DV Bonus projects awarded in previous CoC competitions.

2. The CoC is fully compliant with all 2022 HMIS Data Standards. Currently, the CoC has one active program utilizing a comparable database. A long-standing transitional housing program began exclusively serving households fleeing DV in early 2021. At the time of this shift, the HMIS Lead worked closely with the service provider (Door of Hope) to verify that a comparable database was required & also evaluated the provider's existing comparable database, Apricot, which they were using for other programs outside of the CoC. The evaluation confirmed that Apricot meets HUD standards and could be utilized for their transitional housing program. Door of Hope also agreed to submit de-identified aggregate data to the CoC for reporting & planning purposes, despite not receiving CoC funding. In October 2022 Volunteers of America LA (VOALA) will begin operating a DV RRH project which was awarded in the 2021 CoC competition. VOALA currently uses a comparable database called ServicePoint for a program outside the CoC serving households who are fleeing DV and have experienced human trafficking. The HMIS Lead is in the process of evaluating the need for a comparable database for the new program as well as assessing ServicePoint to ensure that it meets HUD's Comparable Database standards.

2A-5.	Bed Coverage Rate—Using HIC, HMIS Data—CoC Merger Bonus Points.	
	NOFO Section VII.B.3.c. and VII.B.7.	

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	192	0	192	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	40	18	22	100.00%
4. Rapid Re-Housing (RRH) beds	66	0	66	100.00%
5. Permanent Supportive Housing	417	0	388	93.05%
6. Other Permanent Housing (OPH)	36	0	36	100.00%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
	NOFO Section VII.B.3.c.	
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:	
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and	
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.	

(limit 2,500 characters)

N/A - The CoC's bed coverage rate is greater than 85%.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	
Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?		Yes

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	02/22/2022
--	---	------------

2B-2.	PIT Count Data—HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	05/06/2022
--	---	------------

2B-3.	PIT Count—Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

	Describe in the field below how during the planning process for the 2022 PIT count your CoC:
1.	engaged stakeholders that serve homeless youth;
2.	involved homeless youth in the actual count; and
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.

(limit 2,500 characters)

1. The CoC conducts a supplemental count of youth aged 18 to 24 in conjunction w/ the broader PIT count. The CoC's consultant who manages the planning & coordination of youth volunteers has led the process for over 5 yrs & has direct experience working w/ youth experiencing homelessness. In order to increase engagement among stakeholders that serve youth in 2022, the CoC's Youth CES Regional Coordinator was hired to recruit & register volunteers, facilitate hotspot planning meetings, & make recommendations for improving the execution of the count. Planning for the youth count started w/ identifying stakeholders who participated in past years, re-engaging agencies w/ low attendance & outreaching to new partners. Stakeholders engaged included the Youth-CES Lead, youth homeless service providers & other non-profits, local youth drop-in centers, Pasadena Unified School District & Pasadena Community College (PCC), Learning Works alternative charter school, programs that support current & former foster youth, LGBTQ+ providers, local businesses that serve young people, & faith-based organizations. These groups are asked to identify volunteers within their networks to participate. Stakeholders were engaged via announcements at care coordination & other youth meetings, direct emails/phone calls & social media posts.

2. Youth w/ lived expertise are involved throughout the planning process & are engaged early/often. Youth participate in hotspot planning meetings, develop routes for volunteers, inform the timing of the count (3:00-5:00 pm), test the survey tool, provide feedback on questions/survey design, conduct pre-count training & act as guides to locate young people. All youth volunteers participated in a post-count debrief to gather feedback to improve future counts. Youth participants are compensated w/ \$45 cash stipends. Youth teams from the Boys & Girls Club also volunteered to gather donations & created hygiene kits as engagement tools.

3. Hot spot planning takes place during monthly youth case conferencing meetings & on designated weekdays after school to create a list of locations where homeless youth gather, including community centers, parks, fast food spots, & local businesses. Previous year's count data is reviewed to inform hotspot locations & changes that need to be made. PCC is engaged to inform hotspots on campus & all organizations review routes from the previous year to ensure all appropriate existing & new locations are included.

2B-4.	PIT Count—Methodology Change—CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable; and	
	3. describe how the changes affected your CoC's PIT count results; or	
	4. state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2022.	

(limit 2,500 characters)

Not applicable.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless--Risk Factors Your CoC Uses.	
	NOFO Section VII.B.5.b.	
	In the field below:	
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1. The CoC identifies risk factors for first-time homelessness (FTH) through collaboration w/ homelessness prevention (HP) & mainstream providers & ongoing data analysis. The CoC engages subject matter experts to leverage the growing understanding of drivers/predictors linked to FTH to inform prevention strategies. CoC staff/consultants analyze reports from the CA Policy Lab & emerging HP research & interview people w/ lived expertise/current program participants to inform risk factors, best practices for service provision & innovative strategies. A significant risk factor for FTH in the CoC is a high rent burden. Other common FTH risk factors include history of eviction, housing insecurity (e.g. doubled up, couch surfing, motel living), criminal justice/foster care involvement, exiting institutions, low/fixed income, insufficient benefits assistance & history of DV. The CoC is also examining ways to counteract systemic racism which disproportionately impacts the FTH risk among Latinx communities (per PIT data).

2. The CoC's strategy to address FTH includes partnerships w/ service providers to fund expanded rental/utility assistance, relocation assistance, legal services & increased connections to mainstream/public benefits. The CoC also collaborates w/ faith-based organizations & system partners (e.g. education, criminal justice, healthcare) to bolster HP efforts. Problem solving & diversion are embedded in the CES to quickly resolve housing crises & prevent FTH. During COVID, the CoC implemented a local eviction moratorium & funded legal services to curtail rising landlord harassment & prevent illegal evictions. The CoC also collaborated w/ HP providers to connect as many clients w/ the State's Housing is Key rental relief program. In June 2022, the CoC was 1 of 10 jurisdictions (out of 32 applicants) awarded state Family Homelessness Grant Challenge funding to expand HP for families. The funding will be administered by a local nonprofit w/ extensive experience serving families/DV survivors & will innovate by collaborating w/ the CoC's education, legal services & DV systems partners. This program will also advance equity by seeking program referrals through targeted outreach from entities that serve Latinx participants in an effort to reverse the growing overrepresentation of ethnic disparities among families.

3. The City of Pasadena as the lead agency for the CoC, in collaboration w/ HP grantees, is responsible for overseeing this strategy.

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section VII.B.5.c.	
	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1. The CoC conducts regular data analysis to understand factors driving increases in length of time homeless (LOTH). Efforts to reduce LOTH include requiring all PH programs to operate under the Housing First model w/ no preconditions/barriers to entry, & embedding diversion/problem-solving efforts within the CES. Employing housing locators/navigators is also instrumental in rapidly locating units. The CoC increased investments in landlord incentive programs w/ ESG-CV funding & partnered w/ our local PHA to leverage ESG-CV funds & Mainstream vouchers to expand RRH inventory & quickly move households into PH w/ short-term supportive services. In partnership w/ the CoC, the PHA is issuing 108 EHV vouchers, which has been an unprecedented investment in PH programs. To support timely lease-ups, the CoC's PHA hired a full-time housing liaison to locate units. The EHV program utilizes available waivers to scale back documentation requirements & speed up the housing process. Regular meetings take place w/ CoC & PHA staff to mitigate lease-up & landlord/tenant challenges. Two PSH buildings w/ a collective 134 units are currently under construction & will serve chronically homeless (CH) individuals & veterans. The CoC also recently launched its Built for Zero initiative w/ an aim to reduce CH among single adults & veteran homelessness to functional zero. The CoC utilizes a By Name List (BNL) of individuals active in the system which also tracks the amount of time they have been on the BNL. This approach helps the CoC identify areas of our response system where individuals' progress toward PH is stalled & make system changes. Coordinated investment of local, state & federal resources to target/prioritize people w/ the longest LOTH continues to be pursued.

2. The CoC utilizes street outreach teams & the CES to identify/prioritize people w/ the longest LOTH. Population-specific assessment tools (VI-SPDAT, VI-FSPDAT, Next Step Tool) & CES/matching policies prioritize people who have been homeless the longest for PH. The CoC also conducts robust analysis using HMIS & Stella-P to identify people w/ the longest LOTH & layer racial equity data to better serve priority populations, including BIPOC & Latinx communities. The CoC collaborates w/ law enforcement, healthcare & other systems to identify people w/ the longest LOTH & re-engage them on the path to PH.

3. The City of Pasadena as the lead agency for the CoC is responsible for overseeing this strategy.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section VII.B.5.d.	
	In the field below:	
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.	

(limit 2,500 characters)

1. The CoC continues to invest in housing locators & navigators using federal, state, & local funding to assist clients in ES, TH & RRH programs successfully exit to PH. These housing specialists are skilled at working w/ landlords, negotiating leases, & securing available units. The CoC's PHA has a limited preference for households exiting RRH to receive a HCV. The CoC also created a RRH program paired w/ 75 Mainstream HCVs to promote exits to PH & housing stability. Non-congregate shelter clients may also be prioritized for PH. Additional PH placement strategies include: all PH programs maintaining a Housing First approach, utilizing a TBRA mobility policy to increase PH supply, identifying & securing funding for ICMS to support rental assistance clients, increasing RRH & PSH funding by leveraging local, state & federal resources, utilizing ESG-CV funding to support move-in assistance & landlord incentives, promoting mainstream benefits attainment, investing in strategies to increase earned income by providing connections to employment opportunities, & 1-on-1 meetings w/ providers to discuss strategies that promote quick exits to PH.

2. The CoC's strategies to increase an already high PH retention rate center trauma-informed, client-centered ICSM informed by a harm reduction approach to reduce negative exits. In addition, the CoC employs a full-time Housing Retention Specialist who provides limited-term supportive services to previously homeless households receiving rental assistance. This staff person assists participants when challenges to housing stability arise & works with them to provide connections to longer-term community-based supports. The Housing Retention Specialist provides support w/ submitting annual review paperwork as well as preparing for annual Housing Quality Standards inspections, provides landlord-tenant mediation, & assists participants in the moving process (locating a unit, move-in paperwork, etc.) if they voluntarily/involuntarily have to locate a new unit. RRH & PSH programs also provide home-based case management & landlord mediation to resolve issues before they escalate. The CoC encourages providers to incorporate community reintegration in their program design/service delivery strategy, including increasing access to volunteer/community service opportunities & meaningful activities to support housing retention.

3. The City of Pasadena as the lead agency for the CoC is responsible for overseeing this strategy.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	
	In the field below:	
	1. describe your CoC's strategy to identify individuals and families who return to homelessness;	
	2. describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. The CoC identifies individuals and families who return to homelessness through direct conversations with services providers, case conferencing meetings and regular HMIS/CES data analysis with the goal of promoting rapid returns to housing & informing future prevention strategies. Trends in retention and negative housing outcomes are analyzed by program type and demographics (i.e. race, gender, etc) and data is shared with providers to identify actionable improvement goals. Bi-weekly case conferencing meetings allow for a deeper understanding of the factors that led to housing loss and facilitates connections to interventions/services that better meet client needs. The CoC also utilizes emerging research to identify risk factors predictive of returns to homelessness, e.g. history of eviction & loss of income, to inform how services are targeted.

2. To ensure ongoing reductions in additional returns to homelessness, CoC staff and providers utilize HMIS data to identify common risk factors to help inform policy/ practices to prevent housing loss and improve prevention targeting. This involves looking at housing barriers upon entry, length and depth of services offered, and recidivism rates across different types of PH exit destinations. To ensure returns to homelessness remain low, case managers connect individuals and families who exit to PH with mainstream and community resources such as income assistance, employment services, health care, mental health services, and substance use treatment to ensure ongoing housing stability. Clients participate in this process, building the knowledge and skills necessary to maintain resources and navigate the process for any future needs. CoC-providers employ problem-solving strategies to divert people from entering the homeless services system & explore all potential housing options to resolve a crisis. Referrals/connections to legal services are provided when necessary. The CoC also funds a housing retention specialist co-located within the PHA who assists rental assistance participants with histories of homelessness in order to prevent additional housing crises. Further, the CoC has increased intensive case management services offered at PSH sites in recent years with County Measure H funding & the CoC paired Emergency Housing Vouchers with ESG-CV RRH funding for supportive services to support housing retention.

3. The City of Pasadena, as the lead agency for the CoC, oversees this strategy.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section VII.B.5.f.	
	In the field below:	
1.	describe your CoC's strategy to access employment cash sources;	
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

(limit 2,500 characters)

1. The CoC works to ensure employment services are integrated into program operations where appropriate & collaborates w/ service providers/employment agencies to connect participants to job programs targeted to people experiencing or w/ histories of homelessness to ensure customized support. Many CoC-funded agencies have existing employment/job training programs whereby staff provide connections to career counseling, job placement & retention services. Participants also have access to information on resources such as unemployment, job opportunities & career fair announcements. Community integration specialists provide ongoing support in education & employment to assist participants with increasing income. Referrals are also provided to WIOA & WDD agencies, which provide job training & help with job searches, resume development, & interview training.

2. The CoC assigns points to both renewal & new project applications based on outcomes & strategies identified to increase access to employment cash sources. CoC staff also review HMIS & APR data & provide technical assistance when needed to agencies in order to adequately capture employment cash income increases. Through referrals & ongoing collaboration, providers work w/ mainstream employment agencies such as the Foothill Workforce Development Board, CA Employment Development Dept., CA Dept. of Rehabilitation, Los Angeles County Dept. of Public Social Services' Welfare to Work program, & the Flintridge Center (education & training agency for reentry population) to increase earned income. The CoC also has an MOU w/ Flintridge Center to ensure access to education/training opportunities for people experiencing homelessness, including programs tailored to youth & reentry populations. The CoC has also cultivated partnerships w/ private employers willing to provide an adaptive work environment to PH participants in clerical, food service, warehouse, janitorial & retail industries. The CES lead for the single adult & family systems operates a Sources Career Development Program which employs dedicated job developers who provide 1-on-1 support to clients & group workshops (i.e. resume building & interview skills). An Employment Liaison further works to establish partnerships w/ employers willing to provide job opportunities for clients within the CoC's region.

3. The City of Pasadena, as the lead agency for the CoC, oversees this strategy.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section VII.B.5.f.	
	In the field below:	
	1. describe your CoC's strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

1. CoC-funded agencies are proactive in systematically linking participants to mainstream benefit resources and participants receive expedited SSI/SSDI approvals with assistance from SOAR-trained staff. In partnership with Los Angeles County, CoC providers connect participants to the Countywide Benefits Entitlement Services Team (CBEST) program, which provides education, advocacy & legal support to obtain disability benefits. In addition, case managers meet regularly with participants to ensure they are enrolled in & receiving mainstream benefits from all sources for which they are eligible, including Social Security and SSDI, General Relief, CalWorks (TANF), CAPI, veterans benefits, and any federal or state stimulus funds which may become available. Case managers assist with the application process and any denials/renewals and problem-solve around barriers as needed. Participants are also linked to non-cash benefits such as CalFresh (SNAP), Medi-Cal/Medicare, transportation such as ACCESS Paratransit and Dial-a-Ride, In-Home Supportive Services, and other medical benefits.

The CoC partners with mainstream health, social, and employment programs by hosting annual benefits training series to ensure homeless service providers are knowledgeable of resources and participants are connected to appropriate benefits. CES lead agencies coordinate with mainstream benefits providers (Dept of Public Social Services, Dept of Public Health) via regular case conferencing & co-location of services at CES & partner sites to expand access. Individualized support is provided to eligible participants to ensure efficient access to and maintenance of these and other public benefits. Program staff of CoC-funded agencies track benefit renewal dates and follow up to ensure necessary paperwork is submitted and meetings are attended on an annual basis for benefits retention. Staff also provides assistance with completing and submitting any necessary documentation and providing transportation to and support at appointments. The CoC assigns points to both renewal & new project applications based on outcomes specific to increasing non-employment cash income & tracks the progress of programs annually. Providers are connected to various training opportunities as needed & CoC staff provide technical assistance support.

2. The City of Pasadena, as the lead agency for the CoC, oversees this strategy.

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
2022 USHS Realloc...	PH-PSH	3	Both
2022 USHS CoC Bon...	PH-PSH	15	Both

3A-3. List of Projects.

1. What is the name of the new project? 2022 USHS Reallocation Centennial Place PSH Supportive Services
2. Enter the Unique Entity Identifier (UEI): LVLLDEMSELMV8
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 3
5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? 2022 USHS CoC Bonus Centennial Place PSH Supportive Services
2. Enter the Unique Entity Identifier (UEI): LVLLDEMSELMV8
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 15
5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.B.1.s.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.B.1.s.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

N/A

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
--	--	----

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

N/A

4A. DV Bonus Project Applicants

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
--	--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section II.B.11.e.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2022 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section II.B.11.(e)(1)(c)	

1.	Enter the number of survivors that need housing or services:	166
2.	Enter the number of survivors your CoC is currently serving:	11
3.	Unmet Need:	155

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	
	Describe in the field below:	
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

1. The number of DV survivors needing housing or services was calculated by totaling the unduplicated number of Pasadena CoC DV survivors over age 18 in non-PH projects (ES, SO, SSO, TH) during the last 12 months (9/1/21-8/31/22). Similarly, the number of survivors our CoC is currently serving (4A-3 element 2) was determined by totaling the unduplicated number of Pasadena CoC DV survivors over age 18 in all project types (ES, SO, SSO, TH, RRH, PSH) during the last 12 months (9/1/21-8/31/22).

2. Data for 4A-3 elements 1 and 2 was collected from HMIS for all projects, apart from two DV projects that reported data from a comparable database. Anyone 18+ who indicated they were either currently fleeing (HMIS data elements 4.11.2B) or were DV survivors (4.11.2) was included in our results. Data from the most recent PIT (2022) was not used to estimate the number of DV survivors because it's limited to those currently fleeing DV rather than all DV survivors, resulting in an undercount.

3. The CoC's current DV-CES project has been instrumental in addressing the unique challenges that DV survivors face in accessing services and permanent housing. While this project helps to bridge those gaps, the need for housing units has outpaced our ability to serve this growing subpopulation. Further, high housing costs, low vacancy rates & lack of affordable housing supply are persistent challenges within the CoC. Additional barriers to meeting the needs of survivors include siloed systems of operation between homeless services & DV providers, lack of DV emergency shelter beds, survivor confidentiality/safety concerns & funding availability. Unfortunately, the CoC saw the share of people fleeing DV increase from 13% in 2020 to 25% in 2022 based on PIT count data. The 2021 DV-RRH Bonus Project, which will begin operating 10/1/22, will enable the CoC to directly address the need for DV-focused RRH for 8 households (10 people). While this is progress, the need extends far beyond 8 households and additional resources are necessary to adequately provide appropriate permanent housing for this highly vulnerable subpopulation with time-sensitive needs. This year's DV bonus project, if awarded funding, will further reduce the CoC's unmet need for DV-focused permanent housing resources by 13%.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.	
Applicant Name		
Volunteers of Ame...		

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2022 Priority Listing:

1.	Applicant Name	Volunteers of America of Los Angeles
2.	Project Name	2022 VOALA Rapid Rehousing for DV Survivors Expansion
3.	Project Rank on the Priority Listing	16
4.	Unique Entity Identifier (UEI)	DJM3CNDVQ2J8
5.	Amount Requested	\$203,752
6.	Rate of Housing Placement of DV Survivors—Percentage	69%
7.	Rate of Housing Retention of DV Survivors—Percentage	100%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. The rate of housing placement for the project applicant (4a-3b.1-element 6) was calculated by dividing the total number of RRH DV clients who successfully leased up by Volunteers of America Los Angeles' (VOALA) existing DV-RRH programs over the last 12 months (9/1/21-8/31/22) by the total number of DV survivors referred to the agency for RRH during the last 12 months. The rate of housing retention for DV survivors (4A-3b.1-element 7) was calculated by dividing the total number of DV survivors who remained in VOALA's existing DV-RRH programs or who exited to permanent housing over the last 12 months by the total number of participants in the VOALA's DV-RRH programs over the last 12 months.

2. Both of the calculated rates account for exits to safe housing destinations.

3. Data for 4A-4 was collected from a combination of de-identified data in HMIS and data in an HMIS comparable database (ServicePoint) for DV survivors.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;	
3.	determined which supportive services survivors needed;	
4.	connected survivors to supportive services; and	
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1. Volunteers of America Los Angeles' (VOALA's) past programs providing RRH for DV survivors experiencing homelessness have all operated in accordance with Housing First, by which program participants are assisted to secure permanent housing as quickly as possible. This is achieved by integrating housing-focused case management and housing navigation activities from each participant's initial enrollment through their program exit and post move-in stabilization period. VOALA maintains relationships with more than 100 local landlords, ensuring that participants can access housing units as they become available, and staff support participants by communicating and negotiating with landlords; reviewing leases; inspecting units; assisting with rental applications, & providing transportation assistance for appointments. VOALA's ability to move survivors quickly into safe affordable housing is evidenced in the outcomes of our previous programs, which include: RRH for DV: 95% of survivors secured permanent housing; Joint TH/RRH for DV: 60% of survivors secured permanent housing; HOPWA/VAWA: 83% of transitional housing participants secured permanent housing.

2. VOALA prioritized survivors by operating several housing programs that served exclusively survivors of DV and trafficking. Survivors were identified through CES, VOALA's 24/7 trafficking hotline, & DV/trafficking hotlines operated by House of Ruth & CAST.

3. VOALA determined which supportive services survivors need through ongoing, close communication during case management meetings & by administering CES assessment tools.

4. VOALA connected survivors to support services through CES & more than a dozen partner providers. Services available included healthcare, behavioral healthcare, SUD treatment, employment, education, legal services, & more. Referrals to services were made based on individual participant needs.

5. Part of the housing stabilization process used included supporting participants to increase their income (through benefits and/or employment) and helping them identify permanent housing that was affordable so it could be sustained beyond the RRH assistance. RRH assistance was frequently stepped down, allowing participants to gradually increase their share of the rent until they were able to sustain housing independently. Using a Critical Time Intervention approach, participants gradually took ownership of their housing stability using the resources they had been connected to.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	

- | | |
|----|--|
| 5. | taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality. |
|----|--|

(limit 2,500 characters)

Volunteers of America Los Angeles (VOALA) has ensured the safety & confidentiality of program participants by:

1. Taking steps to ensure privacy & confidentiality during the intake & interview process; all intakes were conducted in private offices with closing doors to ensure participants were able to have private conversations with intake staff in a comfortable environment;

2. Making determinations & placements into safe housing; when identifying permanent housing for survivors, Housing Navigators took into account survivor safety. Such considerations include placing a survivor into housing outside of the SPA in which they initially sought services, as well as maintaining the confidentiality of units into which participants were placed, to prevent stalking & further victimization by perpetrators. Staff worked with participants in safety planning, whereby participants laid out their concerns regarding personal safety. When participants have informed staff that their perpetrator lives in a given area, staff sought housing units outside of that area. Staff have sought housing units for participants above the ground floor to further limit access by perpetrators & ensure safety. Participants laid out resources available for them to seek safety including residences of family & friends, local churches, & other service providers. VOALA provides participants with additional linkages & referrals to such resources.

3. Keeping information & locations confidential; VOALA kept the location of all congregate living spaces serving survivors of DV or trafficking confidential, & kept the location of permanent housing units of survivors of DV & trafficking confidential as well;

4. Training staff on safety and confidentiality policies and practices; all direct service staff working in VOALA's programs serving survivors of DV received 40 hours of training on DV, including training on safety planning. Safety concerns were addressed through the use of the HMIS alternative data platform that protects participant privacy & safety, consideration of safety as a primary concern when identifying permanent housing units, & availability of legal assistance for survivors to assist them in securing protective orders & handling other legal concerns where needed; and

5. Taking security measures for units: VOALA ensured appropriate lighting, locking doors, security cameras, and other security features to ensure safety of participants at congregate living facilities.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
----------	---

NOFO Section II.B.11.e.(1)(d)

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

Volunteers of America Los Angeles (VOALA) has primarily evaluated its ability to ensure the safety of DV survivors in the existing SPA 3 RRH for DV pilot and SPA 3 Joint TH-RRH for DV project by tracking the number of survivors who reported a repeated incidence of DV/IPV during their time in the program. During regular case management meetings, VOALA staff engage in a thorough discussion with participants, according to their comfort level, to assess their feelings of safety; review their progress in meeting their goals and addressing their service needs; document any continued experiences of victimization or contact with their perpetrator; arrange relocation if necessary, and develop their individual safety plans and housing/service goals. For the proposed RRH for DV Bonus program, VOALA implements formalized evaluation processes by providing survey questionnaires and conducting interviews with participants upon program exit. Information collected through this process is reviewed by VOALA for continuous quality improvement.

Additionally, VOALA routinely reviews the housing residences of partner landlords to which DV survivor program participants are referred to ensure the security and safety of the housing. Staff will contact previous DV survivor program participants who have moved into a given residence to discuss and assess their experience and sense of safety. If there is a housing residence or landlord that is found to not provide adequate security and safety measures, VOALA will cease and refrain from referring DV survivor program participants to that residence or landlord. If issues are identified, VOALA program leadership will also review records and discuss with staff whether any error or oversight has occurred, and implement corrective action as necessary.

VOALA also continuously seeks to strengthen partnerships with fellow providers that meet the needs of program participants. This includes legal aid organizations that can assist program participants in filing restraining orders or taking other legal action to ensure their safety. Assisting program participants in this manner is encompassed by the state-mandated 40-Hour Domestic Violence Advocate Training undertaken by all VOALA staff working within programs that serve DV survivors. Program leadership will routinely review referrals and linkages made to such partners, and take action to establish new partnerships or strengthen existing partnerships as necessary.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
FY2022 CoC Application		Page 74
		09/29/2022

5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

Elements of Volunteers of America Los Angeles' (VOALA's) trauma-informed system of care included ongoing training in trauma for all staff and volunteers; use of trauma assessment tools; provision of trauma-specific services; integration of trauma-informed best practices; ensuring an environment that was physically & psychologically safe; and ensuring meaningful participation by staff & service recipients in the design/operation of the program.

VOALA's programs were specifically designed to include trauma-informed care approaches to serving all participants, including people with special needs. All direct-service staff underwent initial new-hire training during the onboarding process. This training covered a variety of topics, including a trauma-informed approach to services. Trauma-informed care was also incorporated into ongoing in-service training provided to VOALA staff.

1. Prioritizing participant choice and rapid placement/stabilization in permanent housing consistent with participants' preferences: VOALA involved participants in developing their own individualized plans/goals and in providing input on the services they accessed, thus ensuring that the participant was given a voice (something that is often taken away during traumatic & abusive experiences). Through VOALA's survivor-centric approach, we empowered survivors to tell us what services they needed, and their input was used to develop uniquely tailored individualized service plans & prioritize their case management efforts accordingly. Participant choice with regard to housing was paramount, and housing navigators worked with participants to seek out & identify a housing unit that met the participant's personal preferences & reflected any safety concerns shared by the participants (e.g. outside of an area frequented by their perpetrator & above the ground floor of the residence).

2. Establishing/maintaining an environment of agency and mutual respect: To support building relationships, VOALA took steps to ensure an environment of mutual respect, and staff were trained to treat all participants with respect and seek to minimize power differentials. VOALA did not use punitive interventions but instead sought to identify strategies to support participants in complying with the (minimal) program rules and supported participants in developing the skills and resources to maintain permanent housing and achieve well-being.

3. Providing participants access to information on trauma: Case managers provided participants with access to information on trauma, including printed information on trauma and strategies to cope with trauma, as well as referrals for more intensive behavioral health care and counseling for participants to receive support and continue to develop beyond their traumatic experiences.

4. Emphasizing participants' strengths: VOALA approached case management from a strengths-based approach, focusing on the strengths, resiliency, and potential of participants, rather than on their struggles, challenges, or past hurts. Assessment tools used included the CoC-provided CES Survey Packet for Adults, a strengths-based assessment. Case plans included an assessment of participants' strengths and included strategies to support participants in leveraging their strengths to work towards their self-identified goals.

5. Centering on cultural responsiveness & inclusivity: VOALA is highly committed to cultural responsiveness and inclusivity in all of our programming. VOALA maintains non-discrimination policies and practices that are designed to reflect a commitment to treating all staff and clients with respect and dignity. We

have a standing policy that applies to all of our programming that all persons accessing services will be identified by the gender identity they choose. Staff were trained upon hire and during monthly staff meetings in strategies to treat clients with respect, as well as on specific issues related to cultural competence, such as policies related to LGBTQ issues, respecting religious preferences, interacting with people with disabilities, respecting cultural/ethnic preferences, etc. We define culture broadly, not only as ethnicity/linguistic preferences but as relates to all cultural factors that influence the way a client prefers to be treated.

6. Providing opportunities for connection for program participants: Participants had access to opportunities for connection through VOALA-facilitated support groups, opportunities to be paired with a mentor, & linkages to community-based opportunities, including support connecting to faith-based communities as desired by the participant.

7. Offering support for parenting: VOALA offered life skills classes on parenting & provided parents with access to childcare and early childhood education through our Head Start & Early Head Start programs. Case Managers also supported parents in identifying and enrolling their children in the appropriate school.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.	

(limit 5,000 characters)

Through Volunteers of America Los Angeles' (VOALA's) existing RRH programs serving DV survivors, VOALA provided specific services and supports, including but not limited to:

Housing Search and Counseling: VOALA provided ongoing, housing-focused case management for DV survivor program participants, along with housing navigation and search support to assist DV survivors in locating and securing a long-term housing unit. VOALA drew upon our network of landlord relationships to identify housing units and advocate for their rental to DV survivor program participants.

Long-Term Housing Stability Safety Planning: Staff worked with participants in safety planning, whereby participants laid out their concerns regarding personal safety. When participants informed staff that their perpetrator lives in a given area, staff sought housing units outside of that area. Staff have sought housing units for participants above the ground floor to further limit access by perpetrators and ensure safety. Participants laid out resources available for them to seek safety including residences of family and friends, local churches, and other service providers. VOALA provides participants with additional linkages and referrals to such resources.

Crisis DV Services: VOALA operated a DV crisis helpline and provided trauma-informed support and services to DV survivors including emergency shelter, case management, linkages to supportive services, counseling, safety planning, housing navigation, and connections to legal aid providers for assistance with filing restraining orders or taking other legal action necessary to ensure their safety. For participants with children, VOALA provided guidance on registering their separation from their abuser with the state, to prevent children from coming under the custody of the abuser.

Child Custody: VOALA provided DV survivors with referrals to legal services providers (Neighborhood Legal Services) who provided assistance in navigating child custody issues. VOALA provided participants with transportation to meetings at the legal services provider as needed. VOALA ensured that participant safety needs were addressed by maintaining confidentiality and incorporating safety planning into the participant's Individual Housing Plan.

Legal Services: VOALA provided referrals to legal services through project partner Neighborhood Legal Services, who assisted participants with addressing any legal needs they had.

Criminal History: VOALA provided referrals to project partner Neighborhood Legal Services to address criminal history/opportunities for expungement. VOALA also connected participants to our existing programs serving re-entry individuals, including our Training to Work and Incarcerated Veterans Training Program, which provided employment and mentoring to assist individuals with a criminal history learn how to best present their criminal history to landlords and employers.

Bad Credit History: Participants were connected to financial literacy programs available through Clearpoint Credit Counseling for support with bad credit history and strategies to improve their credit.

Education: VOALA connected participants with education services through area

adult education programs and community colleges.

Job Training VOALA connected participants to job training through our internal programs (YouthBuild, Training to Work, HVRP) as well as through external partners.

Employment: VOALA has a cadre of Job Developers on staff through our YouthBuild, HVRP, and Training to Work programs, and leveraged these staff to provide job search and placement services for DV survivors served through our RRH for DV programs.

Physical/Mental Healthcare: VOALA connected participants to partner agencies (East Valley Community Health Center, Tri-City Mental Health, Pomona Health Clinic, NAMI) for physical and mental healthcare services.

Drug and Alcohol Treatment: VOALA connected participants to partner agencies (Prototypes, American Recovery Center, CHCADA) for drug and alcohol treatment.

Childcare: VOALA connected the children of participants served to childcare services through our Head Start/Early Head Start programs located across Los Angeles County, as well as provided assistance to parents in enrolling their children into school as appropriate.

While these services are readily available, participation is not required in order to access housing. Supportive services range from high to low touch, depending on individual needs. Services are available throughout each participant's time in the program.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(e)		
Provide examples in the field below of how the new project will:		
1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor-defined goals and aspirations;	
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

VOALA will provide trauma-informed care in the proposed RRH for DV Bonus program serving individuals who are homeless. Elements of our trauma-informed system of care include ongoing training in trauma for all staff and volunteers; use of trauma assessment tools; provision of trauma-specific services; ensuring an environment that is physically and psychologically safe; and ensuring meaningful participation by staff, service recipients and survivors in the design and operation of the program. Specifically, the proposed project will reflect the following elements of trauma-informed care:

1. Prioritizing participant choice: VOALA will involve program participants in developing their own case plans and goals, and in providing input on the services they will access, thus ensuring that the participant is given a voice (something that is often taken away during traumatic experiences). Through VOALA's survivor-centric approach, we will empower survivors to tell us what services they need, and their input will be used to develop uniquely tailored individualized service plans and prioritize their case management efforts accordingly. Participant choice with regard to housing is paramount, and Housing Navigators will work with participants to seek out and identify a housing unit that meets the participant's personal preferences.
2. Establishing and maintaining an environment of agency and mutual respect: To support building relationships, VOALA takes steps to ensure an environment of mutual respect, and staff are trained to treat all participants with respect and seek to minimize power differentials. VOALA does not use punitive interventions, instead seeking to identify strategies to support participants in complying with the (minimal) program rules and supporting participants in developing the skills and resources to maintain permanent housing.
3. Providing program participants access to information on trauma: Case Managers will provide participants with access to information on trauma, including printed information on trauma and strategies to cope with trauma, as well as referrals for more intensive behavioral health care for participants to learn to cope with their trauma. VOALA will also connect participants to individual or group counseling wherein they can learn and gain insight into the nature of trauma and develop personal coping strategies.
4. Placing emphasis on the participant's strengths: VOALA approaches case management from a strengths-based approach, focusing on the strengths/resiliency of participants, rather than on their struggles/past hurts. Assessment tools to be used will be the CoC-provided CES Survey Tool for Adults, which is a strengths-based assessment. Case plans will include an assessment of participants' strengths, and will include strategies to support participants in leveraging their strengths to work towards their self-identified goals.
5. Centering on cultural responsiveness and inclusivity: VOALA is highly committed to cultural responsiveness and inclusivity in all of our programming. VOALA maintains non-discrimination policies and practices that are designed to reflect a commitment to treating all staff and clients with respect and dignity. We have a standing policy that applies to all of our programming that all persons accessing services will be identified by the gender identity they choose. Staff are trained upon hire and during monthly staff meetings in strategies to treat clients with respect, as well as on specific issues related to cultural competence, such as policies related to LGBTQ issues, respecting religious

preferences, interacting with people with disabilities, respecting cultural/ethnic preferences, etc. We define culture broadly, not only as ethnicity/linguistic preferences but as relates to all cultural factors that influence the way a client prefers to be treated.

6. Delivering opportunities for connection for participants: Participants will have access to opportunities for connection through VOALA-facilitated or partner-facilitated support groups, the option to be paired with a mentor or participate in individual counseling, and linkages to opportunities for community-based connections including faith-based communities as desired by the participant. VOALA staff will work with each participant to identify what is individually meaningful for them and discuss opportunities for community connections based on their personal desires, needs, and interests.

7. Offering support for parenting: VOALA offers life skills classes on parenting and provides parents with access to childcare and early childhood education services through our Head Start and Early Head Start programs. Case Managers will also support parents in locating and enrolling their children in the appropriate school. VOALA will provide connections to legal aid organizations and services that can assist them in filing restraining orders or taking any necessary legal action.

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(f)	
<div>Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.</div>		

(limit 2,500 characters)

Volunteers of America Los Angeles (VOALA) will bring together participants in the RRH DV Bonus program to participate in house meetings wherein they will be encouraged to discuss, review, & provide thoughts/feedback on program & facility rules/policies. Staff will seek feedback/input from program participants during each stage as they move through the program toward permanent housing & exit. Prompts for feedback will include whether the participant has felt safe during a given stage of the program; whether they felt that their case manager & other staff provided services with a trauma-informed & survivor-centered approach; whether they felt that their service needs were being met successfully & they were being adequately supported to formulate & make progress toward their goals; and if they can provide suggestions for changes or improvements in the program's service provision/approach. VOALA will implement a formalized evaluation process by providing survey questionnaires & conducting interviews with participants upon program exit. Information collected through this process will be reviewed by VOALA for continuous quality improvement.

VOALA staff will seek out program participants belonging to particular subpopulations, or with particular lived experiences such as parenthood, chronic homelessness, substance use disorder, LGBTQ+, various cultural identities, & a range of other experiences, to garner insight into how the program can best support a participant who fits each of these criteria. This qualitative feedback/input will inform VOALA's provision of housing search & navigation support, along with supportive service linkages.

Staff will contact previous DV survivor program participants who have moved into a given residence to discuss & assess their experience & sense of safety. If there is a housing residence or landlord that is found to not provide adequate security & safety measures, VOALA will cease & refrain from referring DV survivor program participants to that residence or landlord. If issues are identified, VOALA program leadership will also review records & discuss with staff whether any error or oversight has occurred, & implement corrective action as necessary. VOALA will also seek participants' feedback to evaluate ongoing partnerships w/ service providers, & to guide the provision of referrals for health care services, legal aid, education support, counseling, substance use disorder recovery, & other service needs.

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4.	Attachments must match the questions they are associated with.
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6.	If you cannot read the attachment, it is likely we cannot read it either.
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
	. We must be able to read everything you want us to consider in any attachment.
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/27/2022
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/27/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/27/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/27/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Forms for ...	09/27/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/27/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/27/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Project Sco...	09/27/2022
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting—CoC-A...	09/28/2022
1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	09/28/2022
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/27/2022

Applicant: City of Pasadena-CoC

CA-607

Project: CA-607 CoC Registration FY 2022.

COC_REG_2022_191853

3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/28/2022
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for All Projects

Attachment Details

Document Description: Web Posting—CoC-Approved Consolidated Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/14/2022
1B. Inclusive Structure	09/29/2022
1C. Coordination and Engagement	09/29/2022
1D. Coordination and Engagement Cont'd	09/29/2022
1E. Project Review/Ranking	09/29/2022
2A. HMIS Implementation	09/29/2022
2B. Point-in-Time (PIT) Count	09/29/2022
2C. System Performance	09/29/2022
3A. Coordination with Housing and Healthcare	09/29/2022
3B. Rehabilitation/New Construction Costs	09/29/2022
3C. Serving Homeless Under Other Federal Statutes	09/29/2022

FY2022 CoC Application	Page 89	09/29/2022
------------------------	---------	------------

4A. DV Bonus Project Applicants	09/29/2022
4B. Attachments Screen	09/28/2022
Submission Summary	No Input Required

CHAPTER 4

ESTABLISHING PREFERENCES AND MAINTAINING THE WAITING LIST [24 CFR Part 5, Subpart D; 982.203; 982.204; 982.205; 982.207]

INTRODUCTION

This Chapter defines the eligibility criteria for local preferences which the CoPHD has adopted to meet local housing needs and explains the CoPHD's system of applying them. It is the CoPHD's objective to ensure that applicants are placed in the proper order on the waiting list so that an offer of assistance is not delayed to any applicant or made to any applicant prematurely.

By maintaining a waiting list, the CoPHD will be able to perform the activities which will ensure that an adequate pool of qualified applicants will be available so that program funds are used in a timely manner.

A. APPLICATION POOL

The waiting list will be maintained in accordance with the following guidelines:

1. The applications will be maintained in a database file.
2. All applicants in the pool will be maintained in the order of preference and date and time of the application.

The waiting list will contain the following information for each applicant:

1. Applicant name.
2. Family unit size (number of bedrooms for which family qualifies based on the occupancy standards).
3. Date and time of application.
4. Qualification of any local preferences.
5. Racial or ethnic designation of the head of household (for statistical purposes only).

The order of admission from the waiting list may not be based on family size or on the family unit size for which the family qualifies under the CoPHD occupancy policy. If the CoPHD does not have sufficient funds to subsidize the family unit size of the family at the top of the waiting list, the CoPHD may not skip the top family to admit an applicant with a smaller family unit size.

When HUD awards the CoPHD funding for a specified category of families on the waiting list, the CoPHD must select applicant families in the specified category. The CoPHD must use a single waiting list for admission to its Section 8 Tenant-Based Assistance Program (TBAP).

Special Admissions [24 CFR 982.203]

The CoPHD may admit an applicant that is not on the CoPHD waiting list or without considering the family's waiting list position when HUD awards program funding that is targeted for families living in specified units. The CoPHD will maintain records showing that the family was admitted with HUD-targeted assistance.

The CoPHD must use the assistance for the families living in these units.

The following are examples of types of program funding that may be targeted for a family living in a specified unit:

1. A family displaced because of demolition or disposition of a public or Indian housing project.
2. A family residing in a HUD-owned multi-family rental housing project when HUD sells, forecloses or demolishes the project.
3. For housing covered by the Low Income Housing Preservation and Resident Homeownership Act of 1990.
 - a. A non-purchasing family residing in a project subject to a homeownership program.
 - b. A family displaced because the mortgage prepayment or voluntary termination of a mortgage insurance contract.
 - c. A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the contract term; and
4. A non-purchasing family residing in a HOPE 1 or HOPE 2 Project.

Applicants who are admitted under targeted funding which are not identified as a Special Admission would be identified by codes in the automated system.

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

Persons placed on the waiting list in 2008 or 2014 will be assisted based on the preferences, points, and method of order that were in effect at the time of application, and as set forth in the 2018 and prior administrative plans.

The CoPHD will apply the following local preferences, and the associated preference points as assigned in Section G, to any applicants to a waiting list established in or after 2020:

1. **Residency preference** for applicants in which the family lives in the City of Pasadena, or the head of household or spouse is working or who has been notified that they are hired to work in the City of Pasadena, or the head or spouse is attending school in the City of Pasadena.
2. **Substandard housing preference** for applicants who are currently residing in substandard housing or experiencing homelessness (as described below).
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.

Preferences will be verified pursuant to the verification process outlined in Chapter 7 of this Plan, "Verification Procedures". Use of a residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family.

Residency Preference

Applicants who live, work or go to school within the City of Pasadena will be eligible for the residency preference. Qualification for this preference must be verified through provision of proof of residency, or proof that the head of household or spouse works, has been hired to work, or attends school in the City of Pasadena. Applicants experiencing homelessness within the City of Pasadena will be provided the residency preference. Homelessness must be verified by a Pasadena-based homelessness services agency.

Employment means regularly scheduled work for at least 15 hours per week. The following are acceptable forms of proof of employment in the City:

- Letter or documentation from the employer stating the applicant (head, spouse, or co-head) is employed on an ongoing basis (or includes a start date) in the City of Pasadena
- Paycheck stub with the employer's address showing the business is located in the City of Pasadena.

The following are acceptable forms of documentation of attending school in the City of Pasadena:

- Verification of the head of household or spouse's current, and at least half time enrollment in an educational institute located in the City of Pasadena in the form of a class schedule or transcript.

Substandard Housing

Applicants that qualify for the substandard housing preference are those whose dwelling meets one or more of the following criteria, provided that the family did not cause the condition, or are experiencing homelessness as defined below:

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 individual or family" will be provided the substandard housing preference. 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 public or private place not meant for human habitation;
 - b. a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
 - c. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
- Families who are residing with friends or relatives on a temporary basis are not considered homeless for the purposes of this preference.

Veteran Preference

The head of household or spouse is an active member of the U S Armed Forces, a U S Armed Forces veteran or surviving spouse of a U S Armed Forces veteran who has been honorably discharged.

Ex-spouses of veterans are not considered the surviving spouse.

E. LIMITED PREFERENCES

The CoPHD, in accordance with Notice PIH 2013-15, offers the following limited preferences for households exiting specific homeless programs:

Households exiting Rapid Rehousing programs: 10 Tenant-Based HCV

Households exiting non-PBV Permanent Supportive Housing: 5 Tenant-Based HCV

Households experiencing homelessness who are connected to Continuum of Care funded supportive services: 20 Tenant-Based HCV

Referrals for these limited preference vouchers will be from Pasadena-based homeless programs utilizing the SPA 3 Coordinated Entry System.

Referred households for any limited preference must meet the eligibility requirements for admission to the HCV program as outlined in Chapter 2 of this document.

F. PREFERENCE ELIGIBILITY

Change in Circumstances

Changes in an applicant's circumstances while on the waiting list may affect the family's preference eligibility. Applicants are required to notify the CoPHD in writing when their circumstances change.

When an applicant claims an additional preference, s/he will be placed on the waiting list in the appropriate order determined by the newly claimed preference.

G. ORDER OF SELECTION [24 CFR 982.207]

The order of selection is based on the CoPHD 's system for weighing preferences.

Local Preferences

Local preferences will be used to select families from the waiting list. The CoPHD has selected the following system to apply ranking preferences. All local preferences will be weighed as follows:

- | | | |
|----|-----------------------|---------|
| a. | Residency Preference: | 20 pts. |
| b. | Disabled Preference: | 5 pts |
| c. | Substandard Housing: | 5 pts |
| d. | Veteran's Preference: | 5 pts |

Among Applicants with Equal Preference Status

Among applicants with equal preference status, the waiting list will be organized by date and time that each application was submitted to the CoPHD.

H. FINAL VERIFICATION OF PREFERENCES

Preference information on applications will be updated as applicants are selected from the waiting list. At that time, applicants will be required to submit the appropriate documentation to support their claim of preference. In order to qualify for a preference, the documentation submitted by the applicant must support the claim for the preference as defined by HUD and/or the CoPHD.

An applicant will be disqualified if the applicant submitted false information on any previous occasion when claiming preferences.

I. PREFERENCE DENIAL

If the CoPHD denies a preference, the CoPHD will notify the applicant in writing of the reasons the preference was denied and offer the applicant an opportunity to request an informal review of the determination. If the preference denial is upheld as a result of the informal review, or the applicant does not request an informal review, the applicant will be placed on the waiting list without benefit of the preference. Applicants may exercise other rights if they believe they have been discriminated against.

J. REMOVAL FROM WAITING LIST [24 CFR 982.204(c)]

If an applicant fails to respond to a mailing from the CoPHD, the applicant will be mailed a second and final written notification and given 15 days to respond. If they fail to respond within the 15 days to the second notice, they will be removed from the waiting list. An extension will be considered as a reasonable accommodation if requested by a person with a disability within 15 days of receipt of the letter.

The CoPHD may also send notifications to applicants via email. The above mentioned process will apply when notification is sent via email. The applicant will have 7 days to respond to an email notification.

If a letter is returned by the Post Office with or without a forwarding address, the applicant will be removed without further notice and the envelope and letter will be maintained in the file. In the event that any correspondence is mailed for any purpose and is returned by the Post Office, the applicant will be removed from the waiting list. This policy will apply to all applicants effective 2013. Applicants will not be entitled to the grace period for misdirected mail due to the applicant's failure to report a change of address to the CoPHD. This procedure also applies when an applicant fails to correctly list their address on the application and/or any updates.

If an email is returned undeliverable due to an invalid address, the applicant's name will be removed from the waiting list without further notice. A copy of the email notifying CoPHD that the email was undeliverable will be maintained in the file. In the event any email is sent for any purpose and is returned undeliverable, the applicant's name will be removed from the waiting list. Applicants will not be given a grace period for misdirected mail.

If an applicant fails to honor the first scheduled appointment to come into the office and/or to submit requested documents, the CoPHD will schedule a final appointment. If the applicant fails to honor the final appointment, the applicant will be removed from the waiting list. The CoPHD may accommodate the applicant if the applicant can provide documentation of a legitimate reason for failure to attend (i.e., emergency, medical, disability, etc.).

If an applicant fails to attend the briefing session appointment, the application for rental assistance will be disqualified. However, a final appointment may be scheduled if the applicant can demonstrate a valid reason (i.e., medical, etc.) why they were unable to keep the briefing session appointment.

An applicant will be removed from the waiting list if the sole member listed on the application has passed away or is permanently residing in a convalescent home. In the event that the head of household passes away or resides in a convalescent home, the application will only be re-assigned if the original application lists an adult family member (who has not been previously removed from the application) other than the head of household. If the application reflects more than two adult family members, the family must select a new head of household. In the event that the family cannot decide, the CoPHD will then disqualify the application. If the sole member of the household is the live-in aide, the application will be canceled and removed from the waiting list. The CoPHD must be notified within 15 days when the head of household has passed away or is permanently residing in a convalescent home.

If the head of household is no longer interested in rental assistance and has provided a written statement to that affect, the application will be canceled and the applicant will be removed from the waiting list.

If the head of household requests to place the application on "HOLD", application will be cancelled and applicant will be removed from the waiting list.

K. CHANGES IN FAMILY CIRCUMSTANCES

Applicants will be required to report all changes in family circumstances within 15 days from the date of the change. All changes must be reported online. Changes reported in writing will not be accepted and will be returned to the applicant. It is the responsibility of the applicants to update their application when changes occur.

L. EXPIRATION OF THE WAITING LIST

The waiting list will be maintained until there are less than 200 Pasadena resident applicants or the current waiting list has been in place for more than 5 years. Applicants on the expiring waiting list will be notified that their application has expired and the CoPHD will re-open enrollment.

CHAPTER 4

ESTABLISHING PREFERENCES AND MAINTAINING THE WAITING LIST [24 CFR Part 5, Subpart D; 982.203; 982.204; 982.205; 982.207]

INTRODUCTION

This Chapter defines the eligibility criteria for local preferences which the CoPHD has adopted to meet local housing needs and explains the CoPHD's system of applying them. It is the CoPHD's objective to ensure that applicants are placed in the proper order on the waiting list so that an offer of assistance is not delayed to any applicant or made to any applicant prematurely.

By maintaining a waiting list, the CoPHD will be able to perform the activities which will ensure that an adequate pool of qualified applicants will be available so that program funds are used in a timely manner.

A. APPLICATION POOL

The waiting list will be maintained in accordance with the following guidelines:

1. The applications will be maintained in a database file.
2. All applicants in the pool will be maintained in the order of preference and date and time of the application.

The waiting list will contain the following information for each applicant:

1. Applicant name.
2. Family unit size (number of bedrooms for which family qualifies based on the occupancy standards).
3. Date and time of application.
4. Qualification of any local preferences.
5. Racial or ethnic designation of the head of household (for statistical purposes only).

The order of admission from the waiting list may not be based on family size or on the family unit size for which the family qualifies under the CoPHD occupancy policy. If the CoPHD does not have sufficient funds to subsidize the family unit size of the family at the top of the waiting list, the CoPHD may not skip the top family to admit an applicant with a smaller family unit size.

When HUD awards the CoPHD funding for a specified category of families on the waiting list, the CoPHD must select applicant families in the specified category. The CoPHD must use a single waiting list for admission to its Section 8 Tenant-Based Assistance Program (TBAP).

Special Admissions [24 CFR 982.203]

The CoPHD may admit an applicant that is not on the CoPHD waiting list or without considering the family's waiting list position when HUD awards program funding that is targeted for families living in specified units. The CoPHD will maintain records showing that the family was admitted with HUD-targeted assistance.

The CoPHD must use the assistance for the families living in these units.

The following are examples of types of program funding that may be targeted for a family living in a specified unit:

1. A family displaced because of demolition or disposition of a public or Indian housing project.
2. A family residing in a HUD-owned multi-family rental housing project when HUD sells, forecloses or demolishes the project.
3. For housing covered by the Low Income Housing Preservation and Resident Homeownership Act of 1990.
 - a. A non-purchasing family residing in a project subject to a homeownership program.
 - b. A family displaced because the mortgage prepayment or voluntary termination of a mortgage insurance contract.
 - c. A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the contract term; and
4. A non-purchasing family residing in a HOPE 1 or HOPE 2 Project.

Applicants who are admitted under targeted funding which are not identified as a Special Admission would be identified by codes in the automated system.

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

Persons placed on the waiting list in 2008 or 2014 will be assisted based on the preferences, points, and method of order that were in effect at the time of application, and as set forth in the 2018 and prior administrative plans.

The CoPHD will apply the following local preferences, and the associated preference points as assigned in Section G, to any applicants to a waiting list established in or after 2020:

1. **Residency preference** for applicants in which the family lives in the City of Pasadena, or the head of household or spouse is working or who has been notified that they are hired to work in the City of Pasadena, or the head or spouse is attending school in the City of Pasadena.
2. **Substandard housing preference** for applicants who are currently residing in substandard housing or experiencing homelessness (as described below).
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.

Preferences will be verified pursuant to the verification process outlined in Chapter 7 of this Plan, "Verification Procedures". Use of a residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family.

Residency Preference

Applicants who live, work or go to school within the City of Pasadena will be eligible for the residency preference. Qualification for this preference must be verified through provision of proof of residency, or proof that the head of household or spouse works, has been hired to work, or attends school in the City of Pasadena. Applicants experiencing homelessness within the City of Pasadena will be provided the residency preference. Homelessness must be verified by a Pasadena-based homelessness services agency.

Employment means regularly scheduled work for at least 15 hours per week. The following are acceptable forms of proof of employment in the City:

- Letter or documentation from the employer stating the applicant (head, spouse, or co-head) is employed on an ongoing basis (or includes a start date) in the City of Pasadena
- Paycheck stub with the employer's address showing the business is located in the City of Pasadena.

The following are acceptable forms of documentation of attending school in the City of Pasadena:

- Verification of the head of household or spouse's current, and at least half time enrollment in an educational institute located in the City of Pasadena in the form of a class schedule or transcript.

Substandard Housing

Applicants that qualify for the substandard housing preference are those whose dwelling meets one or more of the following criteria, provided that the family did not cause the condition, or are experiencing homelessness as defined below:

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 individual or family" will be provided the substandard housing preference. 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 public or private place not meant for human habitation;
 - b. a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
 - c. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
- Families who are residing with friends or relatives on a temporary basis are not considered homeless for the purposes of this preference.

Veteran Preference

The head of household or spouse is an active member of the U S Armed Forces, a U S Armed Forces veteran or surviving spouse of a U S Armed Forces veteran who has been honorably discharged.

Ex-spouses of veterans are not considered the surviving spouse.

E. LIMITED PREFERENCES

The CoPHD, in accordance with Notice PIH 2013-15, offers the following limited preferences for households exiting specific homeless programs:

Households exiting Rapid Rehousing programs: 10 Tenant-Based HCV

Households exiting non-PBV Permanent Supportive Housing: 5 Tenant-Based HCV

Households experiencing homelessness who are connected to Continuum of Care funded supportive services: 20 Tenant-Based HCV

Referrals for these limited preference vouchers will be from Pasadena-based homeless programs utilizing the SPA 3 Coordinated Entry System.

Referred households for any limited preference must meet the eligibility requirements for admission to the HCV program as outlined in Chapter 2 of this document.

F. PREFERENCE ELIGIBILITY

Change in Circumstances

Changes in an applicant's circumstances while on the waiting list may affect the family's preference eligibility. Applicants are required to notify the CoPHD in writing when their circumstances change.

When an applicant claims an additional preference, s/he will be placed on the waiting list in the appropriate order determined by the newly claimed preference.

G. ORDER OF SELECTION [24 CFR 982.207]

The order of selection is based on the CoPHD 's system for weighing preferences.

Local Preferences

Local preferences will be used to select families from the waiting list. The CoPHD has selected the following system to apply ranking preferences. All local preferences will be weighed as follows:

- | | | |
|----|-----------------------|---------|
| a. | Residency Preference: | 20 pts. |
| b. | Disabled Preference: | 5 pts |
| c. | Substandard Housing: | 5 pts |
| d. | Veteran's Preference: | 5 pts |

Among Applicants with Equal Preference Status

Among applicants with equal preference status, the waiting list will be organized by date and time that each application was submitted to the CoPHD.

H. FINAL VERIFICATION OF PREFERENCES

Preference information on applications will be updated as applicants are selected from the waiting list. At that time, applicants will be required to submit the appropriate documentation to support their claim of preference. In order to qualify for a preference, the documentation submitted by the applicant must support the claim for the preference as defined by HUD and/or the CoPHD.

An applicant will be disqualified if the applicant submitted false information on any previous occasion when claiming preferences.

I. PREFERENCE DENIAL

If the CoPHD denies a preference, the CoPHD will notify the applicant in writing of the reasons the preference was denied and offer the applicant an opportunity to request an informal review of the determination. If the preference denial is upheld as a result of the informal review, or the applicant does not request an informal review, the applicant will be placed on the waiting list without benefit of the preference. Applicants may exercise other rights if they believe they have been discriminated against.

J. REMOVAL FROM WAITING LIST [24 CFR 982.204(c)]

If an applicant fails to respond to a mailing from the CoPHD, the applicant will be mailed a second and final written notification and given 15 days to respond. If they fail to respond within the 15 days to the second notice, they will be removed from the waiting list. An extension will be considered as a reasonable accommodation if requested by a person with a disability within 15 days of receipt of the letter.

The CoPHD may also send notifications to applicants via email. The above mentioned process will apply when notification is sent via email. The applicant will have 7 days to respond to an email notification.

If a letter is returned by the Post Office with or without a forwarding address, the applicant will be removed without further notice and the envelope and letter will be maintained in the file. In the event that any correspondence is mailed for any purpose and is returned by the Post Office, the applicant will be removed from the waiting list. This policy will apply to all applicants effective 2013. Applicants will not be entitled to the grace period for misdirected mail due to the applicant's failure to report a change of address to the CoPHD. This procedure also applies when an applicant fails to correctly list their address on the application and/or any updates.

If an email is returned undeliverable due to an invalid address, the applicant's name will be removed from the waiting list without further notice. A copy of the email notifying CoPHD that the email was undeliverable will be maintained in the file. In the event any email is sent for any purpose and is returned undeliverable, the applicant's name will be removed from the waiting list. Applicants will not be given a grace period for misdirected mail.

If an applicant fails to honor the first scheduled appointment to come into the office and/or to submit requested documents, the CoPHD will schedule a final appointment. If the applicant fails to honor the final appointment, the applicant will be removed from the waiting list. The CoPHD may accommodate the applicant if the applicant can provide documentation of a legitimate reason for failure to attend (i.e., emergency, medical, disability, etc.).

If an applicant fails to attend the briefing session appointment, the application for rental assistance will be disqualified. However, a final appointment may be scheduled if the applicant can demonstrate a valid reason (i.e., medical, etc.) why they were unable to keep the briefing session appointment.

An applicant will be removed from the waiting list if the sole member listed on the application has passed away or is permanently residing in a convalescent home. In the event that the head of household passes away or resides in a convalescent home, the application will only be re-assigned if the original application lists an adult family member (who has not been previously removed from the application) other than the head of household. If the application reflects more than two adult family members, the family must select a new head of household. In the event that the family cannot decide, the CoPHD will then disqualify the application. If the sole member of the household is the live-in aide, the application will be canceled and removed from the waiting list. The CoPHD must be notified within 15 days when the head of household has passed away or is permanently residing in a convalescent home.

If the head of household is no longer interested in rental assistance and has provided a written statement to that affect, the application will be canceled and the applicant will be removed from the waiting list.

If the head of household requests to place the application on "HOLD", application will be cancelled and applicant will be removed from the waiting list.

K. CHANGES IN FAMILY CIRCUMSTANCES

Applicants will be required to report all changes in family circumstances within 15 days from the date of the change. All changes must be reported online. Changes reported in writing will not be accepted and will be returned to the applicant. It is the responsibility of the applicants to update their application when changes occur.

L. EXPIRATION OF THE WAITING LIST


The waiting list will be maintained until there are less than 200 Pasadena resident applicants or the current waiting list has been in place for more than 5 years. Applicants on the expiring waiting list will be notified that their application has expired and the CoPHD will re-open enrollment.

2022 CoC NOFO

HUD released the [Notice of Funding Opportunity \(NOFO\)](#) for the 2022 CoC Program Competition, FR-6600-N-25, on August 1, 2022, making available approximately \$2.79 billion to serve people experiencing homelessness nationwide. The information in the NOFO sets forth the competition rules and processes for the 2022 competition. Before the final application is submitted to HUD, the Pasadena CoC is required to hold a local competition to determine which projects will be included in the consolidated application, along with their ranked priority. The results of the local competition dictate which projects the CoC will include in the final application for funding.

Renewal projects must submit a renewal application by 5:00 p.m. PST on August 23, 2022 and all new projects must submit applications no later than 5:00 p.m. PST on August 31, 2022 to be considered for inclusion in the CoC application. Applications submitted after the corresponding deadline will not be considered for funding.


All applicants will be notified if their project was either accepted for inclusion in the CoC application or rejected in writing no later than September 15, 2022. All projects that are recommended for funding will be required to work with City staff to ensure all information is accurate and submitted in HUD's grant management system (eSnaps) before the application deadline.



Renewal Projects

CoC-funded projects that have been notified they are eligible for renewal in CoC competition can find more information about the process here.

[Learn More](#)



New Projects

New projects are created through both CoC Bonus and Reallocation funding during the program competition. Applicants interested in applying for eligible program types can find more information here.

[Learn More](#)



CoC Application

The CoC Application contains information on the CoC planning body, governance structure, overall performance, and strategic planning process. The CoC Consolidated Application is made up on the following three parts:

1. CoC Application
2. Project Applications
3. Priority Listing

[Learn More](#)



Renewal CoC Projects

Projects that were awarded Pasadena Continuum of Care (CoC) funding in the most recent competition are required to submit a renewal application to be included in the Pasadena CoC's Consolidated Application to HUD no later than **5:00 PST on August 23, 2022**. Recently awarded renewal projects that have not been in operation for a full year are exempt from this process and will be required to participate once the project has been operating for at least one year.

Renewal projects are evaluated annually using standardized evaluation criteria to determine how well they are performing and their ability to enhance the CoC's system performance.

Timeline

Renewal Projects Workshop
All renewal projects that have been operating for at least one full year will be required to attend the Renewal Projects Application Workshop on August 10, 2022 to review the application, evaluation criteria, and submission process.

Renewal Applications Due
All renewal applications are due by **5:00 PST August 23, 2022**. Renewal projects are required to submit a completed online application with all required attachments and requested information.

Evaluation Panel Review
An evaluation panel comprised of at least three (3) people will meet to review and score all renewal projects on August 31, 2022.

Preliminary Scores and Appeals
All renewal projects will be notified of their preliminary scores by September 1, 2022. Renewal projects will be given the opportunity to appeal the renewal application process in writing via email by 2:00 PST on September 6, 2022.

CoC Board Approval
The CoC Board will meet to approve

2022 Renewal Application

Renewal Project Application
Available as of August 8, 2022.
[Download](#)

PDF of Renewal Application
View the full PDF of the renewal application prior to submitting online.
Available as of August 8, 2022
[Download](#)

Renewal Applications Workshop Presentation
The renewal application workshop for renewal projects can be accessed here

Permanent Housing Renewal Projects Evaluation Criteria
Available as of August 8, 2022
[Download](#)

CES Renewal Project Evaluation Criteria
Available as of August 8, 2022
[Download](#)

HMIS Evaluation Criteria
Available as of August 8, 2022
[Download](#)

CoC New Projects - Pasadena Partnership

pasadenapartnership.org/coc-new-projects/

City Links Tyler Munis City of Pasadena -... Adobe Sign, an Ad... Login Ending Homelessne... Zoom Mywork Search | California S... ESG Regulations Housing and Urban... CoC Interim Rule Grantium™

Pasadena Partnership Solutions Resources For Providers Committees Homeless Count About Us


New CoC Projects

The Pasadena CoC actively encourages new and existing providers to apply for new or expansion projects through available Reallocation and/or Bonus funding during the CoC competition. All new projects must submit applications no later than 5:00 p.m. PST on August 31, 2022 to be considered for inclusion in the CoC application.

The U.S. Department of Housing and Urban Development (HUD) scores the annual CoC Program Consolidated Application that is submitted by the City of Pasadena Department of Housing (as the Collaborative Applicant for the CoC) and solely determines which projects (if any) are selected for funding. Projects that are selected for inclusion in the annual CoC application during the local competition are not guaranteed a contract award.

Request For New Project Applications (RFA)


On August 16, 2022 the Pasadena CoC will host a new project workshop. All interested applicants are strongly encouraged to attend the workshop to understand eligible project types and submit any questions. Important materials and resources for agencies interested in submitting an application can be found below.



Request for Applications for CoC Bonus and Reallocation

Available as of August 12, 2022.


Download



Request for Applications for DV Bonus Funding

Available as of August 12, 2022.


Download



Declaration of Intent to Apply

Due by August 19, 2022.

Download




New CoC Projects Application

Available as of August 12, 2022.

Download


Timeline



New Project Workshop


All interested applicants are encouraged to attend the New Project workshop via Zoom to review available funding opportunities at 10:30 a.m. PST on **August 16, 2022**.

Join Zoom Meeting
<https://us02web.zoom.us/j/87939635405?pwd=RGNZUC93TkR3OUdGQVJ4Y1JhZHh0UT09>
Meeting ID: 879 3963 5405
Passcode: 445868




Intent to Apply Submission Deadline

All applicants interested in applying for available bonus and/or reallocation funding are required to submit their intent to apply by **August 19, 2022**.



RFA Responses Due

All new project applications are due by **5:00 PST on August 31, 2022**. Applicants are required to submit an online application with all required attachments and requested information.



Evaluation Panel Review

Members of an evaluation panel will meet on September 8, 2022 to review and score all new project applications.

Trejo, Diana

From: Pasadena Partnership to End Homelessness <dtrejo+cityofpasadena.net@ccsend.com>
Sent: Friday, August 12, 2022 12:39 PM
To: Trejo, Diana
Subject: Now Open - Pasadena CoC Program Competition

CAUTION: This email was delivered from the Internet. Do not click links or open attachments unless you **know** the content is safe. Report phish using the Phish Alert Button. [Learn more...](#)



Pasadena Partnership

NOW OPEN
PASADENA'S 2022 CONTINUUM OF CARE COMPETITION

Official Opening of the Pasadena Continuum of Care Local Competition

Important Deadline: All new projects are due by **5:00 p.m. PST on August 31, 2022.**

PASADENA CONTINUUM OF CARE, 2022 COC COMPETITION - The U.S. Department of Urban Development (HUD) released the [Notice of Funding Opportunity \(NOFO\)](#) for the 2022 CoC Program Competition, on August 1, 2022, making available competitive funding to serve people experiencing homelessness nationwide. Pasadena's local competition for renewal projects opened earlier this week on August 8th and the competition for new projects is now officially open as of August 12, 2022.

Renewal projects must submit a renewal application by **5:00 p.m. PST on August 23, 2022** and all new projects must submit applications no later than **5:00 p.m. PST on August 31, 2022** to be considered for inclusion in the CoC application. Applications submitted after the corresponding deadline will not be considered for funding. All applicants will be notified if their project was either accepted for inclusion in the CoC application or rejected in writing no later than September 15, 2022. All projects that are recommended for funding will be required to work with City staff to ensure all information is accurate and submitted in HUD's grant management system (eSnaps) before the application deadline.

- **CoC Bonus Funding.** There is \$215,659 available for new projects created through CoC Bonus during the FY2022 competition. Permanent Housing programs (PSH or RRH) are the only eligible project types for CoC Bonus funding.

- **DV Bonus Funding.** There is \$174,085 available for new projects created through DV Bonus during the FY2022 competition. Rapid Rehousing (RRH) permanent housing programs are the only eligible project type for DV Bonus funding.
- **Reallocation Funding.** There is \$204,697 available for new projects created through reallocation. Permanent Housing programs (PSH or RRH) are the only eligible project types for Reallocation funding.
- **Bonus points.** Bonus points will be available for new projects that leverage housing resources not funded through CoC or ESG programs. Bonus points will also be available to new projects that leverage healthcare resources equivalent to at least 25% of the funding being requested and new DV-Bonus projects that partner with a victim-service provider.

[Download Reallocation/CoC Bonus RFA](#)

[Download DV Bonus RFA](#)

Pasadena Partnership Website

Please visit the Pasadena Partnership website for up-to-date information on the CoC's local competition and related materials. All updates related to the competition will be posted to this website: <https://pasadenapartnership.org/2022-coc-nofo/>.

Pasadena CoC New Projects Workshop

LOCATION

Zoom

DATE AND TIME

08/16/22 10:30am - 08/16/22 12:00pm

Join Zoom Meeting

<https://us02web.zoom.us/j/87939635405?pwd=RGNZUC93TkR3OUdGQVJ4Y1JhZHh0UT09>

Meeting ID: 879 3963 5405 Passcode: 445868

[I'll be there!](#)

[Maybe](#)



CoC Application

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.

Below is the CoC's Consolidated Application and Priority Listing that was submitted to HUD, as well as a list of all projects received during the local competition.

2022 Application



2022 CoC Application

To be posted by 5:00 p.m.
on 9/28/22



2022 Priority Listing

To be posted by 5:00 p.m.
on 9/28/22



2022 All Projects List

Posted September 27,
2022

About Us

The Pasadena Partnership is a collaborative funding and planning body that is committed to ending homelessness in

Contact Us

Your Name (required)



1

2022 Continuum of Care All Project List – Pasadena CoC

Project Name	Project Category	Project Score	Award Amount	Applicant	Rank
PROJECTS ACCEPTED					
Volunteers of America DV RRH	Renewal	N/A	\$270,817	Volunteers of America Los Angeles	1
Housing Works Home First Pasadena	Renewal	N/A	\$150,000	Housing Works	2
Centennial Place PSH Supportive Services (Reallocation)	New	131.7/140	\$204,697	Union Station Homeless Services	3
Step Up Reallocation	New	117.2/140	\$200,000	Step Up on Second, Inc.	4
HMIS	Renewal	47/50	\$225,378	City of Pasadena	5
Euclid Villa	Renewal	91.5/100	\$206,617	Union Station Homeless Services	6
Holly Street Housing	Renewal	89/100	\$1,100,958	Union Station Homeless Services	7
CoC Rental Assistance Consolidated	Renewal	78.5/97	\$301,812	City of Pasadena	8
CES	Renewal	84.75/100	\$124,423	Union Station Homeless Services	9
Navarro House	Renewal	84.25/100	\$46,226	Affordable Housing Services	10
Step Up PSH	Renewal	83.25/100	\$192,065	Step Up on Second, Inc.	11
Hestia House	Renewal	80.5/100	\$297,175	Uplift Family Services dba Pacific Clinics	12
Community Linkages DV-SSO	Renewal	80.5/100	\$144,511	Union Station Homeless Services	13
CoC Rental Assistance	Renewal	85/97	\$848,503	City of Pasadena	14
Centennial Place PSH Supportive Services (CoC Bonus)	New	132.3/140	\$215,659	Union Station Homeless Services	15
Volunteers of America DV Bonus	New	132.3/140	\$203,752	Volunteers of America Los Angeles	16
CoC Planning Project Application	New	N/A	\$129,359	City of Pasadena	N/A
PROJECTS REJECTED					
Shepherds Door DV Bonus	New	114.8/140	N/A	Shepherds Door Domestic Violence Resource Center	Rejected
Ascencia CoC Bonus	New	108/140	N/A	Ascencia	Rejected
Step Up CoC Bonus	New	119.5/140	N/A	Step Up on Second, Inc.	Rejected



2022 Continuum of Care All Project List – Pasadena CoC

Project Name	Project Category	Project Score	Award Amount	Applicant	Rank
PROJECTS ACCEPTED					
Volunteers of America DV RRH	Renewal	N/A	\$270,817	Volunteers of America Los Angeles	1
Housing Works Home First Pasadena	Renewal	N/A	\$150,000	Housing Works	2
Centennial Place PSH Supportive Services (Reallocation)	New	131.7/140	\$204,697	Union Station Homeless Services	3
Step Up Reallocation	New	117.2/140	\$200,000	Step Up on Second, Inc.	4
HMIS	Renewal	47/50	\$225,378	City of Pasadena	5
Euclid Villa	Renewal	91.5/100	\$206,617	Union Station Homeless Services	6
Holly Street Housing	Renewal	89/100	\$1,100,958	Union Station Homeless Services	7
CoC Rental Assistance Consolidated	Renewal	78.5/97	\$301,812	City of Pasadena	8
CES	Renewal	84.75/100	\$124,423	Union Station Homeless Services	9
Navarro House	Renewal	84.25/100	\$46,226	Affordable Housing Services	10
Step Up PSH	Renewal	83.25/100	\$192,065	Step Up on Second, Inc.	11
Hestia House	Renewal	80.5/100	\$297,175	Uplift Family Services dba Pacific Clinics	12
Community Linkages DV-SSO	Renewal	80.5/100	\$144,511	Union Station Homeless Services	13
CoC Rental Assistance	Renewal	85/97	\$848,503	City of Pasadena	14
Centennial Place PSH Supportive Services (CoC Bonus)	New	132.3/140	\$215,659	Union Station Homeless Services	15
Volunteers of America DV Bonus	New	132.3/140	\$203,752	Volunteers of America Los Angeles	16
CoC Planning Project Application	New	N/A	\$129,359	City of Pasadena	N/A
PROJECTS REJECTED					
Shepherds Door DV Bonus	New	114.8/140	N/A	Shepherds Door Domestic Violence Resource Center	Rejected
Ascencia CoC Bonus	New	108/140	N/A	Ascencia	Rejected
Step Up CoC Bonus	New	119.5/140	N/A	Step Up on Second, Inc.	Rejected

CoC Application - Pasadena Part

pasadenapartnership.org/coc-application/

City Links Tyler Munis City of Pasadena Adobe Sign, an Ad... Login Ending Homelessne... Zoom Mywork Search | California S... LII ESG Regulations Housing and Urban... CoC Interim Rule Grantium


 [Solutions](#) [Resources](#) [For Providers](#) [Committees](#) [Homeless Count](#) [About Us](#) 

CoC Application

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.


Below is the CoC's Consolidated Application and Priority Listing that was submitted to HUD, as well as a list of all projects received during the local competition.

2022 Application




2022 CoC Approved Application

Posted on September 28, 2022.
Final Version



2022 Priority Listing

Posted on September 28, 2022



2022 All Projects List

Posted September 27, 2022

[About Us](#) [Contact Us](#)

4:56 PM
9/28/2022

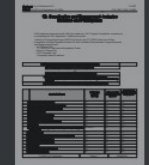
20



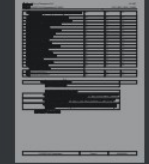
1



2



3



4

Applicant: City of Pasadena-CoC
Project: CA-607 CoC Registration FY 2022.

CA-607
COC_REG_2022_191853

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2022 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.
Answering Multi-Part Narrative Questions
Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments
Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.
- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

Trejo, Diana

From: Pasadena Partnership to End Homelessness <dtrejo+cityofpasadena.net@ccsend.com>
Sent: Wednesday, September 28, 2022 4:04 PM
To: Trejo, Diana
Subject: Now Posted - 2022 Pasadena CoC Application

CAUTION: This email was delivered from the Internet. Do not click links or open attachments unless you **know** the content is safe. Report phish using the Phish Alert Button. [Learn more...](#)



Pasadena Partnership

NOW POSTED
PASADENA'S 2022 CONTINUUM OF CARE COMPETITION

Official Posting of the Pasadena Continuum of Care Consolidated Application

PASADENA CONTINUUM OF CARE, 2022 COC APPLICATION - The Pasadena Continuum of Care (CoC) Program Consolidated Application is now publicly available at pasadenapartnership.org/coc-application. The City's Department of Housing will submit this application to the U.S. Department of Housing and Urban Development by 5:00 p.m. on September 30th.

Many thanks to all those who participated and assisted staff in putting this year's application together.

City of Pasadena | 649 N. Fair Oaks Ave, Suite 202, Pasadena, CA 91103

[Unsubscribe dtrejo@cityofpasadena.net](mailto:dtrejo@cityofpasadena.net)

[Update Profile](#) | [Constant Contact Data Notice](#)

Sent by dtrejo@cityofpasadena.net powered by



Try email marketing for free today!

Constant Contact

app.constantcontact.com/pages/campaigns/email-details/reporting/activity/365a316b-776b-4f4c-a358-8b9bd877adba

City LinksTyler MunisCity of Pasadena -...Adobe Sign, an Ad...LoginEnding Homelessne...ZoomMyworkSearch | California S...LII ESG RegulationsHousing and Urban...CoC Interim RuleGrantium™

CampaignsContactsReportingSign-up FormsWebsites & StoresSocialIntegrationsLibrary

866-289-2101Contact UsHelpDiana

Sent2022 CoC Application Posted

Copy

DetailsReporting

Email Performance

See how your emails are doing with your audience. [Compare your results to the industry average.](#)

Sent223

Open Rate5.9%

Click Rate1.4%

Opens	13	Clicks	3
Sent	223	Did Not Open	206
Bounces	4	Unsubscribed	0
Successful Deliveries	219	Spam Reports	0
Desktop Open Percentage	84.6%	Mobile Open Percentage	15.4%

Recommendations

Here are some things we think would help this campaign even more.

Social Share

Try sharing your email in a social post to get your message out there to a broader audience. It is a free post that says "I'm here!"

Create a Facebook Lead Ad

People want to connect with you! Start gathering their contact information from Facebook and Instagram.

Advertise on Google

Reach customers searching services like yours on Google for actual clicks.

Need Help? Let's Chat!

4:06 PM9/28/2022

20



cityofpasadena • Follow
Pasadena, California

cityofpasadena The Pasadena Continuum of Care (CoC) Program Consolidated Application is now publicly available. Click the link in our profile to view the application.

The City's Department of Housing will submit this application to the @hudgov by 5 p.m. on Sept. 30.

Many thanks to all those who participated and assisted staff in putting this year's application together.

9m

hiphopcavanilaa10 DM on @so.california_🇺🇸
4m Reply

3 likes
9 MINUTES AGO

Log in to like or comment.

More posts from cityofpasadena



City of Pasadena on Twitter: "[1/2] x +

twitter.com/PasadenaGov/status/1575257703311622145?ref_src=twsrc%5Egoogle%7Ctwcamp%5Eserp%7Ctwgr%5Etweet

City Links Tyler Munis City of Pasadena ~... Adobe Sign, an Ad... Login Ending Homelessne... Zoom Mywork Search | California S... LII ESG Regulations Housing and Urban... CoC Interim Rule Grantium™

Thread

City of Pasadena @PasadenaGov

[1/2] The Pasadena Continuum of Care (CoC) Program Consolidated Application is now publicly available: pasadenapartnership.org/coc-application. The City's Department of Housing will submit this application to @HUDgov by 5 p.m. on Sept. 30.

PASADENA DEPARTMENT OF HOUSING

Now POSTED

New to Twitter?

Sign up now to get your own personalized timeline!

Sign up with Google

Sign up with Apple

Sign up with phone or email

By signing up, you agree to the [Terms of Service](#) and [Privacy Policy](#), including [Cookie Use](#).

Relevant people

City of Pasadena @PasadenaGov Follow

City of Pasadena official Twitter page. Tweets do not = endorsement. For non-emergency City services, dial (626) 744-7311 or visit: bit.ly/PasadenaCSC

Department of Ho... @HUDgov Follow

Creating strong, sustainable, inclusive communities and quality affordable homes for all. Follow does not = endorsement

What's happening

Don't miss what's happening

People on Twitter are the first to know.

Log in Sign up



The Pasadena Continuum of Care (CoC) Program Consolidated Application is now publicly available:...

Like Comment Share

City of Pasadena - Public Agency 14m · [Follow](#)

The Pasadena Continuum of Care (CoC) Program Consolidated Application is now publicly available:
<http://pasadenapartnership.org/coc-application>

The City's Department of Housing will submit this application to the U.S. Department of Housing and Urban Development by 5 p.m. on Sept. 30.

Many thanks to all those who participated and assisted staff in putting this year's application together.

[See less](#)

Related Videos

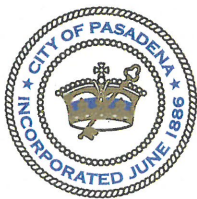


Home

Live

Explore

Shows



HOUSING DEPARTMENT

Anne Miskey
Chief Executive Officer
Union Station Homeless Services
825 E. Orange Grove Blvd.
Pasadena, CA 91104

RE: Written Housing Leverage Commitment for 2022 Pasadena Continuum of Care (CoC) Program

Dear Ms. Miskey,

The City of Pasadena Housing Department (CoPHD), as the Pasadena Public Housing Agency, is pleased to provide this written housing leverage commitment to support Union Station's 2022 Reallocation Centennial Place Permanent Supportive Housing (PSH) project funded through the Pasadena Continuum of Care program. We understand Union Station will use this funding to provide supportive services for up to 50 households. CoPHD has a commitment to provide 142 project-based HUD Section 8 vouchers to Centennial Place, of which an estimated 115 are currently being utilized and are available to support this project for the period of 09/01/2023 – 12/31/2024, or for the duration of the grant period. We value the opportunity to provide permanent housing assistance to the residents of Centennial Place and look forward to continuing to provide this assistance each year the grant is awarded by HUD.

This letter certifies that CoPHD will provide up to 142 project-based vouchers to Centennial Place. As a result, 100% of the 50 units that will be occupied by program participants will be subsidized through HUD's Section 8 program.

Sincerely,



Anne Lansing
Housing Assistance Officer



HOUSING DEPARTMENT

Anne Miskey
Chief Executive Officer
Union Station Homeless Services
825 E. Orange Grove Blvd.
Pasadena, CA 91104

RE: Written Commitment of Healthcare Resources for 2022 Pasadena Continuum of Care (CoC) Program

Dear Ms. Miskey,

The City of Pasadena Housing Department (CoPHD), as the Pasadena Public Housing Agency, is pleased to provide this written housing leverage commitment to support Union Station's 2022 CoC Bonus Centennial Place Permanent Supportive Housing (PSH) project funded through the Pasadena Continuum of Care program. We understand Union Station will use this funding to provide supportive services for up to 50 households. CoPHD has a commitment to provide 142 project-based HUD Section 8 vouchers to Centennial Place, of which an estimated 115 are currently being utilized and are available to support this project for the period of 09/01/2023 – 12/31/2024, or for the duration of the grant period. We value the opportunity to provide permanent housing assistance to the residents of Centennial Place and look forward to continuing to provide this assistance each year the grant is awarded by HUD.

This letter certifies that CoPHD will provide up to 142 project-based vouchers to Centennial Place. As a result, 100% of the 50 units that will be occupied by program participants will be subsidized through HUD's Section 8 program.

Sincerely,

Anne Lansing
Housing Assistance Officer



447 N. El Molino Ave.
Pasadena, CA 91101
(626) 577-8480
Fax (626) 577-8978

3600 Wilshire Blvd.
Suite 2200
Los Angeles, CA 90010
(213) 382-4400
Fax (213) 382-4494

43807 10th St. West
Suite D
Lancaster, CA 93534
(661) 575-9365
Fax (661) 575-9502

3939 Atlantic Ave.
Suite 103
Long Beach, CA 90807
(562) 264-6001
Fax (562) 264-6006

The Community Assistance
Program for Seniors
Alzheimer's Day Care Centers

3740 E. Sierra Madre Blvd.
Pasadena, CA 91107
(626) 351-5427
Fax (626) 351-2308

2501 E. Cortez St.
North Wing 14-16
West Covina, CA 91791
(626) 917-4484
Fax (626) 917-4475

Website

www.heritageclinic.org

a nonprofit agency

Anne Miskey
Chief Executive Officer
Union Station Homeless Services
825 E. Orange Grove Blvd.
Pasadena, CA 91104

RE: Written Commitment of Healthcare Resources for 2022 Pasadena Continuum of Care (CoC) Program

Dear Anne Miskey,

Heritage Clinic, a Pasadena-based mental health services provider, is pleased to provide this written commitment for healthcare resources to support Union Station's 2022 Reallocation Centennial Place Permanent Supportive Housing (PSH) project funded through the Pasadena Continuum of Care program. We understand Union Station's reallocation application will be for the total amount of \$204,697. The commitment to this project is approved for the period of 09/01/2023 – 12/31/2024, or for the duration of the grant period. We value the opportunity to provide healthcare services to the residents of Centennial Place and look forward to continuing to provide these services throughout the grant term.

This letter certifies that Heritage Clinic will provide mental health services to at least eight (8) residents of Centennial Place Permanent Supportive Housing at the approximate rate of \$19,593 per client, per year. The total annual value of this service is approximately \$156,748, over 25 percent of the total funding being requested by the project, and will be available each year the grant is awarded by HUD.

Sincerely,

Vatche Kelartinian, MBA
Heritage Clinic, CEO



Anne Miskey
Chief Executive Officer
Union Station Homeless Services
825 E. Orange Grove Blvd.
Pasadena, CA 91104

RE: Written Commitment of Healthcare Resources for 2022 Pasadena Continuum of Care (CoC) Program

Dear Anne Miskey,

Community Health Alliance of Pasadena (ChapCare), a San Gabriel Valley-based Federally Qualified Health Center, is pleased to provide this written commitment for healthcare resources to support Union Station's 2022 Reallocation Centennial Place Permanent Supportive Housing (PSH) project funded through the Pasadena Continuum of Care program. We understand Union Station's reallocation application will be for the total amount of \$204,697. The commitment to this project is approved for the period of 09/01/2023 – 12/31/2024, or for the duration of the grant period. We value the opportunity to provide healthcare services to the residents of Centennial Place and look forward to continuing to provide these services throughout the grant term.

This letter certifies that ChapCare will provide primary medical care to at least 60 residents of Centennial Place Permanent Supportive Housing at the approximate rate of \$500 per client, per year. The total annual value of this service is approximately \$30,000 and will be available each year the grant is awarded by HUD.

Sincerely,

Margaret B. Martinez, MPH
Chief Executive Officer



447 N. El Molino Ave.
Pasadena, CA 91101
(626) 577-8480
Fax (626) 577-8978

3600 Wilshire Blvd.
Suite 2200
Los Angeles, CA 90010
(213) 382-4400
Fax (213) 382-4494

43807 10th St. West
Suite D
Lancaster, CA 93534
(661) 575-9365
Fax (661) 575-9502

3939 Atlantic Ave.
Suite 103
Long Beach, CA 90807
(562) 264-6001
Fax (562) 264-6006

The Community Assistance
Program for Seniors
Alzheimer's Day Care Centers

3740 E. Sierra Madre Blvd.
Pasadena, CA 91107
(626) 351-5427
Fax (626) 351-2308

2501 E. Cortez St.
North Wing 14-16
West Covina, CA 91791
(626) 917-4484
Fax (626) 917-4475

Website

www.heritageclinic.org

a nonprofit agency

Anne Miskey
Chief Executive Officer
Union Station Homeless Services
825 E. Orange Grove Blvd.
Pasadena, CA 91104

RE: Written Commitment of Healthcare Resources for 2022 Pasadena Continuum of Care (CoC) Program

Dear Anne Miskey,

Heritage Clinic, a Pasadena-based mental health services provider, is pleased to provide this written commitment for healthcare resources to support Union Station's 2022 CoC Bonus Centennial Place Permanent Supportive Housing (PSH) project funded through the Pasadena Continuum of Care program. We understand Union Station's CoC Bonus application will be for the total amount of \$215,659. The commitment to this project is approved for the period of 09/01/2023 – 12/31/2024, or for the duration of the grant period. We value the opportunity to provide healthcare services to the residents of Centennial Place and look forward to continuing to provide these services throughout the grant term.

This letter certifies that Heritage Clinic will provide mental health services to at least eight (8) residents of Centennial Place Permanent Supportive Housing at the approximate rate of \$19,593 per client, per year. The total annual value of this service is approximately \$156,748, over 25 percent of the total funding being requested by the project, and will be available each year the grant is awarded by HUD.

Sincerely,

Vatche Kelartinian, MBA
Heritage Clinic, CEO



Anne Miskey
Chief Executive Officer
Union Station Homeless Services
825 E. Orange Grove Blvd.
Pasadena, CA 91104

RE: Written Commitment of Healthcare Resources for 2022 Pasadena Continuum of Care (CoC) Program

Dear Anne Miskey,

Community Health Alliance of Pasadena (ChapCare), a San Gabriel Valley-based Federally Qualified Health Center, is pleased to provide this written commitment for healthcare resources to support Union Station's 2022 CoC Bonus Centennial Place Permanent Supportive Housing (PSH) project funded through the Pasadena Continuum of Care program. We understand Union Station's CoC Bonus application will be for the total amount of \$215,659. The commitment to this project is approved for the period of 09/01/2023 – 12/31/2024, or for the duration of the grant period. We value the opportunity to provide healthcare services to the residents of Centennial Place and look forward to continuing to provide these services throughout the grant term.

This letter certifies that ChapCare will provide primary medical care to at least 60 residents of Centennial Place Permanent Supportive Housing at the approximate rate of \$500 per client, per year. The total annual value of this service is approximately \$30,000 and will be available each year the grant is awarded by HUD.

Sincerely,

Margaret B. Martinez, MPH
Chief Executive Officer