

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 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 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 2021 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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: CO-504 - Colorado Springs/El Paso County CoC

1A-2. Collaborative Applicant Name: Community Health Partnership

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Community Health Partnership

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

In the chart below for the period from May 1, 2020 to April 30, 2021:

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 of 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.	CoC-Funded Victim Service Providers	Yes	Yes	Yes
5.	CoC-Funded Youth Homeless Organizations	Yes	Yes	Yes
6.	Disability Advocates	Yes	Yes	Yes
7.	Disability Service Organizations	Yes	Yes	Yes
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
10.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
11.	Hospital(s)	Yes	Yes	No
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
13.	Law Enforcement	Yes	Yes	No
14.	Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	Yes
15.	LGBT Service Organizations	Yes	Yes	Yes
16.	Local Government Staff/Officials	Yes	Yes	Yes
17.	Local Jail(s)	Yes	Yes	No
18.	Mental Health Service Organizations	Yes	Yes	Yes

19.	Mental Illness Advocates	Yes	Yes	Yes
20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	No
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
23.	Organizations led by and serving LGBT persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	Yes	No
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	Yes	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.	Local VA	Yes	Yes	Yes
34.	Local SSVF Providers	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 the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).

(limit 2,000 characters)

Per the PPCoC Governance Charter, membership in the PPCoC is open to all stakeholders in El Paso County including and not limited to nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, and persons with lived/living homeless experience. The application to join is open year-round and available on the CHP website. At a minimum, once per year a formal invitation to apply is sent to the community using an email Listserv consisting of over 450 emails. This Listserv known as the Coalition for Homeless Advocates or Providers or CHAP, holds monthly membership meetings. Membership solicitation occurs at monthly CHAP meetings, as appropriate when networking occurs, and at bi-annual CoC membership meetings. CHAP meetings have been held and advertised virtually since the beginning of the COVID-19 pandemic, however, the meetings were held at the Marian House Soup Kitchen. Once local ordinances allow for larger gatherings, there are discussions to return to in-person CHAP meetings to make the meetings more accessible to persons with disabilities and with lived/living experience who may have more challenges navigating virtual meetings. Current attendees at CHAP and PPCoC Members consist of persons

experiencing homelessness, disabling conditions, and a diversity of cultural backgrounds all of whom are encouraged to apply for membership. The PPCoC actively works with the Colorado Springs Human Relations Commission to reach underserved populations overrepresented in the PPCoC homeless populations including Hispanic, Latin-x, or Latino, Black, African American, or African, and American Indian/Alaskan Native, or Indigenous. The PPCoC recently held a free community event at a public library in Southeast Colorado Springs to speak to the issues of BIPOC people experiencing homelessness including data noting the disparities in racial equity in the homeless population versus the county census racial composition.

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 2,000 characters)

The PPCoC welcomes any community member or organization that is interested in reducing/end homelessness to participate in bi-annual general CoC membership meetings. Members are encouraged to participate in the monthly CHAP meetings. CHAP is an open and flexible forum for service providers and citizens working together to identify needs and priorities related to coordination of services for people at risk of or are experience homelessness in El Paso County. 40 people regularly attend CHAP monthly meetings and provide input and feedback on CoC issues and learn about available services in the community. The PPCoC uses Listservs to share general information related to homelessness, announce meetings, distribute reports, and solicit membership and participations in PPCoC activities. In addition, the PPCoC participates in listening sessions with the City of Colorado Springs and El Paso County when input is sought from the public about homelessness and affordable housing.

To ensure that individuals with disabilities and people who are currently homeless are aware of, and can access information about upcoming CoC meetings, information is printed and posted by local homeless service providers, handed out by street outreach and shelter case managers to clients and staff, sent out virtually to a Listserv of over 450 emails, posted on the City's and CHP's website.

The PPCoC is in a 30-day public comment period for a new 3-year strategic plan. The PPCoC has held two events to advertise the CoC Strategic Plan to receive public feedback on the PPCoC goals of making homelessness rare, brief, and nonrecurring in the geographic region. Input has been sought from people with lived and living experience and disproportionately served racial populations. Strategic Plan input has been made accessible through an online feedback webpage on CHP's website.

1B-4.	Public Notification for Proposals from Organizations Not Previously Funded.	
	NOFO Section VII.B.1.a.(4)	

	Describe in the field below how your CoC notified the public:
1.	that your CoC's local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,000 characters)

The PPCoC posts on the CHP website, utilizes public meetings and uses email distribution lists to make announcements regarding CoC Competition NOFO funding. The email Listserv contains contact information for over 450 local service providers, citizens, government entities, persons with lived experience, and advocates who are all interested in ending homelessness in El Paso County. In each of the formats used to announce the CoC Program Competitions, the PPCoC encourages new applicants to apply. On August 27, 2021, the PPCoC announced that the Fiscal Year 2021 CoC NOFO Program Competition was announced by HUD on August 18, 2021. CHP released a request for letters of intent (LOI) on August 27th for new applications. LOIs were due on September 10, 2021. The request for LOIs and announcement included links to the HUD Exchange FY2021 NOFO Competition webpage and the full NOFO application. Additionally, CHP created a webpage on their website to track announcements and important documents needed for applying. CoC renewal projects were also notified about the CoC NOFO and informed the PPCoC of their decision to renew funds by September 8, 2021.

Each LOI returned to the PPCoC for new project applications was considered by the CoC Ranking and Prioritization Committee with a checklist on whether the proposed project met thresholds to apply for funding. Any project which met threshold was formally invited to apply on September 15, 2021. The PPCoC posted their first NOFO application timeline on September 2, 2021, to help new and renewal applicants follow required timelines. The PPCoC welcomes and encourages anyone to come forward with circumstances which would require accessibility or removal of barriers in applying for CoC funding due to disability. Information is shared electronically via email and posted online on the CHP website which has been reviewed by the local lead disability provider for accessibility.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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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 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 LGBT 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)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.	Military veteran organizations	Yes
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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 2,000 characters)

The PPCoC and CHP work closely with the City of Colorado Springs (City) and Colorado Department of Local Affairs (DOLA) on their awarded Emergency Solution Grants (ESG) to address homeless and housing issues. CHP, as the CoC lead, became a direct fiscal agent awardee for ESG and ESG-CV funds to bring additional homeless prevention and rapid re-housing funds into the geographic region. PPCoC Governing Board has presented directly to both the City and El Paso County Community Development Divisions' (CDD) on ESG planning and allocation including the Executive Committee meeting with El Paso County's CDD to provide feedback on the consolidated plan and to City Leadership during City virtual feedback sessions for ESG and Community Development Block Grant funds.

Furthermore, CHP, as the HMIS Lead, conducted all the required ESG-CV reporting requirements through HMIS to be submitted through combined quarterly, cumulatively, and final CAPER reporting in SAGE. This reporting includes data evaluation and report technical assistance to all awarded ESG- and ESG-CV recipients in the PPCoC including emergency shelter, street outreach, homeless prevention, rapid re-housing, and temporary emergency shelter funds. CHP, in collaboration with the City and the County Public Health, led the establishment of a temporary emergency shelter for homeless people with COVID symptoms or who tested positive from COVID presenting at hospitals, emergency shelters, and unsheltered in the community.

Additionally, the PPCoC presents the PIT and HIC reporting directly to the CoC Board and community to inform decision making on funding gaps in the community in creating a Consolidated Plan. CHP and the City completed two HUD technical assistance trainings last year on planning for winter shelter during COVID and on the Coordinated Investment Planning to conduct a financial gap analysis of ESG and CoC funds in the community to identify fund gaps and allocate funds accordingly.

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 gender:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
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)	

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, Local Liaisons & State Coordinators.	
	NOFO Section VII.B.1.d.	

Describe in the field below:

1.	how your CoC collaborates with youth education providers;
2.	your CoC's formal partnerships with youth education providers;
3.	how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4.	your CoC's formal partnerships with SEAs and LEAs;
5.	how your CoC collaborates with school districts; and
6.	your CoC's formal partnerships with school districts.

(limit 2,000 characters)

There are 17 school districts in the geographic region representing a diversity of families and students. The PPCoC partners with the Colorado Department of Education on the annual McKinney Vento (MKV) numbers to give additional context to the federal reporting the PPCoC does on PIT and HIC. MKV help explain how homeless and at risk of homeless families and runaway youth are able to be counted in the PPCoC. The additional MKV numbers, which track different definitions of homelessness, helps the PPCoC understand how homelessness extends beyond emergency shelters and unsheltered homelessness including counting families and youth experiencing a housing crisis for those who are doubled up and couch surfing in unstable housing situations. For the 2019-2020 academic calendar year, El Paso County reported a total of 1,981 families who were experiencing a housing crisis and were homeless based on McKinney Vento definitions of homelessness. Those definitions include shelter/transitional housing/awaiting foster care placement (252), doubled up (1,238), unsheltered (114), and staying in hotels/motels (377).

The PPCoC attends monthly meetings with the Reach Collaborative Management Program of El Paso County, who conducts monthly trainings for MKV Liaisons representing all the school districts of El Paso County. The trainings consists of discussing current funding opportunities and changes in state legislations impacting counseling and homeless services.

1C-4a.	CoC Collaboration Related to Children and Youth—Educational Services—Informing Individuals and Families Experiencing Homelessness about Eligibility.	
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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 2,000 characters)

There are 17 school districts in the geographic region representing a diversity of families and student bodies. The PPCoC Board of Directors including two Board members who work in the education field at the collegiate and the secondary levels. The PPCoC Board has plans to expand access to Coordinated Entry and partner directly with school districts on HMIS use. Conversations are ongoing and consist of identifying appropriate access points for the community's housing need assessment at school districts reporting high levels of housing instability among their student body and families. Access points must comply with local education laws and requirements and cannot be seen as solicitation.

This past year, CHP, as the CoC Lead agency, conducted in-person training with all the teachers and caregivers of the county's CPCD Head Start program to inform educators on how to connect families with young children to emergency shelter, financial, and housing assistance. CHP shared training on connecting for the community's housing needs assessment and are in conversations to expand access points for the housing needs assessment within school districts and head start providers in the geographic region. In addition, CHP hosted and facilitated two virtual training conversations with the school districts' MKV Liaisons in the 2020-2021 academic year. CHP is working with the school districts to restart training and update meetings with MKV Liaisons during the current academic year.

1C-4b. CoC Collaboration Related to Children and Youth—Educational Services—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	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	No	No
4.	Early Head Start	No	No
5.	Federal Home Visiting Program—(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	No	No
7.	Healthy Start	No	No
8.	Public Pre-K	No	No
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—Annual Training—Best Practices.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:

1.	Project staff that addresses safety and 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 safety and 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 2,000 characters)

TESSA, the region's largest domestic violence agency, provides emergency assistance to families in imminent danger as a result of domestic violence. TESSA provides comprehensive Victim Advocacy confidentiality training 3 times per year and other training as requested. Partner agencies of the PPCoC and Coordinated Entry (CE) staff are required to attend at least one DV training annually. PPCoC staff has coordinated a domestic violence/sexual assault awareness class taught by an organization representative from TESSA. The training provided local service providers with trauma-informed, victim-centered information, and how to develop safety plans with victims. The training also provided resources for providers to give to any participant who has experienced domestic violence or sexual assault. Additionally topics of training provided by TESSA include Dynamics of DVSA, recognizing trauma, trauma-informed care, best practices for working with victims, and identifying high lethality.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

Domestic violence providers, including the largest in the region TESSA, utilize comparable databases to report aggregate data for HUD required reporting. TESSA uses EmpowerDB for their former CoC- and ESG-funds to create the de-identified aggregate data requirements necessary for APR and CAPER reporting to HUD on domestic violence, dating violence, sexual assault, and stalking survivors. TESSA also reports annual bed counts to the PPCoC for the Housing Inventory Count (HIC) and Point In Time (PIT) reports. On the 2021 HIC and PIT reports, the PPCoC reported a transitional housing program of TESSA's that had not previously been reported, which raised the transitional housing bed inventory for the region more than 100 report TH beds. Additional data provided by TESSA and local law enforcement agencies indicates that only 25% of DV and sexual assault victims are reporting the crimes. Based on this information, the PPCoC recognizes that services and resources needs for DV/SA survivors are likely much greater than currently indicated. In addition, with new DV Bonus funds being announced in the 2021 CoC

Competition, the PPCoC recruited new DV providers to apply for funds through the Letter of Intent and local competition process. This brought in two DV providers for consideration of CoC DV Bonus funds, Haseya Red Wind and Kingdom Builders Family Life Center. Both agencies specialize their DV services through TH to support overrepresented racial marginalized DV fleeing populations especially in the Black/African America/African and Indigenous/Alaskan Native/American Indian DV communities. Both will be applying for new joint TH-RRH projects in the community. Aggregate data from these two projects will help the PPCoC further understand the extent of DV needs in the region.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Coordinated Assessment—Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1.	prioritize safety;
2.	use emergency transfer plan; and
3.	ensure confidentiality.

(limit 2,000 characters)

The PPCoC has specific Coordinated Entry policies and procedures related to safety planning and domestic violence. If a participant seeks domestic violence or safety planning services, victim service providers (VSP) use their own specialized coordinated entry process regarding CoC housing services and other supportive services managed by that provider. Access to Domestic Violence services will be provided in a low-barrier approach to allow homeless person(s) in need of safety planning to access DV housing services safely and confidentially through a comparable CE process used by VSPs. In addition, homeless persons who are fleeing DV may be considered in the weekly Case Conferencing meetings through CE by a process that allows the participants housing needs assessment and de-identified information to be added to the CE By Name List with an assigned client ID that is specific to the referring VSP. Any housing referrals that are matched to DV referred participant will be shared exclusively to the VSP for follow up.

All information exchange occurs electronically via email through email encryption software.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender—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 LGBT 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)?	No
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	No

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> 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 2020 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?
Colorado Springs Housing Authority	0%	No	No
Colorado Department of Local Affairs	100%	Yes-HCV	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 2,000 characters)

The El Paso County Housing Authority is a non-traditional housing authority and does not provide any type of housing vouchers or programs, therefore, they do not have a written policy for homeless admission preference. The Executive Director of the El Paso County Housing Authority and Economic Development Division is an ex-officio member of the PPCoC Board of Directors. Including this position on the PPCoC Board ensures that the County is aware of available resources and challenges impacting people experiencing homelessness, creates buy-in and understanding of CoC needs, and also helps inform the County's Consolidated Plan and spending of CDBG funding.

The Colorado Springs Housing Authority (CSHA) has not adopted a homeless admission preference; however, the Associate Director for the CSHA has joined the PPCoC Board as an ex-officio member. The CSHA has several housing projects, including Emergency Housing Vouchers (EHV), project-based housing choice vouchers, and a CoC-funded housing project that has preference for homeless households and receives referrals through the PPCoC Coordinated Entry System. The CSHA administers vouchers for a Veteran Shelter Plus Care CoC-funded project, two site-based chronic homeless housing projects including one for homeless veterans and created a Memorandum of Understanding with the PPCoC for their EHV's. The CSHA sought input and recommendations from the CoC Board on taking on the EHV's initially and upon recommendations from the PPCoC, chose to accept all 101 EHV's offered by HUD through the American Rescue Plan Act.

Lastly, the PPCoC works with the Colorado Department of Local Affairs (DOLA), who acts as a statewide housing authority and has written policies to show preference for homeless households. DOLA has also provided housing choice vouchers for a site-based permanent supportive housing project that has chronic homeless requirements for referrals and are referred through the PPCoC Coordinated Entry.

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

1C-7c.	Including PHA-Funded Units in Your CoC's Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	Yes
--	-----

1C-7c.1.	Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

If you selected yes in question 1C-7c., describe in the field below:

1.	how your CoC includes the units in its Coordinated Entry process; and
2.	whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.

(limit 2,000 characters)

The PPCoC has two public housing authorities who contribute housing choice vouchers through the PPCoC Coordinated Entry System (CES): the Colorado Springs Housing Authority (CSHA) and the Colorado Department of Local Affairs (DOLA). Both administer vouchers for two permanent supportive housing (PSH) projects in the community: Greenway Flats and Freedom Springs. Greenway Flats is a 65-unit PSH site-based project in Colorado Springs specific to chronic, individual adults experiencing homelessness. CES is responsible for referring 30 of the units from DOLA's Housing Choice Voucher program. CES identifies individual adults with the highest vulnerabilities for consideration. Freedom Spring is a 50-unit PSH site-based project in El Paso County that is

specific to chronically homeless veterans. Half of the units have HUD-VASH vouchers from the VA and the other half are Housing Choice Vouchers from the CSHA. All units are referred through CES for Freedom Springs in partnership with the CSHA, VA, and the two local Supportive Service for Veteran Family (SSVF) providers. Both PSH site-based projects have fully executed MOU agreements with the PPCoC for accepting referrals exclusively from CES. In addition, the PPCoC has entered into MOUs with the CSHA and DOLA for the incoming Emergency Housing Vouchers (EHV) made available through the American Rescue Plan Act. The CSHA has 101 vouchers assigned to the PPCoC, while DOLA has 34 EHV's. Both MOUs indicate that all referrals are required to go through CES and will be referred through the traditional case conferencing process facilitated by the PPCoC Coordinated Entry Administrator. Lastly, both DOLA and the CSHA have CoC-funded projects that are required to accept referrals through CES. Both projects are up for renewal funds and have been continued over time due to their compliance with accepting referrals for chronically homeless individuals, youths, and families for their PSH openings.

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

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	No
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1C-7d.1.	CoC and PHA Joint Application—Experience—Benefits.	
	NOFO Section VII.B.1.g.	

If you selected yes to question 1C-7d, describe in the field below:

1.	the type of joint project applied for;
2.	whether the application was approved; and
3.	how your CoC and families experiencing homelessness benefited from the coordination.

(limit 2,000 characters)

N/A

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	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
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1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program—List of PHAs with MOUs.	
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Not Scored—For Information Only

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?

Yes

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA

Colorado Springs ...

Colorado Departme...

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

Name of PHA: Colorado Springs Housing Authority

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

Name of PHA: Colorado Department of Local Affairs

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	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	No
3. Mental Health Care	No
4. Correctional Facilities	Yes

1C-9.	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 2021 CoC Program Competition.	11
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 2021 CoC Program Competition that have adopted the Housing First approach.	11
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

The PPSCoC evaluates Housing First through the lens of Coordinated Entry (CE) and the CoC Ranking and Prioritization Committee, when consider funding projects. CE notes that Housing First is most successful when supportive services are leveraged to prevent returns to homelessness. Therefore, Housing

First utilizes a person-centered housing model to move homeless individuals, youths, and families quickly and efficiently into housing under the assumption that every eligible person is "housing ready." "Housing ready" means homeless persons' housing eligibility is not based on sobriety, treatment compliance, or criminal histories. CE ensures that all agencies accepting referrals must adhere to the same guiding principles on keeping referrals low-barrier and reviewing housing readiness as a factor for case conferencing. This evaluation is then reviewed by the CE Advisory Committee, a Committee of the PPCoC, and evaluates how projects are accepting referrals, which can result in providing individualized training and feedback to providers who do not adhere to the housing readiness principles of CE. CE also evaluates whether those referrals meet the communities' needs of prioritizing vulnerability based on length of time homeless and the housing needs assessment as focus point for community referrals.

The PPCoC evaluates CoC-funded agencies Housing First approach through the CoC Ranking and Prioritization Committee's evaluation during the annual CoC NOFO funding competition. Key concepts of Housing First that are evaluated by the CoC Ranking and Prioritization Committee during the local competition process are: 1.) Minimizing programmatic prerequisites to permanent housing entry. 2.) Promoting low barrier-admission to housing programs. 3.) Streamlining the entry process into housing programs in order to maximize time and efficiency. 4.) Persistently offering voluntary supportive services. And 5.) Honoring the rights, responsibilities, and legal protections of clients.

1C-9b.	Housing First–Veterans.	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	No
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1C-10.	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 2,000 characters)

Teams provide outreach six-days a week and serve approximately 75% of El Paso County. The remaining 25% lies in rural parts of the county that the PPCoC continues to build relationship with. Target areas for outreach include encampments for unsheltered persons with high severity of need. Specific outreach teams help with outreaching unsheltered homeless youth and veterans in collaboration with efforts through the Built for Zero initiative to map and track monthly homelessness for vulnerable subpopulations.

In addition, outreach occurs weekly at regional libraries, public parks, and known homeless encampments. To reduce barriers to assistance, outreach workers develop relationships and build rapport over time to help unsheltered persons experiencing homelessness are engaged with homeless assistance services. Outreach workers conduct the housing needs assessment in-person to meet people where they are at. Housing needs assessments are entered into HMIS and considered during the weekly Coordinated Entry meetings for housing vacancies, particularly permanent housing, and chronic homeless specific housing resources. All outreach efforts are tracked in HMIS including services and dates of engagement.

Outreach teams from several agency partners work directly with law enforcement to outreach persons that do not seek services on their own. The City of Colorado Springs has also begun funding street outreach teams of behavioral health providers and EMT's from the Colorado Springs Fire Department (CSFD). Outreach from the CSFD are entered and tracked in HMIS. Outreach efforts from CSFD are also directed to divert unsheltered homeless persons with co-morbidities and substance use issues from being admitted into healthcare facilities by connecting them to emergency shelter and health services to treat acute health needs.

1C-11.	Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	Yes
4.	Implemented communitywide plans	No
5.	Other:(limit 500 characters)	

1C-12.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.l.	

	2020	2021
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."	99	179

1C-13.	Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
2.	Private Insurers	No	No
3.	Nonprofit, Philanthropic	Yes	Yes
4.	Other (limit 150 characters)		

1C-13a.	Mainstream Benefits and Other Assistance—Information and Training.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:

1.	systemically providing 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.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

(limit 2,000 characters)

The PPCoC works to incorporate mainstream benefits and other assistance through membership of the PPCoC and partner agencies offering supportive services to housing providers. The PPCoC is comprised of representatives from El Paso County Department of Human Services (DHS), regional Health First Colorado Medicaid support provider, the largest behavioral health service provider, and a Federally Qualified Health Center. Colorado is a Medicaid expansion state, and these partnerships allow for case workers providing services directly to persons experiencing homeless to connect to regional Medicaid physical and behavioral health services. The PPCoC has given several trainings to the regional Medicaid provider, Colorado Community Health Alliance (CCHA), to help with explaining the connection between health and housing. CCHA participates actively in Coordinated Entry and has entered into agreement with the PPCoC to support households who are placed into housing for Emergency Housing Vouchers (EHVs). CCHA has agreed to collaborate with housing navigators for EHVs to provide Care Coordination and Medicaid member support for program participants in a voluntary, housing first approach. The PPCoC works directly with DHS through their child welfare, foster youth program known as Chafee. A Chafee representative participates in Coordinated Entry and helps identify foster youth who are homeless or at risk of homelessness for housing assistance and eligible mainstream public benefits. El Paso County DHS also connects individuals, youths, and families connect to important cash-benefit resources such as TANF, SNAP, and OAP. Additionally, several service providers in the PPCoC have SOAR-certified staff to assist participants with SSI/SSDI applications to ensure access to non-employment income. Lastly, DHS and the largest regional workforce center partners directly with many PPCoC housing providers on training and offering access to

employment opportunities for program participants.

1C-14.	Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC's coordinated entry system:

1.	covers 100 percent of your CoC's geographic area;
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
3.	prioritizes people most in need of assistance; and
4.	ensures people most in need of assistance receive assistance in a timely manner.

(limit 2,000 characters)

Coordinated Entry for the PPCoC is advertised through a variety of approaches to ensure fair and equal access to all potential households seeking housing assistance. Most importantly, the PPCoC represents the entire geographic region of El Paso County, Colorado, which includes both urban, suburban, and rural communities. In order to meet this diverse geographic need, Coordinated Entry has 17 designated agencies and over 25 locations where trained community partners conduct the housing needs assessment. In addition to access points for literally homeless resources, Coordinated Entry also has 12 designated locations for at risk of homeless housing assistance resources in the form of homeless prevention and/or financial assistance. All access points are listed on a housing resource schedule for literal and prevention housing resources with agency information including address, contact information, days of the week availability, and site-specific information. These schedules are updated quarterly and shared at all community partner sites throughout the geographic region and can be found by the public online. All access points are accessible by people experience a housing crisis regardless of disabling conditions, socio-economic background, and household demographics. Additionally, Coordinated Entry works with street outreach providers and public service agencies such as the Colorado Springs Fire and Police Departments to meet homeless persons where they are at in a low-barrier, person-centered approach. This approach in street outreach connects unsheltered persons to low-barrier emergency shelter and access points to conducting the housing needs assessment. Street outreach providers conduct housing needs assessments in-person at homeless camps and with unsheltered persons to ensure all vulnerable households experience a housing crisis are assessed for available housing resources.

1C-15.	Promoting Racial Equity in Homelessness–Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes
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1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	
Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.		

1.	People of different races or ethnicities are more likely to receive homeless assistance.	Yes
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	Yes
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	No
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	
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.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
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NOFO Section VII.B.1.o.

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

Community Health Partnership (CHP) as the administrative lead and collaborative applicant for the PPCoC, is leading the PPCoC in promoting racial equity based on the PPCoC racial disparity assessment. CHP is fully committed to racial Justice, Health Equity, Diversity, and Inclusion (J.E.D.I.) and has a goal “to disrupt oppression and create equitable systems by seeking out the knowledge, tools, and confidence to address diversity, equity, and inclusion within our organization so that we can build the capacity of our partners to create equitable systems in our community.”

CHP is contracting with a DEI consultant whose expertise in organizational assessment and development, organizational systems change, anti-oppression theory and practice, and non-violent communication techniques will inform, empower, engage, and prepare CHP staff for the journey towards anti-oppressive practices for themselves, the organization, and the community. CHP brings J.E.D.I. work to the PPCoC and the community through several goals: 1.) Increase staff and leadership expertise and understanding on anti-oppression and DEI principles and methodology, and to prepare staff for organizational changes around DEI. 2.) Utilize information and feedback gathered from the organizational assessment and trainings to develop and implement tools and strategies for deeper diversity, equity, and inclusivity at CHP. 3.) Determine whether external and internal organizational communications are effectively communicating organizational values around diversity, equity, and inclusion. 4.) Develop communications strategies that are culturally responsive, especially in the context of the community being served, and inclusive to marginalized populations. And 5.) Increase community partner’s expertise and understanding on anti-oppression and DEI principles and methodology, and to prepare them to bring organizational changes around DEI to their organizations and create systems that are more equitable for the community.

1C-16.	Persons with Lived Experience–Active CoC Participation.	
	NOFO Section VII.B.1.p.	

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.	32	5
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	32	5
3.	Participate on CoC committees, subcommittees, or workgroups.	2	0

4.	Included in the decisionmaking processes related to addressing homelessness.	32	5
5.	Included in the development or revision of your CoC's local competition rating factors.	2	0

1C-17.	Promoting Volunteerism and Community Service.	
	NOFO Section VII.B.1.r.	

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	No
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	No
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.	
	NOFO Section VII.B.1.q.	
	Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
1.	unsheltered situations;	
2.	congregate emergency shelters; and	
3.	transitional housing.	

(limit 2,000 characters)

On March 17, 2020, Community Health Partnership (CHP) convened a group of 11 stakeholders representing health systems, the CU School of Medicine, the Department of Public Health, the Office of Emergency Management (OEM), the Fire Department, shelter leadership, city government, 2 local hospitals, the FQHC, transportation services, and social service agencies to discuss how the community could join together to support individuals experiencing homelessness who became symptomatic or tested COVID positive, and prevent them from entering into a congregate shelter setting and triggering a COVID Outbreak, or having to respite from COVID on the street or in their car. It took several weeks of coordination, but on April 5, 2020, a congregate shelter, known as the Homeless Isolation Shelter (HIS), with capacity of up to 100 people, was opened in the vacant City Auditorium. Symptoms-based screening algorithms were developed by El Paso County Public Health and the CU School of Medicine and deployed at community shelters, transitional housing locations, hospitals, and the Criminal Justice Center for inmates who were discharging. Individual's screening "positive" for symptoms consistent with SARS-CoV-2 infection were referred to physicians via a new "Medical Triage Hotline" staffed by medical students and faculty from the CU School of Medicine. Clients with suspected COVID-19 deemed medically stable for "home isolation" were referred on a voluntary basis to the HIS. Free transport was provided for clients referred to the HIS. Staffing and security were provided by homeless services agencies with 24/7 CNA/LPN support via a home health care agency. Meals, laundry, and shower facilities were developed in coordination with the OEM and social service agencies. As a result of opening the HIS, emergency shelters avoided outbreaks for several months. CHP secured additional funding from a

local funder to cover hygiene, laundry, clothing, and some medical supply expenses.

1D-2.	Improving Readiness for Future Public Health Emergencies.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

Community Health Partnership (CHP), as the CoC Lead, met with the regional HUD Technical Assistance providers from HUD Disaster Operations and Emergency Solutions (ESG) grant program to discuss winter shelter capacity in the fall of 2020. CHP was recommended by the Colorado Department of Local Affairs for the CoC to work with HUD on technical assistance planning as a test community on HUD's winter planning guide. The PPCoC completed the winter planning guide and provided feedback to HUD TA representatives for Disaster and ESG on how it informed community planning around emergency shelter and service capacity through a natural disaster preparedness lens. The PPCoC plans to utilize findings to review winter and year-round emergency shelter planning to ensure all emergency shelter providers have emergency preparedness contingency plans with real-life scenario planning.

In addition, the PPCoC has been able to partner with El Paso County Department of Public Health, who is a new participating provider for the CoC and can help with future public health emergency planning. The PPCoC has already started conversations with County Public Health on how to track public health exposures using HUD guidance in HMIS to inform service providers on public health and safety related information. This could extend to outbreaks of other contagious disease and public health concerns that homeless service providers need real-time information and guidance for how best to help people who are experiencing homelessness access services. The PPCoC will continue to use the COVID-19 pandemic as an opportunity to improve safety planning for street outreach, emergency shelter, and housing providers for homelessness to improve the safety and delivery of homeless services to those most in need.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

The PPCoC has coordinated with the two largest ESG-CV funders, the City of Colorado Springs City) and Colorado Department of Local Affairs (DOLA), to

communicate funding opportunities, apply for and manage ESG-CV funds, and use homeless data out of HMIS to recommend funding decisions and strategies on ESG-CV to meet local needs. CHP, who is the local CoC Lead, acts as a Fiscal Agent for ESG-CV funds from DOLA and applied for and granted over \$600,000 dollars to three ESG-CV subgrantees for homeless prevention and rapid re-housing. Additionally, CHP has participated in the City's ranking and prioritization committee and provided HMIS data on community needs to make recommendations for City of COS ESG-CV funds. Funding was prioritized for rapid re-housing (RRH) to quickly assist literally homeless households with short-term rental assistance. The PPCoC was able to more than double the annual RRH Housing Inventory Count from 2020 with the addition of new ESG-CV funds, which allowed homeless youth, individual adults, and families to be referred to RRH housing placements in the community.

A portion of the ESG-CV funds from the City of COS were utilized for the operation of a temporary homeless isolation shelter set up at the City Auditorium for individuals experiencing homelessness, who were COVID positive or had COVID symptoms and needed to be separated from large, congregate emergency shelter settings. Additionally, ESG -CV funds were granted by the City to 3 emergency shelter providers to purchase additional cleaning supplies, PPE, pay staff hazard pay, and help with a few modifications to encourage social distancing.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	
	Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:	
1.	decrease the spread of COVID-19; and	
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).	

(limit 2,000 characters)

The PPCoC worked closely with emergency shelter providers, local hospitals, the City of Colorado Springs, El Paso County Department of Public Health, the largest Federally Qualified Health Center (Peak Vista) and homeless service providers to offer guidance on COVID-19 pandemic best practices to decrease the spread of COVID. The PPCoC worked with hospitals to develop a referral form for connecting persons experiencing COVID symptoms or who tested positive for homelessness to discharge from hospitals and be transported from emergency shelters to acute care support at the homeless isolation shelter. CHP also applied for and received a grant from Kaiser Permanente to provide incentives for homeless persons to receive COVID tests and vaccines, as well as PPE and flu shots. CHP partnered directly with the Colorado Springs Fire Department's Homeless Street Outreach Program (CSFD HOP), Peak Vista, and the regional library system to deliver COVID vaccines, tests, and PPE directly to people experiencing homelessness. The CSFD HOP even went into encampments and along trails with coolers to deliver vaccines and testing to homeless persons. In addition, the PPCoC coordinated with local services provide to deliver PPE, hygiene items, bagged takeaway food items, and toiletries to unsheltered homeless members in the geographic region at site-based faith-based organizations and community non-profits dedicated to supporting homeless persons. The Pikes Peak Library District libraries also brought out water, hand washing, and hygiene stations throughout El Paso

County to serve homeless people.

1D-5.	Communicating Information to Homeless Service Providers.	
	NOFO Section VII.B.1.q.	
Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:		
1.	safety measures;	
2.	changing local restrictions; and	
3.	vaccine implementation.	

(limit 2,000 characters)

The PPCoC led the community in communicating homeless information related to changing of local homeless services, best practice safety measures, and vaccine implementation. The PPCoC used the Coalition for Homeless Advocates and Providers (CHAP) email Listserv to share updates with over 450 community homeless providers and homeless persons. Messaging included information on how to access to the temporary homeless isolation shelter, updates on access to COVID testing and vaccines for homeless persons, best practices on safety measures like social distancing and mask wearing, and information on service providers with take-away items such as food, water, and hygiene items. The PPCoC also utilized the Coordinated Entry System (CES) to share weekly updates during case conferencing from service providers. Updates were tracked and shared out through weekly newsletters from homeless service providers discussing new services and funding opportunities, changes in hours of operation for service providers, and mobile food pantries. Newsletter updates from CES were shared out through the Coordinated Entry Listserv, which includes over 120 homeless housing providers, physical and behavioral health providers, emergency shelter providers, and community case managers. The newsletters were posted online as well on the PPCoC lead agency, CHP's, website for public viewing. The PPCoC worked with the El Paso County Department of Public Health on vaccine opportunities in the community, which were site-based primarily at emergency shelters in partnership with the regional Federally Qualified Health Center, Peak Vista Community Health Centers. Vaccines were also disbursed through street outreach teams and communicated through the PPCoC CHAP and CE communication channels to promote opportunities for providers to bring vaccines directly to the most vulnerable homeless people in El Paso County, Colorado.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	
Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.		

(limit 2,000 characters)

The PPCoC worked closely with El Paso County Department of Public Health and the State Colorado Department of Public Health and Environment (CDPHE)

on vaccination distribution in the region. CDPHE coordinated the Colorado distribution of vaccines to communities. El Paso County, being the most populous county in Colorado, early during state vaccine implementation received less vaccine distribution proportionally compared to other urban counties in Colorado, which meant that vaccine distribution was done with an incredible amount of planning and strategic implementation. The El Paso County Department of Public Health coordinated directly with healthcare facilities such as the two largest hospitals systems and Peak Vista, the region's Federally Qualified Health Center. Peak Vista worked with the PPCoC's largest day and night shelter for individual adults, Springs Rescue Mission, to offer vaccine clinics onsite at the Springs Rescue Mission. Homeless people were also offered transportation paid for through Health First Colorado Medicaid, to transport any homeless people who sought to have a two-dose vaccine directly to a Peak Vista clinic and back. El Paso County Public Health also worked with distributing vaccines at the largest regional youth homeless shelter, The Place, and family shelter, Family Promise, as well as the second largest shelter system through Salvation Army.

In addition, CHP, the PPCoC Lead Agency, received a grant from Kaiser Permanente to deliver vaccines to unsheltered homeless people throughout community pop-up events at highly trafficked areas for homeless such as public libraries, the soup kitchen, and directly to encampments through targeted homeless street outreach teams by the Colorado Springs Fire Department. Incentives were given to homeless people in the form of gift cards to further incentive vaccine implementation.

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

The Pikes Peak Continuum of Care (PPCoC) has worked closely with community partners responding to and addressing domestic violence (DV) in El Paso County, Colorado. The PPCoC Governing Board has sought additional support on addressing increasing DV as a result of the COVID-19 pandemic by recruiting two new Governing Board members in the past year, one representing the largest DV emergency and transitional shelter provider (TESSA) in the region was seated on the board in 2021, and a second provider supporting public policy and legislative advocacy at the Colorado State level (Violence Free Colorado). TESSA noted that calls for DV support per month went up dramatically between 2019 and 2020 with an average of 800 calls per month in 2019 and over 1200 calls per month in 2020, which is a 50% increase. This shows the tremendous need for vulnerable households who are in DV situations that are being exacerbated as a result of isolating at home due to the COVID-19 pandemic. By adding additional providers to the CoC Governing Board, the PPCoC is seeking to elevate the issues of DV in the Pikes Peak region and begin to prioritize funding and strategize with other funders on how to increase housing funds for DV families, as reflected in the PPCoC NOFO FY 2021 Priority Listing this competition year.

In addition, the PPCoC has recruited and identified two new DV housing providers in the community to apply for funds and advertised the PPCoC's commitment to bringing in new DV housing providers through the CoC announcement and attention to the DV bonus funds. For instance, one of the new providers, Red Wind Consulting, serves Native, indigenous women and families, who note that their participants find that while in crisis they have to educate providers and responders to understand some of their needs and believe they are receiving disparate treatment. Bringing on new providers who can serve the community's most vulnerable is crucial to addressing increases in DV.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

Per the CDC, certain subpopulations within the homeless population are at particularly high risk for developing severe COVID-19 symptoms. That population consists of those over the age of 60 and people with underlying health conditions. Other vulnerable populations to consider include racial minorities and Hispanic populations who have disproportionately experienced the impact of COVID-19. The PPCoC Coordinated Entry (CE) ensures flexibility within the referral process to prioritize these subpopulations for housing vacancies. The CE Administrator also added disabling conditions on the By Name List for consideration when searching for housing referral openings. Disabling conditions are then used when case conferencing housing and voucher openings. Preference is given to those with multiple co-morbidities and/or disabling conditions who are increased risk of health complications due to contracting COVID-19.

The CE has added an additional housing assessment to assess for COVID-19 symptoms that can be reported within HMIS. Preference and priority for housing openings will be given based on this additional housing assessment that is made available within the HMIS. The CE Administrator completed training on using this additional assessment tracking and created opportunities within the referral process to support agencies advocating for at-risk homeless households who are particularly vulnerable to developing severe and life-threatening COVID-19 symptoms.

The CE uses ongoing education and resource updates to keep the participating agencies up to date with all relevant guidance from CDC and HUD. These updates go out weekly as part of CE follow-up communications, which include any resources or funding opportunities that support at-risk populations. Updates include new funding opportunities, connections to mainstream resources for housing participants, and any other federal, state, or local government guidance on housing changes such as updates to the eviction moratorium.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	09/02/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	10/05/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

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.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	No
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	Yes

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

1.	the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
2.	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 2,000 characters)

The PPCoC is committed to considering specific needs and vulnerabilities of the community. The PPCoC Ranking and Prioritization Committee (R&P) put emphasis on awarding points to project applications that received referrals based on the highest vulnerability through Coordinated Entry. Project applications were also scored based on their engagement in Coordinated Entry and were asked to describe their engagement in case conferencing. Project applicants were also asked to consider their participation in Coordinated Entry through evaluating the referrals they accepted over the last fiscal year in terms of serving the most vulnerable homeless households based on longest length of time homeless, numbers of times homeless, disabling conditions including physical, behavioral health, and substance use conditions, and the numbers of referrals accepted by other participating agencies. Applicants that could demonstrate they were serving the hardest to serve populations in the geographic region were scored higher based on the R&P scoring rubric. In addition, project applicants were asked to describe how their project uses a Housing First approach in their eligibility criteria, process for accepting new housing referrals, delivery of supportive services, and process and criteria for exiting households to ensure households were given the most opportunities to succeed and only discharged in the most severe cases of non-compliance. Housing projects were also asked to describe what type of supportive services the housing projects offer and specific community partners the housing project partners connect participants to for supporting long-term success and creating opportunities to increase cash and non-cash benefits.

1E-3. Promoting Racial Equity in the Local Review and Ranking Process.

NOFO Section VII.B.2.e.

Describe in the field below how your CoC:

1.	obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
2.	included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
3.	rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

(limit 2,000 characters)

The PPCoC Ranking and Prioritization (R&P) Committee were given scoring rubrics that weighted a racial equity question as a high priority for the PPCoC when considering how to prioritize and list CoC housing projects on their effectiveness in addressing racial inequities seen in the PPCoC. To help inform the R&P Committee and the project applicants, the PPCoC conducted a System Design Clinic with the National Alliance to End Homelessness in 2021 to help

prioritize funding strategies for the PPCoC. As part of the System Design Clinic, stakeholders were surveyed on the homeless response system to inform the PPCoC funding strategies and R&P process through the lens of racial equity. Stakeholders surveyed included community leaders, direct services providers, and most importantly, persons with lived and living homeless experience. Of those surveyed, racial equity, homeless prevention, coordinated entry, and rapid re-housing were seen as areas of improvement for the PPCoC. Homeless people surveyed included over 35 homeless individuals, youths, and families who were literally homeless unsheltered or in emergency shelter. The PPCoC took findings from the System Design Clinic to create a racial distribution assessment of the community's homeless population from 2008-2019. The PPCoC then compared the racial distribution numbers among homeless service programs and compared it against El Paso County population demographic census numbers. This comparison allowed the PPCoC to identify that in 2019 the Black/African American/African population were 187% over-represented in the homeless population and the American Indian/Alaskan Native/Indigenous population was 310% over-represented in the homeless population relative to the County census demographic data. This assessment led the PPCoC to share this data with CoC new and renewal project recipients and asked them to write to how their projects were strategizing ways to improve racial equity using homeless projects.

1E-4.	Reallocation—Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	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;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

(limit 2,000 characters)

Per the documented Process for Ranking and Prioritization, the PPCoC has the following guidelines regarding reallocation: The PPCoC may use the reallocation process to shift funds in whole, or part, from existing renewal projects to new project applications without decreasing the CoC's Annual Renewal Demand (ARD). Reallocation can be partially or fully applied to agencies who are underperforming or who choose to not renew their projects. The PPCoC approves all reallocation recommendations made by the Ranking and Prioritization (R&P) Committee.

For the FY 2021 CoC NOFO Program Competition, points were awarded to individual projects using HUD and local priorities documented in the R&P Committee members scoring rubrics. The renewal applications were split into two parts: by organization and by project to best inform R&P Committee members on each agency's performance and their specific project's performance. The PPCoC scoring rubric was used to help the R&P Committee generate the community's Priority Listing. If there is a need to reduce funding,

the R&P Committee would reduce funding from the lowest scoring projects through consensus as well as projects who were consistently having funds recaptured after projects spending deadlines had ended. Opportunities for CoC reallocation was communicated to the community and all eligible renewal applicants were asked about renewing funds through the FY 2021 NOFO Program Competition announcement made by the PPCoC. In the past five years dating back to the FY 2017 cycle, the PPCoC has reallocated a third of the community's ARD based on renewal housing projects spending and project performance and awarded new applicants funds to meet the PPCoC ARD.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	Yes
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1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
	NOFO Section VII.B.2.g.	

1.	Did your CoC reject or reduce any project application(s)?	No
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	

1E-5a.	Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

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.	11/01/2021
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1E-6.	Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/10/2021
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2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

Enter the name of the HMIS Vendor your CoC is currently using.	Bitfocus: Clarity Human Services
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

Select from dropdown menu your CoC's HMIS coverage area.	Statewide
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/13/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

1.	have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and
2.	submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.

(limit 2,000 characters)

The Pikes Peak Continuum of Care (PPCoC) works closely with Domestic Violence (DV) providers in the community to ensure DV providers are able to meet Federally required reporting deadlines. For example, the HMIS Lead Agency and PPCoC administering agency, Community Health Partnership, works in collaboration with the City of Colorado Springs to assist with all of their SAGE Emergency Solutions Grant (ESG) Annual Performance Reporting (APR) uploads by running reporting for all ESG- and ESG-CV recipients and uploading into SAGE, to include DV reporting from ESG-awarded DV providers.

The HMIS Lead also collaborates with the other Continuums of Care in Colorado through a statewide HMIS implementation (COHMIS) and forms work committee to discuss comparable database needs for HUD funded victim service providers to be compliant with the Violence Against Women Act (VAWA) and the Family Violence Prevention Services Act (FVPSA) as they are prohibited from entering personally identifying information into HMIS. The COHMIS works with community vendors used by victim service providers locally such as CAFÉ and EmpowerDB.

In addition, the largest victim service provider in the region submits bed inventory to the PPCoC annually and last year reported a new Transitional Housing program that includes 112 beds based on the 2021 HIC. All bed and households numbers were submitted through aggregate level data and de-identified to avoid duplication of beds reported for the HIC and PIT.

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

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	861	34	827	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	642	112	204	38.49%
4. Rapid Re-Housing (RRH) beds	179	0	179	100.00%
5. Permanent Supportive Housing	722	0	722	100.00%
6. Other Permanent Housing (OPH)	40	0	40	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 2,000 characters)

Transitional Housing (TH) is at 38.49% for HMIS Bed Coverage Rate compared to 50.78% in the FY 2019 NOFA. This is due to the largest TH provider in the

community accounting for 192 of the beds, not tracking their housing data through HMIS due to loss of funding during the FY 2018 NOFA as a result of changing priorities around TH funding for CoCs. In addition, the provider removed their referrals from accepting openings through Coordinated Entry and does not follow a Housing First model for these units since 2018. To ensure a high success rate, the provide hand selects candidates through a high barrier approach, and those candidates must abide by mandatory services to be accepting to the program. This provider does self-report a high success rate of keeping people in housing (over 90%) and a housing placement rate of around 90%.

The PPCoC Governing Board will continue to encourage TH providers who do not utilize HMIS to enter their TH resources and clients into HMIS. The PPCoC is currently in conversations with another provider who offers TH housing to individual adults, families, and soon seniors, and are offering recommendations on how to capture and track data. The provider has another software for data tracking, but is interested in collaborating with the PPCoC. This second provider had a bed inventory of 99 beds in the 2021 HIC, which would increase the number of beds in HMIS if they were to transition to using HMIS.

2A-5b.	Bed Coverage Rate in Comparable Databases.	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	100.00%
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2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:

1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,000 characters)

N/A

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 January 15, 2021, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2B-1.	Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes
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2B-2.	Unsheltered Youth PIT Count—Commitment for Calendar Year 2022.	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes
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2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2C-1.	Reduction in the Number of First Time Homeless—Risk Factors.	
	NOFO Section VII.B.5.b.	
	Describe in the field below:	
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;	
2.	how your CoC addresses 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 or to end homelessness for individuals and families.	

(limit 2,000 characters)

The process the PPCoC uses to identify persons becoming homeless for the first time is through System Performance Measures and data collected through Coordinated Entry (CE) and input into the HMIS. All factors inform funding strategies of the PPCoC with a goal to make homelessness rare in the region by reducing first time homelessness. CE data counts weekly participants who are new to being enrolled in the CE program, which has been capturing data in HMIS since 2018.

In addition, the PPCoC has recently contracted with the National Alliance to End Homelessness to create a community training on homeless Diversion strategies, which will be the first homeless Diversion program in the geographic region. This community training will inform direct homeless case managers on problem solving skills and diverting homeless households into safe, stable housing solutions rather than into emergency service systems. CHP, who administers the PPCoC, will further supplement the Diversion program and mitigate risk of homeless time homelessness by creating a community flexible fund to support diverting at risk of homeless and imminently homeless households into safe and stable housing options with social and family supports and by paying down past debt owed to help divert households from experiencing first time homelessness.

CHP is currently acting a fiscal agent for Colorado Department of Local Affairs ESG and ESG-CV funds and has had four different Homeless Prevention (HP) subgrantees. The HP funds have been able to prevent and reduce the risks of first-time homelessness in the community by directly offering HP funds to key emergency shelter providers in the community for homeless youth and families as well as the largest community soup kitchen provider.

The Senior Manager of Homeless Initiatives at CHP is responsible for the CoC's

strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.

2C-2.	Length of Time Homeless–Strategy to Reduce.	
	NOFO Section VII.B.5.c.	

Describe in the field below:

1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	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 2,000 characters)

Coordinated Entry (CE) through the PPCoC uses the housing needs assessment tool known as the VI-SPDAT along with program enrollment information to rank and prioritize all the households who have taken the VI-SPDAT in the past 90-days. The ranking and prioritization of VI-SPDATs is visualized through a report known as the "By Name List." The By Name List is the tool used by CE to match households to all housing vacancies during the weekly Case Conferencing meeting. The By Name List ranking and prioritization is composed of several factors to highlight the highest community needs for housing assistance. The CE policies and procedures prioritizes longer lengths of time homeless and number of times homeless in a year-year period as the second and third prioritized sorting factors, respectively, when generating the weekly By Name list. The CE Administrator at CHP, who is the CoC Lead Agency, is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless by tracking length of referral efficacy from date of assessment to referral, to program enrollment, to housing move-in date. CE collects barriers to housing, which informs how the PPCoC provides community training and best practices to case managers on reducing length of time homelessness.

In addition, CHP hired a Housing Navigator in 2021 to support housing programs with housing navigation and help reduce length of time homeless. Housing navigation has been identified for the past two-years as the single largest obstacle to housing, more so than all other obstacles combined accordingly to CE tracking. The Housing Navigator is responsible for engaging and developing relationships with private landlords and property managers to maximize housing voucher connections to affordable housing vacancies. The Housing Navigator holds monthly meetings with community housing case managers and sends daily housing vacancies to interested housing providers in the geographic region.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	

Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:

1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
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2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.
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(limit 2,000 characters)

The PPCoC's strategy for increasing the permanent housing rate for persons who are formerly homeless or at risk of homelessness in emergency shelters, transitional housing, and rapid re-housing is to provide supportive case management through a housing first approach. Supportive case management is intended to empower participants to seek financial and emotional independence through finding meaning and gain self-worth through job placement, access to mainstream benefits, and health services such as outpatient substance use counseling and treatment, behavioral health counseling and medication management, and physical healthcare as needed. Service providers collaborate to ensure a menu of services are offered throughout the continuum. Even if certain providers do not have onsite access or provide one of the aforementioned services, they are able to refer participants to a network of services providers to meet the case management needs of program participants to help retain their permanent housing or exit to permanent housing destinations.

The PPCoC's strategy to increase the rate at which people in rapid re-housing projects, emergency shelter, or transitional housing projects to retain their housing or exit to permanent housing destinations is through landlord engagement and housing navigation. CHP, as the CoC Lead, hired a Housing Navigator in the past year to develop a community-wide landlord engagement program to create stronger relationships with property managers and landlords to maximize exits to permanent housing. CHP works closely with the Apartment Association of Southern Colorado to introduce service providers to available landlords and property managers with housing vacancies. The CHP Housing Navigator has begun conducting monthly Housing Navigation meetings with the full continuum of PPCoC service providers to share housing vacancies and educate on strategies to help participants retain housing or exit to permanent housing destinations.

2C-4.	Returns to Homelessness--CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	

Describe in the field below:

1.	how your CoC identifies individuals and families who return to homelessness;
2.	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 2,000 characters)

The PPCoC uses performance data from the HMIS to analyze program success rates in individuals and persons in families retaining permanent housing. This allows the PPCoC to identify common factors at a program specific level for persons who return to homelessness from permanent housing. All funded projects are evaluated on their effectiveness of adequately supporting housing residents and preventing returns to homelessness. Projects applying for funding administered through the PPCoC receive fewer points on their NOFO application and may have their funds reallocated based on their housing retention performance. Performances are reviewed by the CoC Ranking and Prioritization Committee during the CoC NOFO funding competition.

The PPCoC encourages housing and service providers to adopt, use, and refine evidence-based best practices, within HUD guidance, to reduce the rate of returns to homelessness. The PPCoC provides oversight and support for agencies seeking to improve their practices and conducts annual site reviews and monthly education and re-training opportunities for housing best practices. Reducing returns to homelessness is currently tracked at each individual program level.

In the past two years, the PPCoC has begun conducting monthly reviews of homeless data through the Built for Zero (BFZ) initiative. The BFZ data tracks vulnerable subpopulations monthly to measure homeless inflows and outflows. The PPCoC has begun by focusing on veteran and youth homelessness but the PPCoC has plans to expand to individual adults and families. The BFZ work allows the PPCoC and other community funders such as municipalities leaders, to review returns to homelessness from permanent housing on a more frequent basis to inform funding strategies and planning.

The Senior Manager of Homeless Initiatives at CHP, the CoC Lead Agency, is responsible for the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

2C-5.	Increasing Employment Cash Income-Strategy.	
	NOFO Section VII.B.5.f.	

Describe in the field below:

1.	your CoC's strategy to increase employment income;
2.	how your CoC works with mainstream employment organizations to help individuals and families 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 2,000 characters)

The PPCoC works directly with housing programs and emergency shelters on strategies for increasing employment cash income among program participants. In the past year, the PPCoC has more than doubled the community's rapid re-housing (RRH) stock, which significantly assists program participants increase cash employment income through short-term rental assistance to allow households to focus on increasing income and not on monthly housing costs. Coordinated Entry, who submit referrals for RRH openings, has a low-barrier approach to housing referrals, meaning that income is not a requirement to be considered for housing referrals. Therefore, many of the RRH households who receive housing referrals do not have employment at time of referral. The RRH housing case managers provide housing first case management support to help with employment and increasing cash income while program participants are receiving financial assistance for housing. Housing lengths in RRH can vary based on a participant's ability to assume rent on their own and case manager, though voluntary, strongly enforces connections to local employers and workforce development providers.

In addition, the four largest emergency shelter providers in the PPCoC, who support individual adults, families, and youth who are experiencing homelessness, all have dedicated case managers focused on helping shelter residents gain and increase employment. Shelter case managers work directly with shelter residents on short- and long-term goal setting and contract with employers on helping shelter residents obtain employment while staying in

shelter by bringing employment recruiters on site to meet with shelter residents. Community Health Partnership (CHP) is the organization responsible for overseeing the CoC's strategy to increase employment cash income and supports connections to employers and workforce developers in the region.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.	
	NOFO Section VII.B.5.f.	

Describe in the field below how your CoC:

1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2.	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

(limit 2,000 characters)

The PPCoC shares notices of job fairs, job training, and current employment opportunities through a Listserv that reaches over 450 services providers, including homeless program staff who share that information directly to program participants who may not be on the Listserv. Catholic Charities of Central Colorado's Hanifen Center takes a case management approach to assist participants in finding employment. No matter where participants are in their housing and employment, they help to connect and place participants in the appropriate program to gain vocational skills and rehabilitation or directly to employers. The Hanifen Center provides classes on resume writing, interviewing, and financial literacy. They are hosting regular job fairs and hiring events with a minimum of five different employers, where participants interview and know immediately if they've been hired. The Center is increasing partnership with potential employers monthly. They also partner with the Pikes Peak Workforce Center and the Colorado Springs Housing & Building Association to place participants in an extensive, eight-week training program where they learn about all the areas of constructions. When they graduate the program, they Colorado Springs Housing & Building Association will even pay for their tools. The program has been incredibly successful and many local service providers refer clients to this program. The program has been so successful that a full-time employee was hired to expand employer relationships and services. In addition, the largest emergency shelter provider, Springs Rescue Mission, also conducts a job training program that has successfully placed many shelter residents into long-term employment opportunities.

2C-5b.	Increasing Non-employment Cash Income.	
	NOFO Section VII.B.5.f.	

Describe in the field below:

1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,000 characters)

PPCoC providers assist program participants in applying for benefits through the online Colorado Peak program and platform. SNAP, WIC, TANF, Health First Colorado Medicaid, OAP, LEAP, Early Childhood Intervention, and SSI benefits can all be accessed through this website. The Colorado Peak website is available online to any individual or service provider that has virtual access. In addition, service providers, including the largest regional soup kitchen and day shelter, have DHS representatives onsite at least one day per week to assist homeless and at-risk-of-homeless persons with applying for mainstream benefits and non-employment cash income.

The PPCoC Board of Directors includes the Deputy Director from El Paso County Department of Human Services to further provide recommendations and strategies to the PPCoC for accessing and increasing non-employment cash benefits. To ensure that all organizations within the Continuum are aware of services and locations offering client assistance in applying for non-cash benefits, homeless service providers are invited to speak and share updates at the monthly Coalition for Homeless Advocates and Providers (CHAP) meetings. Organizations are able to hear about training and opportunities to connect their participants to ways to increase non-employment cash benefits.

Community Health Partnership (CHP) is the organization responsible for overseeing the CoC's strategy to increase non-employment cash income. As such, CHP is working with mainstream benefit providers to implement the PPCoC Board strategic plan to objectively measure non-employment cash benefit gains over time.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3A-1.	New PH-PSH/PH-RRH Project—Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	

Is your CoC applying for a new PSH or RRH project(s) 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?	No
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3A-1a.	New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	Private organizations	No
2.	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	No
4.	Faith-based organizations	No
5.	Federal programs other than the CoC or ESG Programs	No

3A-2.	New PSH/RRH Project—Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	

Is your CoC applying for a new PSH or RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
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3A-2a.	Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.b.	

1.	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	No
2.	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	No

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

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

Project Name	Project Type	Rank Number	Leverage Type
This list contains no items			

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3B-1.	Rehabilitation/New Construction Costs—New Projects.	
	NOFO Section VII.B.1.r.	

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 2,000 characters)

N/A

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	

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 2,000 characters)

N/A

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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 2021 Priority Listing.

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

You must click “Save” after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-3 and 4A-3a.

4A-2.	Number of Domestic Violence Survivors in Your CoC's Geographic Area.	
	NOFO Section II.B.11.	

1.	Enter the number of survivors that need housing or services:	1,232
2.	Enter the number of survivors your CoC is currently serving:	356
3.	Unmet Need:	876

4A-2a.	Calculating Local Need for New DV Projects.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and
2.	the data source (e.g. comparable database, 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 2,000 characters)

The number of domestic violence (DV) survivors needing housing or services is estimated by data input into HMIS by non DV agencies, PIT data, and local law enforcement data. Sources including HMIS, comparable DV provider databases, and law enforcement data from the Colorado Springs Police Department.

Calculating the number of DV households who are fleeing or attempting to flee currently being served was through the Housing Inventory Count for 2021 and the applications of two new DV Transitional Housing Projects applying for Joint TH-RRH funds this cycle. Both applicants have existing TH projects and seeking two expand to add a Joint PH-RRH funds using CoC funds. One applicant was selected as the DV Bonus project and the other project was considered by the CoC Ranking and Prioritization Committee as reallocation of existing DV funds from an expiring project during this funding cycle.

Calculating the number of DV households who are fleeing or attempting to flee total in the community, including those with housing and services to calculate unmet need, is based on local law enforcement data as well as number of unduplicated households who call the locally managed crisis hotline. This total was then subtracted from the households being served to calculate the unmet needs for the community, 812, and further provided reasoning for the CoC to consider a DV Bonus Grant applicant and reallocating existing, unused DV funds to serve a new Joint TH and PH-RRH being considered through funding reallocation and/or CoC Bonus if available.

Barriers to the unmet need include lack of supporting beds for households fleeing or attempt to flee DV or sexual assault incidents in the community. Lack of housing has further been exacerbated by the COVID-19 pandemic, where many households are spending more time at home to isolate and quarantine due to preparing for, responding to, and preventing coronavirus.

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information.	
	NOFO Section II.B.11.	
	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

Kingdom Builder's...

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

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

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 2021 Priority Listing:

1.	Applicant Name	Kingdom Builder's Family Life Center
2.	Rate of Housing Placement of DV Survivors–Percentage	81.50%
3.	Rate of Housing Retention of DV Survivors–Percentage	91.30%

4A-4a.	Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and
2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,000 characters)

Kingdom Builder's Family Life Center calculated the rate of housing placement and retention by reviewing the last operating years' transitional housing outcomes. The data is currently kept in an internal database. Kingdom Builder's Family Life Center is in the process of reviewing comparable databases to comply with HUD federal reporting requirements.

4A-4b.	Providing Housing to DV Survivor–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below how the project applicant:

1.	ensured DV survivors experiencing homelessness were assisted to quickly move 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.	connected survivors to supportive services; and
4.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,000 characters)

Kingdom Builder's Family Life Center (KBFLC) believes that with safe, stable

housing and a variety of supportive services to meet participants needs, domestic violence survivors can change their lives. The goal of KBFLC is to empower and support victims of domestic abuse to create the lives they way, free of violence. The My Brother's/Sister's Keeper program provides victim-centered, trauma-informed services and empowering victims to make their own life choices. None of the supportive services are mandatory through a Housing First approach, and all services provided are chosen by the survivors as part of creating a "success plan" with a case manager, referred to as a "Program Advocate."

KBFLC's Step Up Housing Program helps move individuals and families who are survivors of intimate partner violence, sexual violence, human trafficking, and stalking into stable housing as quickly as possible, maintain stable housing, and help provide the necessary support as they rebuild their lives. This support is on-going, through case management that may include budgeting help, emotional support, and community referrals to mainstream benefits as is safe. KBFLC's "Open Door" Emergency Housing providers emergency housing, but it only a temporary solution. The Step-Up program would take referrals from the temporary housing and through any CoC emergency referrals. The Step-Up goal is to help people obtain housing quickly, increase self-sufficiency, and stay housed. It is offered without preconditions to entry and the resources and services provider are specifically tailored to meet the needs of the households being served.

4A-4c.	Ensuring DV Survivor Safety--Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by:

1.	training staff on safety planning;
2.	adjusting intake space to better ensure a private conversation;
3.	conducting separate interviews/intake with each member of a couple;
4.	working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
5.	maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and
6.	keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors.

(limit 5,000 characters)

Kingdom Builder's Family Life Center (KBFLC) staff receive a minimum of 40 hours of domestic violence advocacy training each year. Within that, they receive an estimate 4 hours of training each year on safety planning.

KBFLC's intake space is a private room where staff members meet with all survivors one-to-one to ensure privacy. There is a sound machine to help muffle sounds to further ensure privacy. The private room is setup with a couch and two chairs with an intention of moving away from meeting with survivors behind a desk to build trust and support safety.

KBFLC's program provides services to victims of Domestic and Sexual Violence. We do not offender services, but can refer to Stand-Up Colorado, an organization dedicated to work with abuses and offenders to help them break

the cycle of DV.

Program Advocates work with survivors, referred to as participants, that a process that facilitates dialogue. Each participant is asked about the kind of housing they would like to live in, the things they are concerned about for safety, and Program Advocates offer information about safety as well to ensure participants understand their options in developing a success plan and enabling them to make informed decisions about their own safety needs.

At this point, KBFLC does not operate scattered site units with HUD funding, however, through the VOCA funds, KBFLC does maintain required building features on site to ensure safety of participants in temporary living.

KBFLC Program Advocates are bound to VOWA, VOCA, CRS 13-90-107 (K) (l) (k) (l), etc. All KBFLC staff and interns are required to attend confidential victim advocate training. KBFLC Program Advocates understand and practice confidentiality through all phases of programming. Participants can meet with Program Advocates on a one-on-one basis. Their information is only shared with their permission, which is verified with a written release of information.

4A-4c.1.	Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

Kingdom Builder's Family Life Center (KBFLC) serves victims fleeing domestic violence, have no access to a permanent residence except by going back to the abuser, and no financial resources or support network to secure permanent housing. Survivors leaving domestic abuse often become homeless – as they cannot afford housing on their own, live in their cars, in emergency shelters, or even end up in tent encampments. This living situation makes it almost impossible to work towards self-sufficiency when every day is a struggle to find shelter.

Although we do not currently income qualify applicants for our program, the vast majority of victims we serve qualify for Medicaid, and therefore earn 138% of poverty level or less (<30% AMI). At this income level, it is difficult to find and secure permanent housing without transitional support.

Our organization provides services for all survivors of trauma, but we particularly strive to reach underserved populations, especially people of color. Historically, people of color who are survivors of trauma are much less likely to report victimization, partly due to mistrust of institutions influenced by generations of systemic racism. We recognize that it takes courage for survivors of trauma to accept support and work to change their lives, and that marginalized groups can be unintentionally re-victimized if support programs do not fully understand how their struggles are impacted by race and other factors. KBFLC's board is 50% African American, as is our Executive Director, two KBFLC staff members, and one intern. We also have a Latina staff member and two Latina interns, one of whom is fluent in Spanish. Our board and staff's connections within communities of color and personal understanding of

systemic racism have allowed us to be particularly effective in reaching and assisting underserved populations. Last year, KBFLC has served 92 survivors of domestic abuse, 55% of whom were women of color and 16% who were men of color.

4A-4d.	Trauma-Informed, Victim-Centered Approaches—Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:

1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
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 trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

Kingdom Builder's Family Life Center (KBFLC) takes a housing first approach to providing services. At KBFLC, we are victim-centered in all that we do. Our organization strives to be inclusive of everyone who has experienced the trauma of domestic violence, and to make services highly relevant, culturally appropriate, and easily accessible for all people. Kingdom Builders realizes that domestic abuse is not limited to heterosexual relationships or to male-against-female violence, and fully welcomes participants of any gender, sexual orientation, gender expression, or relationship type.

Grant funds will be used to provide both transitional housing, rapid re-housing, and supportive services to move homeless survivors of domestic violence into permanent housing and economic self-sufficiency. As in all of KBFLC's programs, services are optional and tailored by victims to meet their individual needs. The range of optional support services include emergency interventions, safety planning, case management, domestic violence education, peer support groups, financial counseling, parenting classes, professional therapy, career planning and job training, limited legal assistance, and victim's advocacy. A KBFLC Program Advocate works with the Participant to develop a "success plan" that outlines holistic goals for their life and steps to achieve them. Success plans are participant-driven and individualized for each Participant. The Program Advocate will outline the services and resources available to them, and the Participant will set their own goals and opt-in to the services they choose.

Before victims can work on building their economic self-sufficiency, they must overcome their immediate crisis and find safety and stability. The foundational service for achieving this goal is providing victims with housing, so that they aren't forced to go back to an abuser because of homelessness and economic

need. Without stable housing, the logistical challenges to finding employment and working toward self-sufficiency are almost insurmountable. Until they are housed, survivors do not have a consistent place to receive mail, access the internet, store possessions, or take care of their health. Psychologically, survivors are also dealing with the effects of trauma: fear, grief, exhaustion, self-doubt, guilt, and uncertainty about the future. These challenges and stressors cannot be addressed effectively if survivors are in perpetual crisis trying to find shelter.

Many domestic violence survivors need support on multiple levels to rebuild their lives – a lack of health care, childcare, food access, and employment skills can all be barriers to long-term stability. While KBFLC provides many services, we do not want to duplicate the resources already available through other social service structures. Thus, we work to create strong collaborations with other agencies in the Pikes Peak region.

KBFLC has a close working relationship with the El Paso County Department of Human Services, and our Program Advocates help Participants navigate the process necessary to apply for county-administered benefits such as Health First Colorado (Medicaid), the Food Assistance Program (SNAP), childcare assistance (CCCAP), and Colorado Works (TANF). Our Program Advocates help survivors obtain personal documents, complete application and reporting paperwork, and facilitate communication between victims and County case workers to coordinate services.

KBFLC also works closely with Pikes Peak Workforce Center (PPWC) to connect our Participants to job readiness training and employment opportunities. Our Executive Director also has extensive experience working with military families and veterans, as she worked as a Victim Advocate at Ft. Carson Army Base from 2013 to 2018, until she retired in August 2018 to work full-time at KBFLC.

4A-4e.	Meeting Service Needs of DV Survivors–Project Applicant Experience.	
	NOFO Section II.B.11.	
	Describe in the field below:	
1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and	
2.	provide examples of how the project applicant provided the supportive services to domestic violence survivors.	

(limit 5,000 characters)

Kingdom Builder's Family Life Center (KBFLC) has been awarded both state and now a federal VOCA grant in 2021 and we work with a financial team to ensure that we start and stay in compliance with all financial responsibilities. Both grants are reimbursable, so systems have been put in place for the past 3-years to ensure no issues with monitoring and spending the approved grant amounts. KBFLC had a recent federal financial review with VOCA and passed the review with no findings or issues noted.

At KBFLC, we believe that with safe, stable housing and a variety of supportive services to meet their needs, domestic violence survivors can change their lives. Our goal is to empower and support victims of domestic abuse (called "Participants") to create the lives they want, free of violence. The My Brother's / Sister's Keeper program is dedicated to providing victim-centered, trauma-informed services and empowering victims to make their own choices. None of

our supportive services are mandatory, and all services provided are chosen by survivors as part of creating a “success plan” with a case manager (called a “Program Advocate”).

Before victims can work on building their economic self-sufficiency, they must overcome their immediate crisis and find safety and stability. The foundational service for achieving this goal is providing victims with housing, so that they aren’t forced to go back to an abuser because of homelessness and economic need. Without stable housing, the logistical challenges to finding employment and working toward self-sufficiency are almost insurmountable. Until they are housed, survivors do not have a consistent place to receive mail, access the internet, store possessions, or take care of their health. Psychologically, survivors are also dealing with the effects of trauma: fear, grief, exhaustion, self-doubt, guilt, and uncertainty about the future.

These challenges and stressors cannot be addressed effectively if survivors are in perpetual crisis trying to find shelter.

Our proposed model is to provide case management and financial support, allowing participants to start the process of stabilizing their lives. During this time, Participants can begin to overcome trauma, plan, manage their health, find employment, access financial resources, and secure permanent housing.

We receive referrals from any agency that has clients that need our services. Once they come in, they fill out the required paperwork and the only precursor is that they acknowledge they are a victim of crime and agree to actively participate in the program services. No police report is required, nor do they have to fill out a protection order.

Grant funds will be used to provide both transitional housing and supportive services to move homeless survivors of domestic violence into permanent housing and economic self-sufficiency. As in all KBFLC’s programs, services are optional and tailored by victims to meet their individual needs. The range of optional support services include emergency interventions, safety planning, case management, domestic violence education, peer support groups, financial counseling, parenting classes, professional therapy, career planning and job training, limited legal assistance, and victim’s advocacy.

A KBFLC Program Advocate works with the Participant to develop a “success plan” that outlines holistic goals for their life and steps to achieve them. Success plans are participant-driven and individualized for each Participant. The Program Advocate will outline the services and resources available to them, and the Participant will set their own goals and opt-in to the services they choose.

Many domestic violence survivors need support on multiple levels to rebuild their lives – a lack of health care, childcare, food access, and employment skills can all be barriers to long-term stability. While KBFLC provides many services, we do not want to duplicate the resources already available through other social service structures. Thus, we work to create strong collaborations with other agencies in the Pikes Peak region.

KBFLC has a close working relationship with the El Paso County Department of Human Services, and our Program Advocates help Participants navigate the process necessary to apply for county-administered benefits such as Health First Colorado (Medicaid), the Food Assistance Program (SNAP), childcare assistance (CCCAP), and Colorado Works (TANF). Our Program Advocates help survivors obtain personal documents, complete application and reporting paperwork, and facilitate communication between victims and County case workers to coordinate services. KBFLC also works closely with Pikes Peak Workforce Center (PPWC) to connect our Participants to job readiness training

and employment opportunities.

4A-4f.	Trauma-Informed, Victim-Centered Approaches--New Project Implementation.	
	NOFO Section II.B.11.	
Provide examples in the field below of how the new project will:		
1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;	
2.	establish and maintain 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 trauma;	
4.	place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;	
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;	
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
7.	offer support for parenting, e.g., parenting classes, childcare.	

(limit 5,000 characters)

Along with the current services being provided by Kingdom Builder's Family Life Center (KBFLC), we have outlined a 30-, 60-, 90-, and 180-day plan for project implementation outlined below:

30-60 days – recruitment and hiring of staff and preparing program structures, networking with community partners etc., outreach activities of introduction of the program

90-180 days – begin program works and actively work on the program

Our Rapid re-housing provides short-term rental assistance and services. The goals are to help people obtain housing quickly, increase self-sufficiency, and stay housed. It is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the needs of the person.

CORE COMPONENT #1: Housing Identification

The goal of housing identification is to find housing for people quickly

CORE COMPONENT #2: Rent and Move-In Assistance

The goal of rent and move-in assistance is to help with the costs associated with getting into housing.

CORE COMPONENT #3: Case Management

The goal of rapid re-housing case management is to help stabilize people once housed, by connecting them to services and supports if needed.

KBFLC's Program Advocates work to help victims secure housing, specifically in situations where victims and their children are at risk for homelessness.

Services include:

- Case management
- Direct financial assistance for securing housing
- In-home case management to improve likelihood of client success

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

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).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	VI-SPDAT Assessme...	11/08/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	Local Competition...	11/10/2021
1E-2. Project Review and Selection Process	Yes	PPCoC NOFO Proces...	11/10/2021
1E-5. Public Posting—Projects Rejected-Reduced	Yes	R&P Committee Dec...	11/10/2021
1E-5a. Public Posting—Projects Accepted	Yes	R&P Committee Dec...	11/10/2021
1E-6. Web Posting—CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: VI-SPDAT Assessment and Application Packet

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: PPCoC NOFO Process and Procedure

Attachment Details

Document Description: R&P Committee Decision - Projects

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Reduced/Eliminated

Attachment Details

Document Description: R&P Committee Decision - Projects Approved

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/08/2021
1B. Inclusive Structure	11/11/2021
1C. Coordination	11/11/2021
1C. Coordination continued	11/11/2021
1D. Addressing COVID-19	11/11/2021
1E. Project Review/Ranking	11/11/2021
2A. HMIS Implementation	11/09/2021
2B. Point-in-Time (PIT) Count	10/08/2021
2C. System Performance	11/11/2021
3A. Housing/Healthcare Bonus Points	10/08/2021
3B. Rehabilitation/New Construction Costs	10/08/2021

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3C. Serving Homeless Under Other Federal Statutes

11/09/2021

4A. DV Bonus Application

11/10/2021

4B. Attachments Screen

Please Complete

Submission Summary

No Input Required

**Vulnerability Index -
Service Prioritization Decision Assistance Tool
(VI-SPDAT)**

Prescreen Triage Tool for Single Adults

AMERICAN VERSION 2.0

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1 (800) 355-0420 info@orgcode.com www.orgcode.com



COHMIS Client Consent for Data Collection and Release of Information

This notice explains how information about you may be shared and used. It also tells you who can access your information. Please read it carefully and ask any questions you may have.

What is COHMIS?

The Colorado Homeless Management Information System (COHMIS) is a data system that stores information about homelessness services. The name of the software that stores this data is called Clarity Human Services. The purpose of COHMIS is to improve coordination of services that support people who are homeless or at risk of homelessness. To further ensure and navigate this coordination, data is shared statewide between the three Continuum of Care (CoC) bodies: MDHI (Metro Denver), Pikes Peak (El Paso County) and Balance of State (Remaining Counties). Active agencies that participate in COHMIS are listed on www.coloradohmis.org.

What is the purpose of this form?

With this form, you can give permission to have information about you collected and shared with partner agencies that help provide housing and services. Partner agencies are required to protect the privacy of your identifying information.

You have rights regarding your information:

- You have the right to ask about who has seen your information.
- You have the right to see your information at any time and change it if it isn't correct.
- You have the right to change your authorization regarding the use of your data.
- You have the right to file a grievance if you feel your information has been misused. The Grievance Form may be requested at any time from any participating COHMIS agency.
- Right to refuse information while retaining rights of access to services.

The information to be collected and shared may include:

- Name, date of birth, gender, race, ethnicity, social security number, phone number, address
- Basic medical, mental health, substance use and daily living information
- Housing and program eligibility information
- Use of crisis services, Veteran services, hospitals and jail
- Employment, income, insurance and benefits information
- Services provided by partner agencies
- Results from assessments
- Photograph or other likeness (if included)

By signing this form:

- I authorize the CoC and Clarity to share COHMIS information with partner agencies, and the COHMIS information shared will be used to coordinate services. It will also be used to help evaluate the quality of community programs.
- I understand that the partner agencies may change over time and are always responsible for keeping my information private using reasonable best efforts for privacy policies.
- I understand that agencies must adhere to federal and Colorado laws regarding my protected information.
- I may revoke this consent at any time by returning a completed revocation of consent form, available upon request, to agency staff.
- I can receive a copy of this consent form.
- I understand this consent will expire 7 years from my last COHMIS recorded activity.

Printed Name of Client or Legal Guardian: _____

Signature of Client or Representative: _____ **Date:** _____

Signature of Agency Witness: _____ **Date:** _____

_____ *Initials of Client If Declining Consent*



COHMIS Intake Form

For project type: Coordinated Entry for the Pikes Peak Continuum of Care

PROJECT START DATE *[All Clients]*

		-			-				
Month		Day				Year			

SOCIAL SECURITY NUMBER *[All Clients]*

			-			-				
--	--	--	---	--	--	---	--	--	--	--

QUALITY OF SOCIAL SECURITY

<input type="radio"/>	Full SSN reported	<input type="radio"/>	Client doesn't know
<input type="radio"/>	Approximate or partial SSN reported	<input type="radio"/>	Client refused
		<input type="radio"/>	Data not collected

CLIENT NAME *[All Clients]*

N/A

Last																				
First																				
Middle																				<input type="radio"/>
Suffix																				<input type="radio"/>
Alias																				<input type="radio"/>

QUALITY OF CLIENT NAME

<input type="radio"/>	Full name reported	<input type="radio"/>	Client doesn't know
<input type="radio"/>	Approximate or partial name reported	<input type="radio"/>	Client refused
		<input type="radio"/>	Data not collected

DATE OF BIRTH *[All Clients]*

		-			-					Age:
Month		Day				Year				

QUALITY OF DATE OF BIRTH

<input type="radio"/>	Full DOB reported	<input type="radio"/>	Client doesn't know
<input type="radio"/>	Approximate or partial DOB reported	<input type="radio"/>	Client refused
		<input type="radio"/>	Data not collected



GENDER *[All Clients]*

<input type="radio"/>	Female	<input type="radio"/>	Client doesn't know
<input type="radio"/>	Male	<input type="radio"/>	Client refused
<input type="radio"/>	Trans Female (MTF or Male to Female)	<input type="radio"/>	Data not collected
<input type="radio"/>	Trans Male (FTM or Female to Male)		
<input type="radio"/>	Gender Non-Conforming (i.e. not exclusively male or female)		

RACE (Select all applicable) *[All Clients]*

<input type="radio"/>	American Indian or Alaskan Native	<input type="radio"/>	Client does not know
<input type="radio"/>	Asian	<input type="radio"/>	Client refused
<input type="radio"/>	Black/African American	<input type="radio"/>	Data Not Collected
<input type="radio"/>	Hawaiian or Other Pacific Islander		
<input type="radio"/>	White/Caucasian		

ETHNICITY *[All Clients]*

<input type="radio"/>	Non-Hispanic/ Non-Latino	<input type="radio"/>	Client does not know
		<input type="radio"/>	Client refused
<input type="radio"/>	Hispanic/Latino	<input type="radio"/>	Data Not Collected
		<input type="radio"/>	Other

VETERAN STATUS *[All Adults]*

<input type="radio"/>	No	<input type="radio"/>	Client doesn't know
<input type="radio"/>	Yes	<input type="radio"/>	Client refused
		<input type="radio"/>	Data not collected

RELATIONSHIP TO HEAD OF HOUSEHOLD *[All Client Households]*

<input type="radio"/>	Self	<input type="radio"/>	Head of household - other relation to member
<input type="radio"/>	Head of household's child		
<input type="radio"/>	Head of household's spouse or partner	<input type="radio"/>	Other: non--relation member

DISABLING CONDITION *[All Clients]*

<input type="radio"/>	No	<input type="radio"/>	Client doesn't know
<input type="radio"/>	Yes	<input type="radio"/>	Client refused
		<input type="radio"/>	Data not collected

**INCOME FROM ANY SOURCE** *[Head of Household and Adults]*

<input type="radio"/> No	<input type="radio"/> Client doesn't know		
<input type="radio"/> Yes	<input type="radio"/> Client refused		
	<input type="radio"/> Data not collected		
IF "YES" TO INCOME FROM ANY SOURCE – INDICATE ALL SOURCES THAT APPLY			
Income Source	Amount	Income Source	Amount
<input type="radio"/> Alimony and Other Spousal Support		<input type="radio"/> Child support	
<input type="radio"/> Pension or Retirement income from former job		<input type="radio"/> Earned Income	
<input type="radio"/> Retirement Income from Social Security		<input type="radio"/> General Assistance (GA)	
<input type="radio"/> Social Security Disability Insurance (SSDI)		<input type="radio"/> Private Disability Insurance	
<input type="radio"/> Supplemental Security Income (SSI)		<input type="radio"/> Unemployment Insurance	
<input type="radio"/> TANF (Temporary Assist for Needy Families)		<input type="radio"/> Worker's Compensation	
<input type="radio"/> VA Service Connected Disability Compensation		<input type="radio"/> Other source	
<input type="radio"/> VA Non--Service Connected Disability Pension		Specify Other"	
Total monthly amount:			

RECEIVING NON-CASH BENEFITS *[Head of Household and Adults]*

<input type="radio"/> No	<input type="radio"/> Client doesn't know
<input type="radio"/> Yes	<input type="radio"/> Client refused
	<input type="radio"/> Data not collected
IF "YES" TO NON-CASH BENEFITS – INDICATE ALL SOURCES THAT APPLY	
<input type="radio"/> Supplemental Nutrition Assistance Program (SNAP)	<input type="radio"/> TANF Childcare Services
<input type="radio"/> Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	<input type="radio"/> TANF Transportation Services
<input type="radio"/> Other (Specify):	<input type="radio"/> Other TANF-funded services

COVERED BY HEALTH INSURANCE *[All Clients]*

<input type="radio"/> No	<input type="radio"/> Client doesn't know
<input type="radio"/> Yes	<input type="radio"/> Client refused
	<input type="radio"/> Data not collected
IF "YES" TO HEALTH INSURANCE - HEALTH INSURANCE COVERAGE DETAILS	
<input type="radio"/> MEDICAID	<input type="radio"/> Employer Provided Health Insurance
<input type="radio"/> MEDICARE	<input type="radio"/> Insurance Obtained through COBRA
<input type="radio"/> State Children's Health Insurance (SCHIP)	<input type="radio"/> Private Pay Health Insurance
<input type="radio"/> Veteran's Administration (VA) Medical Services	<input type="radio"/> State Health Insurance for Adults
<input type="radio"/> Other (specify):	<input type="radio"/> Indian Health Services Program

Signature of applicant stating all information is true and correct **Date**

Administration

Interviewer's Name _____	Agency _____	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____ : ____ AM/PM	Survey Location _____

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name _____	Nickname _____	Last Name _____
In what language do you feel best able to express yourself? _____		
Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Security Number _____
		Consent to participate <input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- ☐ Shelters
☐ Transitional Housing
☐ Safe Haven
☐ **Outdoors**
☐ **Other (specify):** _____

☐ **Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

2. How long has it been since you lived in permanent stable housing? _____

☐ Refused

3. In the last three years, how many times have you been homeless? _____

☐ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:

B. Risks

4. In the past six months, how many times have you...

a) Received health care at an emergency department/room? _____

☐ Refused

b) Taken an ambulance to the hospital? _____

☐ Refused

c) Been hospitalized as an inpatient? _____

☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? _____

☐ Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? _____

☐ Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? _____

☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR **EMERGENCY SERVICE USE.**

SCORE:

5. Have you been attacked or beaten up since you've become homeless? ☐ Y ☐ N ☐ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF HARM.**

SCORE:

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES**.

SCORE:

8. Does anybody force or trick you to do things that you do not want to do? ☐ Y ☐ N ☐ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION**.

SCORE:

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? ☐ Y ☐ N ☐ Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

SCORE:

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? ☐ Y ☐ N ☐ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? ☐ Y ☐ N ☐ Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused
19. When you are sick or not feeling well, do you avoid getting help? ☐ Y ☐ N ☐ Refused
20. **FOR FEMALE RESPONDENTS ONLY:** Are you currently pregnant? ☐ Y ☐ N ☐ N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused
- b) A past head injury? ☐ Y ☐ N ☐ Refused
- c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

IF THE RESPONDENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.0

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ Y ☐ N ☐ Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

27. **YES OR NO:** Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? ☐ Y ☐ N ☐ Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	Score: Recommendation: 0-3: no housing intervention 4-7: an assessment for Rapid Re-Housing 8+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/4	
D. WELLNESS	/6	
GRAND TOTAL:	/17	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ____ : ____ or Morning/Afternoon/Evening/Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

2021 Continuum of Care (CoC) Notice of Funding Opportunity (NOFO) Request for Letters of Intent

chap <chap@ppchp.org>

Fri 8/27/2021 5:50 PM

To: chap <chap@ppchp.org>

Bcc: atovar@partnersinhousing.org <atovar@partnersinhousing.org>; asimpson@ppld.org <asimpson@ppld.org>; aida@ppunitedway.org <aida@ppunitedway.org>; talk_2_ee@hotmail.com <talk_2_ee@hotmail.com>; aking@springsgov.com <aking@springsgov.com>; Alexandra.Hoffman@coloradohealthnetwork.org <Alexandra.Hoffman@coloradohealthnetwork.org>; Alison Gerbig <agerbig@rmhumanservices.org>; Allison.ometer@theplacecos.org <Allison.ometer@theplacecos.org>; awarner@ccharitiescc.org <awarner@ccharitiescc.org>; alma.scott@usw.salvationarmy.org <alma.scott@usw.salvationarmy.org>; alymae_y@yahoo.com <alymae_y@yahoo.com>; Amanda.Estes@PeakviewBH.com <Amanda.Estes@PeakviewBH.com>; ammcdermith@gmail.com <ammcdermith@gmail.com>; Amber Ptak <amber.ptak@ppchp.org>; yayagirlfriend2@gmail.com <yayagirlfriend2@gmail.com>; amyamyamy35@aol.com <amyamyamy35@aol.com>; Amy Vargo <amy.vargo@ppchp.org>; guidance@ithakaland.org <guidance@ithakaland.org>; andi@compassionandaction.org <andi@compassionandaction.org>; andrea.kedley@cchacares.com <andrea.kedley@cchacares.com>

 2 attachments (308 KB)

2021 NOFO Announcement.pdf; 2021 NOFO Request for LOI.pdf;

On Wednesday, August 18, 2021, the U.S. Department of Housing and Urban Development (HUD) released the Continuum of Care (CoC) Notice of Funding Opportunity (NOFO). The Pikes Peak Continuum of Care (PPCoC) is the Collaborative Applicant representing El Paso County, Colorado. In doing so, PPCoC is required to keep the community updated on the NOFO process. [Click here to access CHP's, NOFO Page!](#) The page will populate with more information in the coming weeks.

*****The NOFO competition is open for new Domestic Violence Bonus Projects and CoC Housing Projects.** Attached is the official Request for Letters of Intent which provides all the information needed to submit a Letter of Intent. Also attached is the official NOFO Announcement.

If you have any question, please email Tyler Groff (ppcoc@ppchp.org).

Coalition for Homelessness Advocates & Providers – CHAP 2.0

CHAP is a Coalition that is an open and flexible forum for service providers and citizens working together to identify needs and priorities related to coordination of services for people at risk of or experiencing homelessness in El Paso County.



The FY2021 CoC Program Competition is Now Open

Date: August 27, 2021

On Wednesday, August 18, 2021, the U.S. Department of Housing and Urban Development (HUD) released the Continuum of Care (CoC) Notice of Funding Opportunity (NOFO). The Pikes Peak Continuum of Care is El Paso County Collaborative Applicant. In doing so, PPCoC is required to keep the community updated on the NOFO process. [Click here to access CHP's NOFO Page!](#) The page will populate with more information in the coming weeks.

If you plan to apply or are interested in applying, please review the HUD Exchange [FY 2021 Continuum of Care \(CoC\) Program Competition: Funding Opportunity](#) page.

The CoC Application, CoC Priority Listing, and Project Applications were made **available on Friday, August 19, 2021**, in e-snaps. Project Applicants will be able to access the applications to review, update, and enter information that is required for the application process.

Submission Deadline: Tuesday, November 16, 2021 at 8:00 PM EST.

Please note that we encourage new applicants to apply.

If you have any specific questions about the CoC NOFO, please contact:

Tyler Groff
ppcoc@ppchp.org
719.632.5094 ext.116

Thank you for your time and continued work in bringing resources into El Paso County.



Date: September 7, 2021

Subject: AMENDED Due Date for Request for Letters of Intent for New Domestic Violence Bonus Projects and CoC Housing Projects for the Fiscal Year 2021 CoC Program Competition

- ***Amendment – The original LOI due date of September 8th has been extended to Friday, September 10th 2021, at 5 PM.***

On Wednesday, August 18, 2021, the U.S. Department of Housing and Urban Development (HUD) released the Continuum of Care (CoC) Notice of Funding Opportunity (NOFO). Approximately \$2,656,000,000 is available in this FY 2021 CoC Program NOFO, including up to \$102,000,000 available for Domestic Violence (DV) Bonus projects (of which up to \$50,000,000 is carried over from the Further Consolidated Appropriations Act, 2020).

Our community has the capacity to accept new DV Bonus projects in order to commit to the goal of ending homelessness. With this new funding cycle, our community may create new projects through DV bonus and reallocation funding. Please review the entire 2021 HUD NOFO carefully to decide whether your organization wants to apply for bonus funding. If your organization is considering applying for a new project, you must send a non-binding letter of intent to apply.

To be eligible to apply, please submit a Letter of Intent (LOI) to the PPCoC for consideration. The PPCoC must receive your letter no later than **5:00 PM on Friday, September 10th 2021**. If we do not receive a letter of intent by the deadline, your organization will not be eligible to apply.

To verify the eligibility of your project, [please click here to fully review the NOFO for Fiscal Year 2021](#). Once you submit your LOI, [please click here to view important documents and timeline for next steps](#)!

Be aware that each project is required to provide 25% in matching funds (cash, in-kind, program fees) and is encouraged to leverage other funds as well. All recipients of CoC funding must also contribute 2% of the grant value in program fees to the PPCoC.

Domestic Violence (DV) Bonus: The PPCoC is eligible for up to \$200,000, or a minimum of \$50,000 to create DV Bonus Projects.

CoC Housing Funds: The PPCoC is eligible for up to \$100,000 with a minimum of \$25,000 for new projects provided it has demonstrated the ability to reallocate lower performing projects to create new higher performing projects.

Your organization's LOI must contain the following:

1. Name of your Organization
2. Name for your Proposed Project



A PROGRAM OF 

3. Dollar amount for which you wish to apply and acknowledgement of 25% match (include estimated project budgets for leasing, rental assistance, operations, supportive services, and admin)
4. Point of Contact for the Project (name, title, address, phone, and email)
5. Type of Project:
 - a. Rapid Rehousing (PH-RRH) projects
 - b. Joint TH and PH-RRH component projects
 - c. Coordinated Entry SSO (SSO-CE)
6. Description of the Project (1500 words or less):
 - a. Brief Summary of the Project
 - b. Number of Units Proposed
 - c. Number of Households to be served in a year and estimated cost per household
 - d. Populations to be served
 - e. Overview of Supportive Services offered to program participants
 - f. Strategies to follow the principles of Housing First
 - g. Strategies for helping clients access resources (e.g. Medicaid, SNAP, TANF, SSI/SSDI, VA benefits, transportation, employment resources, etc)
 - h. Strategies on ensuring project participants remain housed

Letters of Intent (LOI) are **due by 5:00 PM on Friday, September 10th, 2021.**

Please email the LOI to: PPCoC@ppchp.org. Letters received after the deadline will not be eligible to apply.

LOI submissions will be reviewed for eligibility. All eligible applicants will be invited to submit an application for a new project in the 202\1 competition.

If you have any questions, please contact:

Tyler Groff

ppcoc@ppchp.org

719.632.5094 ext.116

2021 NOFO Request for Letters of Intent Due Date Amended

chap <chap@ppchp.org>

Tue 9/7/2021 10:25 PM

To: chap <chap@ppchp.org>

Bcc: atovar@partnersinhousing.org <atovar@partnersinhousing.org>; asimpson@ppld.org <asimpson@ppld.org>; aida@ppunitedway.org <aida@ppunitedway.org>; talk_2_ee@hotmail.com <talk_2_ee@hotmail.com>; aking@springsgov.com <aking@springsgov.com>; Alexandra.Hoffman@coloradohealthnetwork.org <Alexandra.Hoffman@coloradohealthnetwork.org>; Alison Gerbig <agerbig@rmhumanservices.org>; Allison.ometer@theplacecos.org <Allison.ometer@theplacecos.org>; awarner@ccharitiescc.org <awarner@ccharitiescc.org>; alma.scott@usw.salvationarmy.org <alma.scott@usw.salvationarmy.org>; alymae_y@yahoo.com <alymae_y@yahoo.com>; Amanda.Estes@PeakviewBH.com <Amanda.Estes@PeakviewBH.com>; ammcdermith@gmail.com <ammcdermith@gmail.com>; Amber Ptak <amber.ptak@ppchp.org>; yayagirlfriend2@gmail.com <yayagirlfriend2@gmail.com>; amyamyamy35@aol.com <amyamyamy35@aol.com>; Amy Vargo <amy.vargo@ppchp.org>; guidance@ithakaland.org <guidance@ithakaland.org>; andi@compassionandaction.org <andi@compassionandaction.org>; andrea.kedley@cchacares.com <andrea.kedley@cchacares.com>

The Pikes Peak Continuum of Care has Amended the Due Date for NOFO Letters of Intent from 9/8 to Friday, September 10th at 5 PM. Attached is the Amended 2021 NOFO Request for LOI. Please email the LOI to: PPCoC@ppchp.org. Letters received after the deadline will not be eligible to apply.

If you have any questions, please email Tyler Groff (ppcoc@ppchp.org).

Coalition for Homelessness Advocates & Providers – CHAP 2.0

CHAP is a Coalition that is an open and flexible forum for service providers and citizens working together to identify needs and priorities related to coordination of services for people at risk of or experiencing homelessness in El Paso County.



Date: August 27, 2021

Subject: Request for Letters of Intent for New Domestic Violence Bonus Projects and CoC Housing Projects for the Fiscal Year 2021 CoC Program Competition

On Wednesday, August 18, 2021, the U.S. Department of Housing and Urban Development (HUD) released the Continuum of Care (CoC) Notice of Funding Opportunity (NOFO). Approximately \$2,656,000,000 is available in this FY 2021 CoC Program NOFO, including up to \$102,000,000 available for Domestic Violence (DV) Bonus projects (of which up to \$50,000,000 is carried over from the Further Consolidated Appropriations Act, 2020).

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To be eligible to apply, please submit a Letter of intent (LOI) to the PPCoC for consideration. The PPCoC must receive your letter no later than **5:00 PM on Wednesday, September 8, 2021**. If we do not receive a letter of intent by the deadline, your organization will not be eligible to apply.

To verify the eligibility of your project, [please click here to fully review the NOFO for Fiscal Year 2021](#). Once you submit your LOI, [please click here to view important documents and timeline for next steps!](#)

Be aware that each project is required to provide 25% in matching funds (cash, in-kind, program fees) and is encouraged to leverage other funds as well. All recipients of CoC funding must also contribute 2% of the grant value in program fees to the PPCoC.

Domestic Violence (DV) Bonus: The PPCoC is eligible for up to \$200,000, or a minimum of \$50,000 to create DV Bonus Projects.

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Your organization's LOI must contain the following:

1. Name of your Organization
2. Name for your Proposed Project



A PROGRAM OF 

3. Dollar amount for which you wish to apply and acknowledgement of 25% match (include estimated project budgets for leasing, rental assistance, operations, supportive services, and admin)
4. Point of Contact for the Project (name, title, address, phone, and email)
5. Type of Project:
 - a. Rapid Rehousing (PH-RRH) projects
 - b. Joint TH and PH-RRH component projects
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6. Description of the Project (1500 words or less):
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 - g. Strategies for helping clients access resources (e.g. Medicaid, SNAP, TANF, SSI/SSDI, VA benefits, transportation, employment resources, etc)
 - h. Strategies on ensuring project participants remain housed

Letters of Intent (LOI) are **due by 5:00 PM on Wednesday, September 8, 2021.**

Please email the LOI to: PPCoC@ppchp.org. Letters received after the deadline will not be eligible to apply.

LOI submissions will be reviewed for eligibility. All eligible applicants will be invited to submit an application for a new project in the 2021 competition.

If you have any questions, please contact:

Tyler Groff

ppcoc@ppchp.org

719.632.5094 ext.116

Reminder | 2021 Continuum of Care (CoC) Notice of Funding Opportunity (NOFO) Request for Letters of Intent Due 9/8/21

chap <chap@ppchp.org>

Thu 9/2/2021 5:06 PM

To: chap <chap@ppchp.org>

Bcc: sarah.linehan@peakvista.org <sarah.linehan@peakvista.org>; services@ithakaland.org <services@ithakaland.org>; Sarah.Willow@coloradohealthnetwork.org <Sarah.Willow@coloradohealthnetwork.org>; coloradofame@gmail.com <coloradofame@gmail.com>; scorrea@rmhumanservices.org <scorrea@rmhumanservices.org>; setfreegodshouse@gmail.com <setfreegodshouse@gmail.com>; stoops@cpcd.org <stoops@cpcd.org>; Shannon Scanlon <Shannon.Scanlon@theplacecos.org>; Sharon.burton@gmail.com <Sharon.burton@gmail.com>; sahughes15@hotmail.com <sahughes15@hotmail.com>; squirrelbrain01@hotmail.com <squirrelbrain01@hotmail.com>; shawna.kemppainen@theplacecos.org <shawna.kemppainen@theplacecos.org>; smurrell@rmhumanservices.org <smurrell@rmhumanservices.org>; sshirls17@yahoo.com <sshirls17@yahoo.com>; singwolf8@gmail.com <singwolf8@gmail.com>; Stephanie Edwards <Stephanie.Edwards@dreamcenters.com>; anotherlifefoundation@hotmail.com <anotherlifefoundation@hotmail.com>; smjohnson@springsgov.com <smjohnson@springsgov.com>; Susan Garrett <sgarrett@uccs.edu>; susan@centralcoahec.org <susan@centralcoahec.org>

This is a reminder email that the NOFO competition is open for new Domestic Violence Bonus Projects and CoC Housing Projects. Attached is the official Request for Letters of Intent which provides all the information needed to submit a Letter of Intent. Also attached is the official NOFO Announcement. Letters of Intent are **due by 5:00 PM on Wednesday, September 8, 2021.**

If you have any question, please email Tyler Groff (ppcoc@ppchp.org).

Coalition for Homelessness Advocates & Providers – CHAP 2.0

CHAP is a Coalition that is an open and flexible forum for service providers and citizens working together to identify needs and priorities related to coordination of services for people at risk of or experiencing homelessness in El Paso County.

Pikes Peak Continuum of Care (PPCoC)

Notice of Funding Opportunity (NOFO) Process and Procedure

1. **PPCoC Governing Board Pre-Competition Planning in January 2021:** PPCoC Governing Board and local leadership stakeholders participate in a two-week System Design Clinic with the National Alliance to End Homelessness to work on PPCoC priorities and strategies to develop an updated Strategic Plan.
2. **CoC Registration- Collaborative Released January due in March:** CoC Registration-Collaborative applicants must submit a completed FY Program Registration in e-snaps.
3. **PPCoC Forms R&P Committee: Invites Sent by Email on June 9, 2021:** Per HUD guidance, the 2021 PPCoC NOFO Ranking Committee membership includes (1) housing and supportive service experts, (2) non-provider community stakeholders, and (3) non-provider CoC members, including Governing Board members. While service providers/applicants are key to the work of the CoC, membership in the R&P Committee limits service provider participation to avoid potential conflicts of interest when performing the ranking and prioritization of projects. CoC Governing Board members who are not part of organizations which submitted applications for funding will be tasked with the final review and approval of the R&P Committee project ranking recommendations. The 2021 PPCoC Ranking Committee was made up of five members of the community.
4. **PPCoC Governing Board Strategic Recommendations for funding, June 25, 2021:** PPCoC Governing Board decided on vision for Strategic Plan to make homelessness rare, brief, and nonrecurring. PPCoC incorporated strategies from the System Design Clinic to help influence local priorities for PPCoC funding.
5. **NOFO Competition Posted by HUD on Wednesday, August 18, 2021**
 - a. The PPCoC Reviewed the NOFO and supportive documents posted on the [HUD Continuum of Care Program Competition](#). Per 24 CFR 578.9 – CoCs are required to design, operate, and follow a collaborative process for the development of an application in response to a NOFO issued by HUD. CoC's should implement internal competition deadlines and notification processes to ensure transparency and fairness at the local level. Implementation of deadlines is part of the scoring criteria. The following timeline was set into place in agreement with Per 24, CFR 578.9 and Section VI, 3, 4 of the NOFO. The below timeline was published for the community to view on September 9, 2021 at [CHP's CoC NOFO Page](#).
 - i. **August 19, 2021:** PPCoC sent the 2021 Grant Inventory Worksheets (GIW) to all renewal Agencies asking for confirmation of their intent to apply for the next round of NOFO funds. Renewal Agencies responded by August 23, 2021. Of all the Renewal Agencies listed on the 2021 GIW, one did not respond and therefore was not invited to apply.
 - ii. **August 23, 2021:** The Ranking and Prioritization Committee discussed priorities from the PPCoC Board, especially around recapture of CoC funds as an identified priority and review the past spending performance of CoC Projects.
 - iii. **August 27, 2021:** PPCoC notified the community of NOFO Request for Letter of Intent (LOI) through the Coalition for Homelessness Advocates & Providers Listserv which reaches over 400 members in the Pikes Peak

Community. LOI was for new Domestic Violence Bonus Projects and CoC Housing Projects. LOIs due date was September 8, 2021.

- iv. **September 8, 2021 – September 15, 2021:** The NOFO R&P Committee reviews and votes on LOIs submitted. LOI voting rubric based on *Section V. Eligibility Information* of the NOFO.
- v. **September 15, 2021:** Renewal Agencies invited to start working on the Project E-snaps Application. In addition to E-snaps, PPCoC requested that all New & Renewal Agencies Submit a PPCoC Agency Specific and Project Specific Narrative Applications. PPCoC Agency Specific and Project Specific Narrative Applications were due on October 7, 2021. Reminder email sent to Agencies on October 10, 2021.
- vi. **September 16, 2021:** New Agencies that submitted LOIs and met all eligibility criteria set by HUD were invited to setup an E-snaps account and start the Project E-Snaps Application. In addition to E-snaps Project Application, PPCoC requested that all New & Renewal Agencies Submit a PPCoC Agency Specific and Project Specific Narrative Applications. PPCoC Agency Specific and Project Specific Narrative Applications due on October 7, 2021. Reminder email sent to Agencies on October 10, 2021.
- vii. **September 24, 2021:** PPCoC held optional Technical Assistance hours for all agencies, new and renewal.
- viii. **September 27, 2021:** PPCoC held a required training for new agencies.
- ix. **September 29, 2021:** PPCoC held optional Technical Assistance hours for all agencies, new and renewal.
- x. **October 7, 2021:** PPCoC Agency Specific and Project Specific Narrative Applications were due to the R&P Committee. Narrative Applications and supporting documents sent to the NOFO R&P Committee along with Phase One Scoring Rubric (Outlined in Section 6 of this document) to review and score.
- xi. **October 13, 2021:** NOFO R&P Committee meet to consolidate Phase One scoring on the PPCoC Agency Specific and Project Specific Narrative Applications. The R&P Committee formed Follow-up Questions to Agencies to respond to.
- xii. **October 15, 2021 – October 22, 2021:** Agencies received NOFO R&P Committee Follow-up Questions. Follow-up Questions due on October 15, 2021. Reminded email send to Agencies on October 20, 2021
- xiii. **October 15, 2021:** Agencies E-snaps Projects Application due in E-snaps.
- xiv. **October 19, 2021:** Project E-snaps applications sent to NOFO R&P Committee for review. E-snaps applications were not scored. The committee had the option to review the application for additional information.
- xv. **October 22, 2021:** Phase Two Scoring Rubric (Outlined in Section 6 of this document), Data of past project performance and Agencies responses to Follow – up Questions sent to NOFO R&P Committee.
- xvi. **October 27, 2021:** NOFO R&P Committee meets to consolidate Phase two project scores. R&P Committee used Phase 1 & Phase 2 scores to

create the recommended Ranking List to HUD. Project Ranking list was finalized by NOFO R&P Committee.

- xvii. **October 28, 2021:** The 2021 NOFO Project Ranking list sent to the PPCoC Governing Board to review and vote. Vote due on November 1, 2021.
 - xviii. **November 1, 2021:** PPCoC notified all NOFO applicants of final project ranking, source of funding, and reasons for the decision.
 - xix. **November 1, 2021:** PPCoC posts final NOFO Project Ranking List for public review. Project Ranking list posted on CHP's CoC NOFO page.
 - xx. **November 8 – 11, 2021:** PPCoC post the NOFO Collaborative Application for public comment.
 - xxi. **November 12 - 15, 2021:** PPCoC reviews public comments on Collaborative Application
 - xxii. **November 16, 2021:** PPCoC submits Collaborative Application and supporting documents through E-snaps.
- 6. Phase One & Phase Two Scoring Rubric & Final Project Ranking List:** Please note that copies of Phase One & Phase Two Scoring Rubrics are submitted with the Collaborative Application and can also be accessed on CHP's CoC NOFO page.
- a. Phase One Scoring Rubric:** Phase One Scoring Rubric is made up of two parts. Part A) Agency Information & Part B) Project Information. Both parts are scoring Agencies narratives responses to the PPCoC Agency Specific and Project Specific Narrative Applications.
 - i. Part A) Agency Information:** Part A score is made up of three sections; Agency Information, Agency Capacity, Coordinated Entry & HMIS.
 - ii. Part B) Project Information:** Part B score is made up of two sections: Project Information & Project Capacity.
 - iii. Scoring Each Question:** For each narrative question asked there is a Score Key which highlight critical information that agencies should have included in their responses. Narrative points are scored on project specific data elements, agencies' policies & procedures to align with HUD compliance and best practices such as Housing First principles, question being answered clearly and fully, and PPCoC required standards such as participation in CE and HMIS Data Entry. Please note that Renewal agencies received different questions from New agencies.
 - b. Phase Two Scoring Rubric:** Phase Two Scoring Rubric is made up of three parts.
 - i. Returning Funds:** Renewal projects past spending history and funds recaptured by HUD was presented to the R&P Committee for funds that ended in the calendar year 2020. Committee members scored each project based on the amount of funds unspent/recaptured by HUD. New Projects received 20 bonus points in the section.
 - ii. Clients Served:** The number of clients served by Renewal projects was compared to the estimated number of clients served documented from past NOFO application. The R&P Committee scored projects based on actual clients served vs. estimated clients served.

- iii. **Follow-Up Question Narratives:** The R&P Committee reviewed agencies responses to Follow-Up Questions. The Scoring key outline if agencies sufficiently answered the question and if narratives included additional data and examples.
 - c. **Final Project Ranking List:** Each Project received a final score parentage which is calculated by points earned from Phase One Scoring plus Phase Two Scoring. The R&P Committee ranked projects based on the final score percentage. The R&P Committee also decided if projects should be funded at requested amount or if an increase or decrease of funds should be made. The Committee selected a project for DV Bonus funds and utilized the Tier Two Project List.
- 7. **Project Point Structure:** The PPCoC used the following point structure to score and rank projects. The R&P Committee agreed that new projects should be awarded bonus points to create an incentive for new applicants who may apply for future NOFOs. The R&P Committee also agreed that Housing Projects point structure would differ slightly from the point structure used for HMIS and CE projects. The reason for the difference is that some of the questions were directed towards number of households served in a housing projects, which looks different from the HMIS and CE projects. Below is a breakdown of the project point structure.
 - a. **Housing Renewal Projects: Total possible points that can be earned is 200.**
 - i. **Phase One Points:** Phase One point structure is made up of the below two sections. The total possible points that a renewal housing project can receive is 150.
 - 1. Agency Specific Questions: 100 possible points
 - 2. Project Specific Questions: 50 possible points
 - ii. **Phase Two Points:** Phase Two point structure is made up of the below two sections. The total possible points that a renewal housing project can receive is 50.
 - 1. Returning Funds: 30 possible points
 - 2. Clients Served: 10 possible points
 - 3. Follow – Up Questions Narratives: 10 possible points
 - b. **HMIS Project: Total possible points that can be earned is 170.**
 - i. **Phase One Points:** Phase One point structure is made up of the below two sections. The HMIS project did not get scored on questions around clients served since the projects do no offer direct services to clients. The total possible points that the HMIS project can receive is 140.
 - 1. Agency Specific Questions: 100 possible points
 - 2. Project Specific Questions: 40 possible points
 - ii. **Phase Two Points:** Phase Two point structure is made up of the below section. Unlike the above Housing Renewal Project point structure, the HMIS project was not scored based on clients served since these projects do no offer direct services to clients. The total possible points that HMIS project can receive is 30 possible points.
 - 1. Returning Funds: 30 possible points
 - 2. Follow – Up Questions Narratives: No follow up questions were sent. 0 possible points and total was reduced by 10 points.



- c. **CE Project: Total possible points that can be earned is 180.**
 - i. **Phase One Points:** Phase One point structure is made up of the below two sections. The total possible points that the CE project can receive is 150.
 - 1. Agency Specific Questions: 100 possible points
 - 2. Project Specific Questions: 50 possible points
 - ii. **Phase Two Points:** Phase Two point structure for the CE project is made up of the below section. Unlike the above Housing Renewal Project point structure, the CE project was not scored based on clients served since these projects do not offer direct services to clients. The total possible points that HMIS project can receive is 30.
 - 1. Returning Funds: 30 possible points
 - 2. Follow – Up Questions Narratives: No follow up questions were sent. 0 possible points and total was reduced by 10 points.
- d. **New Projects: Total possible points that can be earned is 160.**
 - i. **Phase One Points:** Phase One point structure is broken up into the below two sections. The total possible points that a new housing project can receive is 150.
 - 1. Agency Specific Questions: 100 possible points
 - 2. Project Specific Questions: 50 possible points
 - 3. **Phase Two Points:** Phase Two point structure is made up of the below section. New projects were not scored on past project performance (Returning Funds & Clients Served). The total possible points that a new housing project can receive is 10.
 - 4. In addition to possible points that could be earned, the PPCoC R&P Committee decided to award all new housing projects 20 bonus points. This provides an incentive for future applications to submit new project applications.
 - 5. Follow – Up Questions Narratives: 10 possible points

Phase One - Project Specific Questions

Project Information

No Score for this section. Simply enter info.

Enter Project Name	
Enter Type of CoC Project	
Enter Requested Funding Amount	\$ -

New Project Total Score

Project Information	0
Project Capacity	0
Total (Out of 50)	0

Question 1) There is currently no additional funding in the FY 2021 CoC NOFO, but reallocation may occur. If reallocation does occur, please list the project's requested funding amount. This can be less, the same, or more than the current amount in the GIW. If different from the current funding amount, please explain why.

No Score for this section. Simply list Y/N	Y/N
Agency clearly answers the question.	
Agency provides a clear requested funding amount	
Agency indicates if the requested amount is less, the same, or more than the current amount.	
Agency explains why there is a change in requested amount (if any).	

Question 2) Describe the number of units proposed for FY 2021 and estimated cost per household for one year. How many people did your project serve last year with your awarded CoC funds?

Criteria	Score	Score Key
Agency clearly explains the estimated cost per household.		3 points max
Agency has a description for units.		2 points max
Total Score	0	5 Points Max

Question 3) What funding source(s) does your agency use for match? Please list all sources for this project including cash and in-kind match.

Criteria	Score	Score Key
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Agency has clear sources of match (cash and in-kind).		3 points max
Agency meets the 25% match amount.		2 points max
Total Score	0	5 Points Max

Project Capacity

Question 4) What is the average length of time between client identification in Coordinated Entry for a project and project enrollment? Please estimate the number of days.

Criteria	Score	Score Key
0 -30 Days		5 points max
30 – 60 Days		4 points max
60 – 90 Days		3 points max
90 – 120 Days		2 points max
120+ Days		1 point max
Total Score	0	5 Points Max

Question 5) What is the average length of time between project enrollment and move into housing? Please estimate the number of days.

Criteria	Score	Score Key
0 -30 Days		5 points max
30 – 60 Days		4 points max
60 – 90 Days		3 points max
90 – 120 Days		2 points max
120+ Days		1 point max
Total Score	0	5 Points Max

Question 6) Describe how the project uses a Housing First approach. Include 1) eligibility criteria, 2) process for accepting new clients, 3) process and criteria for exiting clients. Demonstrate that there are no preconditions to project entry and project participants are terminated in only the most severe cases.

Criteria	Score	Score Key
Agency clearly answers the question.		3 points max
Agency describes eligibility criteria.		3 points max

Agency describes process for accepting new clients and there are no preconditions to project entry.		3 points max
Agency describes process and criteria for exiting clients.		3 points max
Agency will only exit participants for the most severe cases.		3 points max
Total Score	0	15 Points Max

Question 7) List and describe what types of supportive services the housing project offers. Provide specific examples of community partners the housing project connects participants to and explain why these connections help with long-term participant success including opportunities to increase cash and non-cash benefits.

Criteria	Score	Score Key
Agency clearly answers the question.		3 points max
Agency provides a list of the types of supportive services they offer (3 points)		3 points max
Agency provides specific examples of community partners (3 points)		3 points max
Agency describes ways they support clients in increasing cash benefits (3 points)		3 points max
Agency describes ways to they support clients increase non-cash benefits for clients (3 points)		3 points max
Total Score	0	15 Points Max

Annual Performance Report

No Score for this section. Simply list Y/N	Y/N
Question 8) Average Project Participant Length of Stay in Days for stayers (APR Q22b)	
Question 9) Average Project Participant Length of Stay in Days for leavers (APR Q22b)	
Question 10) Percentage of Exit to Positive Housing (APR Q23c)	
Question 11) Percent of participants with new or increased earned income for project stayers (APR Q19a1)	
Question 12) Percent of participants with new or increased other income for project stayers (APR Q19a1)	
Question 13) Percent of participants with new or increased earned income for project leavers (APR Q19a2)	
Question 14) Percent of participants with new or increased other income for project leavers (APR Q19a2)	



Phase Two Score Sheet

Section One - Returning Funds (does not apply to new projects)

Criteria	Score	Score Key
Returned 0% of funds		30 points max
Returned 1 - 5% of funds		25 points max
Returned 5 - 10% of funds		20 points max
Returned 10 - 20% of funds		10 points max
Returned 20% + of funds		0 points
Total Score	0	30 Max Points

Section Two - Clients Served

Criteria	Score	Score Key
Served more clients than proposed		10 points max
Served same number of clients as proposed		5 points
Served fewer clients than proposed		0 points
Total Score	0	10 Max Points

Section Three - Follow - Up Question Narratives

Criteria	Score	Score Key
Agency sufficiently answers the question		5 points
Agency provides additional details/examples/data		5 points
Total Score	0	10 Max Points

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:37 PM

To: Greg Morris <Greg@athrc.com>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

 1 attachments (176 KB)

Ascending to Health Respite Care 2021 NOFO Ranking Committee Funding Decision.pdf;

Dear Mr. Morris,

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

Per the HUD CoC Estimated Annual Renewal Demand Report, the Pikes Peak Continuum of Care was awarded \$2,530,648 for Tier 1 Funding. The Ranking Committee placed thirteen projects in Tier 1 funding and one in Tier 2. The Pikes Peak Continuum of Care also identified a Domestic Violence Bonus Grant to be recommended in the priority listing.

The Ranking Committee used a scoring tool to create efficiencies and consistency in the ranking and prioritizing of applications. Projects received points based on meeting basic CoC threshold requirements, the project's alignment with HUD and CoC priorities, project effectiveness, and data quality.

Attached you will find the Ranking Committee Funding Recommendation to HUD for your project(s). The recommended ranking was reviewed and approved by the non-applicant Governing Board members. You will be able to view the entire NOFO ranking sheet on the below link. The list will be published by Wednesday, November 3rd.

<https://www.ppchp.org/homelessness/hud-coc-nofo/>

We sincerely appreciate the efforts you made to submit an application and the work you do every day to ensure that people are housed and cared for.

Should you have any questions or comments about the rankings, please do not hesitate to reach out to Evan Caster (evan.caster@ppchp.org).



November 1, 2021

Gregory Morris
Ascending to Health Respite Care
723 North Weber Street, Colorado Springs, 80903

Dear Mr. Morris:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank Ascending to Health Respite Care for submitting a consolidated project for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, the Ranking and Prioritization Committee has placed your Consolidated project in Tier two funding at the requested amount.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
ATH-Renewal CO0149-2004 FY2021 Consolidation, surviving	\$ 93,551.00	\$ 93,551.00	Tier 2 Funding
Reason(s) for funding decision			
<ul style="list-style-type: none">• Higher amount of funds recaptured by HUD• No response to Ranking Committee Follow - Up Questions sent by email on 10/15 and 10/20			

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage Ascending to Health Respite Care to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster
Senior Manager of Homeless Initiatives
evan.caster@ppchp.org
719.632.5094 ext. 227

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:39 PM

To: Chad E. Wright <cew@csha.us>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

Dear Mr. Wright,

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

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The Ranking Committee used a scoring tool to create efficiencies and consistency in the ranking and prioritizing of applications. Projects received points based on meeting basic CoC threshold requirements, the project's alignment with HUD and CoC priorities, project effectiveness, and data quality.

Attached you will find the Ranking Committee Funding Recommendation to HUD for your project(s). The recommended ranking was reviewed and approved by the non-applicant Governing Board members. You will be able to view the entire NOFO ranking sheet on the below link. The list will be published by Wednesday, November 3rd.

<https://www.ppchp.org/homelessness/hud-coc-nofo/>

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Should you have any questions or comments about the rankings, please do not hesitate to reach out to Evan Caster (evan.caster@ppchp.org).



November 1, 2021

Chad Wright
Colorado Springs Housing Authority
831 S. Nevada Av. Colorado Springs, 80903

Dear Mr. Wright:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank Colorado Springs Housing Authority for submitting a renewal project for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, the Ranking and Prioritization Committee is recommending that HUD funds your project in Tier 1 with a reduction in funds from \$132,857.00 to \$98,314.18.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
CO-504	\$ 132,857.00	\$ 98,314.18	Tier 1 Funding
Reason(s) for funding decision			
<ul style="list-style-type: none">Over 30% of funding recaptured by HUD each year for the past two Fiscal Years.			

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage your organization to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster
Senior Manager of Homeless Initiatives
evan.caster@ppchp.org
719.632.5094 ext. 227

Evan Caster

From: Tyler Groff
Sent: Monday, August 23, 2021 12:12 PM
To: Shawna Kemppainen; Greg Morris; 'Anne Markley'
Cc: Evan Caster
Subject: Re: 2021 NOFO | Follow Up Action Required by Monday, August 23, 2021

Importance: High

Good afternoon,
You are receiving this email because I have yet to hear back from you.
Please respond by the end of today.

Thank you

Tyler Groff | Project Coordinator

tyler.groff@ppchp.org

719.632.5094 ext.116

Pronouns: He/Him/His

[Why Pronouns Matter](#)

www.ppchp.org



CONFIDENTIALITY NOTICE: This email message and any documents attached to it are confidential and may contain information that is various federal and state laws, including HIPAA Privacy Rule. This information is intended for use solely by the entity or individual to whom it is addressed.

From: Tyler Groff
Sent: Thursday, August 19, 2021 3:12 PM
To: Shawna Kemppainen <Shawna@theplacecos.org>; 'jahlia.daly@state.co.us' <jahlia.daly@state.co.us>; Toombs - DOLA, Kristin <kristin.toombs@state.co.us>; Chad Wright <cew@csa.us>; broalstad@homewardpikespeak.org <broalstad@homewardpikespeak.org>; Greg Morris <Greg@athrc.com>; 'Anne Markley' <AMarkley@tessacs.org>
Cc: Evan Caster <evan.caster@ppchp.org>
Subject: 2021 NOFO | Follow Up Action Required by Monday, August 23, 2021

Good afternoon,
As you have already seen HUD has announced this year's FY 2021 CoC Program Competition or NOFO (Notice of Funding Opportunity). Attached is the 2021 GWI indicating the most recent CoC renewal projects funded by the CoC.

We are gauging interest among current CoC-project funding recipients to renew CoC funds.

For next steps, **please review and respond by end of business day on Monday, August 23, 2021.**

- Respond to me directly (tyler.groff@ppchp.org), indicating whether you will renew the project shown in the GWI.

- In addition, please see the below notice from HUD indicating that the NOFO application is open in e-snaps.
- Please log into e-snaps and make sure you can access the NOFO application. Please let me know if you have any questions.

Thank you for your time and partnership.

Tyler Groff | Project Coordinator

tyler.groff@ppchp.org

719.632.5094 ext.116

Pronouns: He/Him/His

[Why Pronouns Matter](#)

FY 2021 Continuum of Care (CoC) Program Competition Update – August 19, 2021

The Notice of Funding Opportunity (NOFO) for the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition (NOFO) is available on [Grants.gov](https://www.grants.gov) and the [Funding Opportunities](#) page on HUD's website.

Submission Deadline: Tuesday, November 16, 2021 at 8:00 PM EST

Updates:

- *e-snaps*, the electronic application system for the CoC Program Competition, is open
- The following documents have been posted on the [CoC Program Competition](#) page of HUD's website:
 - FY 2021 CoC Estimated ARD Reports – there are two reports:
 - One report for all Collaborative Applicants that **do not** have UFA designation
 - One report for Collaborative Applicants with UFA designation and includes the available UFA Costs amount
- Detailed Instructions
 - CoC Application
 - CoC Priority Listing
 - Project Applications – all
- Navigational Guides
 - Accessing the Project Application
 - New Project Application
 - Renewal Project Application
 - UFA Costs Project Application
 - Planning Costs Project Application
 - CoC Priority Listing

Additional guidance including Frequently Asked Questions (FAQs) and remaining Navigational Guides will be posted to the CoC Program Competition page within the next two weeks.

Questions

Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.

Questions related to *e-snaps* functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.

Listserv Notifications

If you are aware or suspect that the Collaborative Applicant or project applicant for your CoC is not currently receiving these listserv messages, please forward the following link so the Collaborative Applicant or project applicant can register to receive listserv messages as this is the only form HUD uses to communicate CoC Program information to the public:

- [SNAPS Competitions](#), specifically for Competition related messages; and
- [SNAPS Program Information](#), general information regarding SNAPS programs.

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:41 PM

To: Toombs - DOLA, Kristin <kristin.toombs@state.co.us>; Daly - DOLA, Jahlia <jahlia.daly@state.co.us>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

Dear Ms. Toombs,

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

Per the HUD CoC Estimated Annual Renewal Demand Report, the Pikes Peak Continuum of Care was awarded \$2,530,648 for Tier 1 Funding. The Ranking Committee placed thirteen projects in Tier 1 funding and one in Tier 2. The Pikes Peak Continuum of Care also identified a Domestic Violence Bonus Grant to be recommended in the priority listing.

The Ranking Committee used a scoring tool to create efficiencies and consistency in the ranking and prioritizing of applications. Projects received points based on meeting basic CoC threshold requirements, the project's alignment with HUD and CoC priorities, project effectiveness, and data quality.

Attached you will find the Ranking Committee Funding Recommendation to HUD for your project(s). The recommended ranking was reviewed and approved by the non-applicant Governing Board members. You will be able to view the entire NOFO ranking sheet on the below link. The list will be published by Wednesday, November 3rd.

<https://www.ppchp.org/homelessness/hud-coc-nofo/>

We sincerely appreciate the efforts you made to submit an application and the work you do every day to ensure that people are housed and cared for.

Should you have any questions or comments about the rankings, please do not hesitate to reach out to Evan Caster (evan.caster@ppchp.org).

November 1, 2021

Kristin Toombs
Colorado Division of Housing
1313 Sherman St. Ste. 320 Denver, 80203

Dear Ms. Toombs:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank the Colorado Division of Housing for submitting a renewal project for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, The Ranking and Prioritization Committee is recommending that HUD funds your project in Tier 1 funding at the requested amount.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
Consolidated PSH	\$ 724,039.00	\$ 724,039.00	Tier 1 Funding

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage the Division of Housing to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster
Senior Manager of Homeless Initiatives
evan.caster@ppchp.org
719.632.5094 ext. 227

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:43 PM

To: broalstad@homewardpikespeak.org <broalstad@homewardpikespeak.org>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

Dear Ms. Roalstad,

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

Per the HUD CoC Estimated Annual Renewal Demand Report, the Pikes Peak Continuum of Care was awarded \$2,530,648 for Tier 1 Funding. The Ranking Committee placed thirteen projects in Tier 1 funding and one in Tier 2. The Pikes Peak Continuum of Care also identified a Domestic Violence Bonus Grant to be recommended in the priority listing.

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November 1, 2021

Beth Hall Roalstad
Homeward Pikes Peak
2010 Bijou St. Colorado Springs, 80909

Dear Ms. Roalstad:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank Homeward Pikes Peak for submitting two renewal projects for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, the Ranking and Prioritization Committee is recommending that HUD funds both of your projects in Tier 1 funding at the requested amounts.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
Vet PSH	\$ 226,122.00	\$ 226,122.00	Tier 1 Funding
PSH Dual Diagnosis	\$ 531,431.00	\$ 531,431.00	Tier 1 Funding

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage HPP to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster
Senior Manager of Homeless Initiatives
evan.caster@ppchp.org
719.632.5094 ext. 227

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:44 PM

To: lej@KBFLC.ORG <lej@KBFLC.ORG>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

Dear Ms. Jenkins

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

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The Ranking Committee used a scoring tool to create efficiencies and consistency in the ranking and prioritizing of applications. Projects received points based on meeting basic CoC threshold requirements, the project's alignment with HUD and CoC priorities, project effectiveness, and data quality.

Attached you will find the Ranking Committee Funding Recommendation to HUD for your project(s). The recommended ranking was reviewed and approved by the non-applicant Governing Board members. You will be able to view the entire NOFO ranking sheet on the below link. The list will be published by Wednesday, November 3rd.

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November 1, 2021

Lisa Jenkins
Kingdom Builder's Family Life Center
PO Box 75524, Colorado Springs, 80910

Dear Ms. Jenkins:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank Kingdom Builder's Family Life Center for submitting a new project for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, The Ranking and Prioritization Committee is recommending that HUD funds your project as the Domestic Violence (DV) Bonus Grant applicant for the PPCoC with funding ranked in Tier 1 funding at the requested amount.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
Step Up Housing	\$ 189,777	\$ 189,777	DV Bonus Grant

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage Kingdom Builder's Family Life Center to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster
Senior Manager of Homeless Initiatives
evan.caster@ppchp.org
719.632.5094 ext. 227

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:46 PM

To: Victoria Ybanez <victoria@red-wind.net>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

Dear Ms. Ybanez,

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

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November 1, 2021

Victoria Ybanez
Red Wind Consulting, Inc.
53050 Tomah Drive, Suite 2500, Colorado Springs, 80918

Dear Ms. Ybanez:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank Red Wind Consulting, Inc. for submitting a new project for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, The Ranking and Prioritization Committee is recommending that HUD funds your project in Tier 1 funding at the request amount.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
Haseya Advocate	\$ 244,201.00	\$244,201.00	Tier 1 Funding

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage Red Wind to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster
Senior Manager of Homeless Initiatives
evan.caster@ppchp.org
719.632.5094 ext. 227

2021 NOFO Ranking and Prioritization Committee - Final Project Rank

PPCoC <PPCoC@ppchp.org>

Mon 11/1/2021 3:49 PM

To: shawna@theplacecos.org <shawna@theplacecos.org>

Cc: Evan Caster <evan.caster@ppchp.org>; Tyler Groff <tyler.groff@ppchp.org>

Dear Mx Kemppainen,

Members of the Pikes Peak Continuum of Care (CoC) Ranking and Prioritization (R&P) Committee met for a second time on Wednesday, October 27th, to discuss and make their final recommendations for the 2021 CoC NOFO competition. Fifteen projects were submitted for consideration for HUD funding, and among those projects were eleven renewal and four new projects from eight agencies.

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The Ranking Committee used a scoring tool to create efficiencies and consistency in the ranking and prioritizing of applications. Projects received points based on meeting basic CoC threshold requirements, the project's alignment with HUD and CoC priorities, project effectiveness, and data quality.

Attached you will find the Ranking Committee Funding Recommendation to HUD for your project(s). The recommended ranking was reviewed and approved by the non-applicant Governing Board members. You will be able to view the entire NOFO ranking sheet on the below link. The list will be published by Wednesday, November 3rd.

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Should you have any questions or comments about the rankings, please do not hesitate to reach out to Evan Caster (evan.caster@ppchp.org).



November 1, 2021

Shawna Kemppainen

The Place

423 East Cucharas St. Colorado Springs, 80903

Dear Mx Kemppainen:

On behalf of the Pikes Peak Continuum of Care and the Ranking and Prioritization Committee, I'd like to thank The Place for submitting 3 renewal projects for consideration for the 2021 Continuum of Care NOFO Competition. Upon further review of your application, the Ranking and Prioritization Committee is recommending that HUD funds all three of your projects in Tier 1 funding at the requested amounts.

Project Name	Requested Amount	CoC Suggested Amount	Funding Type
RRH	\$28,481.00	\$28,481.00	Tier 1 Funding
TH	\$49,272.00	\$49,272.00	Tier 1 Funding
PSH	\$212,683.00	\$212,683.00	Tier 1 Funding

Per HUD Regulations, you may appeal the committee's decision if you disagree with it. The process for an appeal can be found in 24 CFR 578.35 (b).

The committee would like to encourage The Place to participate in our spring technical assistance/best practices meeting. An announcement of the date, time, and location will be sent out at a later time.

We do thank you for the effort you took to apply for funding. Should you have any questions, please don't hesitate to reach out to me.

Sincerely,

Evan Caster

Senior Manager of Homeless Initiatives

evan.caster@ppchp.org

719.632.5094 ext. 227