



GLENDALE CONTINUUM OF CARE

GOVERNANCE CHARTER

CA-612

VERSION 2.0

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INTRODUCTION

The Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH), which was implemented by the U.S. Department of Housing and Urban Development (HUD) in 2009, established a Continuum of Care (CoC) program aimed at tackling homelessness. The program created specific guidelines, regulations, and procedures to make CoC projects competitive for federal funding. In addition to this, the HEARTH Act included a provision that requires the establishment of a “governance structure” to ensure that all stakeholders have an opportunity to participate in the CoC program. HUD subsequently released the 2017 [Interim Rule](#) detailing the requirements for CoC implementation of HEARTH.

The aim of the Governance Charter of the City of Glendale’s Continuum of Care (CoC) Board is to outline the organization’s structure, composition, roles, responsibilities, and formation of committees. The Charter will be reviewed and revised on an annual basis to ensure that the CoC Board can address any programmatic, regulatory, and strategic issues that may arise.

VISION/RESPONSIBILITY OF THE COC

The Glendale CoC envisions a community that is effectively responding to chronic homelessness by coordinating community resources to:

1. Prevent homelessness
2. Provide housing and related support to the currently homeless
3. Prevent recidivism

The Glendale Homeless Continuum of Care (CoC) is one the thirteen CoCs officially recognized by HUD for participation in local and regional efforts to prevent and end homelessness in Southern California. We understand the diversity of individuals and families who are homeless, and their unique problems and needs require highly complex services systems. For this reason, the Glendale CoC has established a Coordinated Entry System (CES) to streamline homeless services and quick re-housing of the homeless population.

The Glendale CoC has also established a CoC Board, CoC Committee and a CES Sub-Committee that involve various groups and organizations as part of the planning process for homeless programs and services. These groups consist of local non-profit organizations (including faith-based), housing authority, local law enforcement, mental health agencies, school systems, hospitals and persons who were formerly homeless. These groups have been successful in developing strategies and putting programs in place to fill gaps in the Glendale CoC that will successfully move homeless persons through the different points in the Continuum and onto self-sufficiency.

ARTICLE I-NAME

The name of the organization is Glendale Continuum of Care (hereinafter referred to as the “Glendale CoC).”

ARTICLE II- MISSION

The Mission of the Glendale CoC is to end and prevent homelessness in the City of Glendale.

ARTICLE III-GEOGRAPHIC BOUNDRIES

The Glendale CoC is responsible for the area that the U.S. Department of Housing and Urban Development (HUD) has designated for CA-612 Glendale City which is the boundaries of the City of Glendale hereinafter referred to as the “geographic area”.

ARTICLE IV-PURPOSE

The Glendale CoC serves as the HUD-designated primary decision-making group whose primary responsibility, purpose and scope is to implement the Continuum of Care program which is authorized by subtitle C of title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381-11389). The program is designed to:

- a. Promote communitywide commitment to the goal of ending and preventing homelessness.
- b. Provide funding for efforts by nonprofit providers, States, and local governments to quickly rehouse homeless individuals (including unaccompanied youth) and families, while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness.
- c. Promote access to and effective utilization of mainstream programs by homeless individuals and families; and
- d. Optimize self-sufficiency among individuals and families experiencing homelessness.
- e. Ensure that the CoC functions effectively by facilitating communication among diverse stakeholders, identifying problems to be solved and implementing strategies that support ending homelessness.
- f. Ensure that the CoC system encompasses the following:
 - Outreach, engagement, and assessment
 - Shelter, housing, and supportive services
 - Homelessness prevention strategies
 - Housing First approach
- g. Oversee the City of Glendale’s Annual Application to HUD for CoC funding as noted in § 578.1 Purpose and scope of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) and detailed in the 2012 Interim Rule.
- h. Designating and operating an HMIS for the Continuum of Care.

ARTICLE V- PRINCIPAL OFFICE

The principal office of the Glendale CoC is located within the City of Glendale, Community Services & Parks Department at 613 E. Broadway, Suite 120.

ARTICLE VI-MEMBERSHIP

Membership is open to organizations and individuals who support the CoC's mission and vision. Membership is defined as representatives from relevant organizations participating in the responsibilities of the Glendale CoC through active participation in its board, committees, sub-committees, and working groups.

Representatives from relevant organizations within the geographic area will be members of the Glendale CoC. Within the geographic area is defined as being located and/or providing relevant services within the geographic area. Relevant organizations will include:

Nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocate, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement and organizations serve veterans and organizations. Additionally, Glendale CoC will strive to ensure representation from diverse and public agencies including those dedicated to behavioral health, substance abuse recovery services, health, LGBTQ+ community, Black Indigenous, and People of Color (BIPOC).

SECTION 1. NOMINATIONS

A public invitation within the geographic area for new members to join will be extended at least annually in accordance with the Interim Rule of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) as described in the 2012 Interim Rule § 578.7 Responsibilities of the Continuum of Care.

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

All members shall have the right to speak at meetings and to participate in CoC activities. All members are expected to adhere to general standards for civility during discussions.

SECTION 2. MEETINGS

The Glendale CoC will conduct meetings of the full membership with published agendas at least four times a year. Meetings will be held at the principal office noted in Article V unless otherwise noticed in advance. In-person attendance will be required at all Glendale CoC Board meetings, unless an option to attend via remote technology is made available. Such participation pertains to both full Board meetings as well as select workgroup meetings, although workgroups are primarily held via remote technology.

a. Election

Election to the Glendale CoC can happen during any scheduled meeting and is determined by a majority vote of all members present. Those members elected will be seated immediately.

b. Terms

For the members-at-large, there are no term limits. Membership, however, may be terminated for good cause by the Glendale CoC in accordance with Article VI, Section 2, Subsection f.

c. Quorum

A number equal to a majority of those in attendance at the Glendale CoC will constitute a quorum for the transaction of business at any meeting.

d. Voting

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

e. Conflict of Interest

Members must comply with the conflict of interest and recusal process found in Appendix B: Conflict of Interest which is §578.95 Conflicts of interest in the 2012 Interim Rule of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act).

f. Removal

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

SECTION 3. OFFICERS

The officers of the Glendale CoC will be Chair and Vice Chair and a Secretary. One Co-Chair will be a representative of a public agency and one Co-Chair will be a representative from a private agency. The Secretary will be a representative from City of Glendale's Community Service & Parks Department.

Secretary will be responsible for scheduling and setting the agenda for general CoC meetings. He/she will give all notices required by law or by this Governance Charter when necessary.

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

a. Nominations

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

b. Election

Officers will be elected by the vote of the majority of Glendale CoC representatives present during the first regular meeting of a new calendar year.

c. Term

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

d. Vacancies

Vacancies among the Officers may be filled by a vote of the majority of Glendale CoC representatives at any meeting at which a quorum is present. The person(s) shall serve the unexpired term of the previous Officer and is subject to re-election.

e. Compensation

Officers shall not be entitled to any form of compensation as a result of their service in this capacity to the CoC. However, Officers may receive reimbursement of expenses, as may be determined by resolution to be just and reasonable.

SECTION 4. ORGANIZATIONAL RELATIONSHIPS

a. Continuum of Care Board

The City of Glendale CoC board is the primary planning body for the Glendale CoC. Board members determine the policy direction of the CoC and ensure that CoC fulfills its responsibilities as assigned by the U.S. Department of Housing and Urban Development (HUD). Additionally, board oversees and approves the work of the of the Glendale CoC committees and working groups.

The Glendale CoC will establish a board of at least five (5) members to act on its behalf using the process established as a requirement by § 578.7(a)(3) and must comply with the conflict-of-interest requirements at § 578.95(b). The board must:

- Be representative of the relevant organizations and of projects serving homeless subpopulations (one board member may represent the interests of more than one homeless subpopulation).
- Knowledgeable of the issues pertaining to the CoC and/or persons experiencing homelessness in the region.
- Include an individual from at least one Emergency Solutions Grant Program (ESG) funding and;
- Include at least one homeless or formerly homeless individual.

The board will not consist of representatives from agencies that receive Continuum of Care Homeless Assistance or Emergency Solutions Grant (ESG) funding unless representatives from agencies that do not

receive Continuum of Care Homeless Assistance or Emergency Solutions Grant (ESG) funding for one or more of the subpopulations listed above cannot be recruited as board members.

i. Nominations

Nominations will be made by members of the Glendale CoC.

ii. Election

CoC Board members will be elected during the first regular meeting of a new calendar year.

iii. Term

CoC Board members will serve a staggered term of three (3) years or until their successors have been elected and qualified. Absent reappointment or a new appointment, Board Members shall have no limit on the terms of service.

iv. Vacancies

Vacancies among the board members may be filled by a vote of the majority of CoC Board representatives at any meeting at which a quorum is present. The person(s) shall serve the unexpired term of the previous board member and is subject to re-election.

This process will be reviewed, updated, and approved by the Glendale CoC at least once every 5 years in accordance with the Interim Rule of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) as described in § 578.7(5) Responsibilities of the Continuum of Care.

v. Meetings

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

vi. Quorum

A number equal to a majority of those serving on the Continuum of Care Board will constitute a quorum for the transaction of business at any meeting.

vii. Voting

At all meetings, business items may be decided by arriving at a consensus. If a vote is necessary, all votes will be by voice or ballot at the will of the majority in attendance. Each representative will have one vote. No member may vote on any item which presents a real or perceived conflict-of-interest.

viii. Code of Conduct

Glendale CoC Board members are entrusted with specific responsibilities related to the use of funds invested in addressing a serious community concern, homelessness. Members are expected to observe highest standards of ethical conduct in the execution of these responsibilities. Glendale CoC recognizes that each participating member representative, in most instances, is employed by a responsible public, non-profit, or private section agency or firm that has an adopted Code of Conduct or Employee Manual that controls the behavior of the employee in the conduct of business on behalf of his/her employer. If

any members' behavior in the conduct of Glendale CoC business is deemed by another Board member or member of the CoC in good standing to be inappropriate or illegal, the case will be referred to the Glendale CoC for investigation and possible referral to the member's agency for any personnel or legal action that may be warranted.

In the performance of their duties, CoC Board Members are expected to carry out the mandate of the CoC to the best of their ability, and to maintain the highest standards of integrity for actions with other Members of the CoC, CoC Representatives, Service Recipients, Service Providers, and members of the public.

General Conduct

Members of the CoC are expected to conduct themselves with courtesy and respect, without harassment, or physical or verbal abuse. Unprofessional behavior is prohibited by this policy, and includes, but is not limited to spoken, written, virtual, cyber-bullying, and physical conduct and expressions that are threatening, berating, vulgar, degrading, demeaning, or intended to show contempt or disdain for another. Such conduct is prohibited if it is directed at or relates to Members of the CoC Board, members of the CoC, and members of the public, whether they are present or observe the behavior. Personal relationships should not result in special considerations, including bias or favoritism, that influence the performance of their official duties in a manner contrary to the interest of the broader CoC.

ix. Conflict of Interest

Members must comply with the conflict of interest and recusal process found in the Appendix B: §578.95 Conflicts of interest in the Interim Rule of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act).

b. Continuum of Care Legal Entity

The Glendale CoC legal entity will be the Collaborative Applicant who will be the City of Glendale/Glendale Housing Authority who will submit grants (as defined in 24 CFR 5.100) to HUD on behalf of the Glendale CoC. Submission will follow § 578.9 when preparing an application for funds which states that a CoC must:

- Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a NOFA published by HUD under § 578.19 of this subpart.
- Establish priorities for funding projects in the geographic area.
- Determine if one application for funding will be submitted for all projects within the geographic area or if more than one application will be submitted for the projects within the geographic area.
 - If more than one application will be submitted, designate an eligible applicant to be the collaborative applicant that will collect and combine the required application information from all applicants and for all projects within the geographic area that the Continuum has selected funding. The collaborative applicant will also apply for

Continuum of Care planning activities. If the Continuum is an eligible applicant, it may designate itself; and

- If only one application will be submitted, that applicant will be the collaborative applicant and will collect and combine the required application information from all projects within the geographic area that the Continuum has selected for funding and apply for Continuum of Care planning activities.

c. Continuum of Care Committees

The Glendale CoC will appoint committees, subcommittees, or working groups when necessary. Such groups will include:

- Coordinated Entry & Assessment Committee.
- HMIS/CoC Performance Committee.
- Point-In-Time Count Committee; and
- Chronic Homeless/Discharge Planning.

Committees will meet at least four times a year.

SECTION 5. RESPONSIBILITIES

The four major responsibilities of the Glendale CoC consist of operating the Continuum of Care, to designating an HMIS for the Continuum of Care, planning for the Continuum of Care, and preparing an application for funds which is in accordance with § 578.7 Responsibilities of the Continuum of Care and in the Interim Rule and § 578.79 Preparing an Application for Funds and are as follows:

- a. **Operating the Continuum of Care.** The Glendale CoC will:
 1. Hold meetings of the full membership, with published agendas, at least semi-annually.
 2. Make an invitation for new members to join publicly available within the geographic at least annually.
 3. Adopt and follow a written process to select a board to act on behalf of the Continuum of Care. The process must be reviewed, updated, and approved by the Continuum at least once every 5 years.
 4. Appoint additional committees, subcommittees, or workgroups.
 5. In consultation with the collaborative applicant and the HMIS Lead, develop, follow, and update annually a governance charter, which will include all procedures and policies needed to comply with subpart B of this part and with HMIS requirements as prescribed by HUD; and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board.
 6. Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and act against poor performers.

7. Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report to HUD.
 8. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish, and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The Continuum must develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers. This system must comply with any requirements established by HUD by Notice.
 9. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish, and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:

Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part.

 - a. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance.
 - b. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance.
 - c. Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance.
 - d. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and
 - e. Where the Continuum is designated a high-performing community, as described in Subpart G, policies and procedures set forth in 24 CFR 576.400(e)(vi), (e)(vii), (e)(viii), and (e)(ix).
- b. Designating and operating an HMIS.** The Glendale CoC will:
1. Designate a single Homeless Management Information System (HMIS) for the geographic area.
 2. Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead.
 3. Review, revise, and approve a privacy plan, policies and procedures, security plan, and data quality plan for the HMIS.
 4. Track and ensure consistent participation of recipients and subrecipients in the HMIS; and
 5. Ensure the HMIS is administered in compliance with requirements prescribed by HUD (24 CFR part 580).
- c. Continuum of Care planning.** The Glendale CoC will develop a plan that includes:

1. Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following:
 - a. Outreach, engagement, and assessment.
 - b. Shelter, housing, and supportive services.
 - c. Prevention strategies.
2. Planning for and conducting, at least biennially, a point-in-time count of homeless persons within the geographic area that meets the following requirements: *

*Under section 578.7 of the CoC Program interim rule, CoCs must plan and conduct, at least biennially, a PIT count of homeless persons within the geographic area. Section 578.3 of the CoC Program interim rule states that PIT counts are “carried out on one night in the last 10 calendar days of January or at such other time as required by HUD.” HUD has historically incentivized annual HIC and PIT counts by awarding maximum points in the annual CoC Program Competition to CoCs that do annual counts and anticipates continuing this practice for the indefinite future. The HIC and PIT count data will continue to provide critical updates on national and local progress towards preventing and ending homelessness.

- a. Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons.
 - b. Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons.
 - c. Other requirements established by HUD by Notice.
3. Conducting an annual gaps analysis of the homeless needs and services available within the geographic area.
4. Providing information required to complete the Consolidated Plan(s) within the Continuum’s geographic area.
5. Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum’s geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.

d. Preparing an application for funds. The Glendale CoC will:

1. Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a NOFA published by HUD under § 578.19 of this subpart.
2. Establish priorities for funding projects in the geographic area.
3. Determine if one application for funding will be submitted for all projects within the geographic area or if more than one application will be submitted for the projects within the geographic area.
 - a. If more than one application will be submitted, designate an eligible applicant to be the collaborative applicant that will collect and combine the required application information from all applicants and for all projects within the geographic area that the Continuum has selected funding. The collaborative applicant will also apply for Continuum of Care planning activities. If the Continuum is an eligible applicant, it may designate itself.
 - b. If only one application will be submitted, that applicant will be the collaborative applicant and will collect and combine the required application information from all projects within the geographic area that the Continuum has selected for funding and apply for Continuum of Care planning activities.
4. The Continuum retains all its responsibilities, even if it designates one or more eligible applicants other than itself to apply for funds on behalf of the Continuum. This includes approving the Continuum of Care application

ARTICLE VII. PROVISIONS TO AMEND GOVERNANCE CHARTER

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

Written Complaints about the Glendale CoC

The Glendale CoC Board will review any written complaints against the Glendale CoC within ten (10) days of its receipt. The Chair or the Vice-Chair will respond within 30 days by:

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

Complaints about CoC Program Receiving HUD funds

A first person written and/or documented complaint will be considered a grievance. A verbal, secondhand complaint will be considered as complaint. The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the organization, they are making the grievance or complaint about.

Participant Termination and Grievance Policy and Procedures

Termination Policy

The City of Glendale has termination and grievance policies and procedures and includes processes in the Sub-Recipient Agreements.

However, if a program participant violates program requirements, the sub-recipient may terminate the assistance in accordance with a formal process established by the recipient or sub-recipient that recognizes the rights of individuals affected.

To terminate rental assistance or housing relocation and stabilization services to a program participant, the required formal process, at a minimum, must consist of:

- Written notice to the program participant containing a clear statement of the reasons for termination.
- A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant providing further assistance later to the same family or individual.

The City of Glendale monitors on annually and ensures that all terminations have followed the proper protocols and due process.

Grievance Policy

Grievance Policy and Procedure for written and Verbal Complaints

Policy Statement

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

Any written complaint against the CoC will be reviewed by the CoC governing Council within 30 days of its receipt. The Chair or the Vice-Chair will respond within 45 days by:

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

Complaints about a Programs Receiving Grant Funds

- A First-person written and/or documented complaint will be considered a grievance.

- A Verbal, second-hand or hearsay complaint will be considered a complaint.
- The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the organization, they are making a grievance or complaint about. If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the CoC will recommend that the person do so and document that recommendation. If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the problem in writing and submit it to the Chair or Vice-Chair of the CoC. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the Chair or another CoC member will document what has been said.
- Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution.
- Once a complaint grievance has been submitted, the Chair or Vice-Chair will approach the problem program's representative, explain the complaint or grievance, and ask for a response to the charge(s). Responses will be documented. It will be up to the Chair or the Vice-Chair to decide if the matter needs to be discussed by the CoC governing Council. A second complaint or grievance will be handled the same.
- If a program receives a third complaint, the CoC governing Council will review the situation and recommend action. The Executive Director of the program being reviewed will be asked to respond to the CoC governing Council.
- All complaints or grievances involving vulnerable adults or children will be immediately turned over to the appropriate authorities.
- Any complaints received against programs that are components of the continuum but not participants in the process will be recorded. Information will be shared with CoC governing Council and/or funders or other stakeholders when deemed appropriate.
- All complaints and grievances should be submitted to the Chair. However, if there is a conflict apparent with reporting problems to the Chair, reports can be made to the Vice-Chair.

Grievance policy statement in the sub-recipient agreements:

The Sub-recipient shall establish and maintain program policies and procedures including grievance policies to address program participants' complaints. Policy documentation shall be available for review by the City of Glendale staff during program reviews and monitoring visits. The Sub-recipient shall establish a formal process for terminating assistance to any individual or family. The process shall recognize the rights of the individuals affected and shall include an administrative hearing regarding the termination of assistance.

Subpart B – Establishing and Operating a Continuum of Care**§ 578.5 Establishing the Continuum of Care.**

(a) The Continuum of Care. Representatives from relevant organizations within a geographic area shall establish a Continuum of Care for the geographic area to carry out the duties of this part. Relevant organizations include nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals.

(b) The board. The Continuum of Care must establish a board to act on behalf of the Continuum using the process established as a requirement by § 578.7(a)(3) and must comply with the conflict-of-interest requirements at § 578.95(b). The board must:

- (1) Be representative of the relevant organizations and of projects serving homeless subpopulations; and
- (2) Include at least one homeless or formerly homeless individual.

(c) Transition. Continuums of Care shall have 2 years [insert effective date of interim rule] to comply with the requirements of paragraph (b) of this section.

§ 578.7 Responsibilities of the Continuum of Care.

(a) Operate the Continuum of Care. The Continuum of Care must:

- (1) Hold meetings of the full membership, with published agendas, at least semi-annually.
- (2) Make an invitation for new members to join publicly available within the geographic at least annually.
- (3) Adopt and follow a written process to select a board to act on behalf of the Continuum of Care. The process must be reviewed, updated, and approved by the Continuum at least once every 5 years.
- (4) Appoint additional committees, subcommittees, or workgroups.
- (5) In consultation with the collaborative applicant and the HMIS Lead, develop, follow, and update annually a governance charter, which will include all procedures and policies needed to comply with subpart B of this part and with HMIS requirements as prescribed by HUD; and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board.
- (6) Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and act against poor performers.
- (7) Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report to HUD.

(8) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish, and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The Continuum must develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers. This system must comply with any requirements established by HUD by Notice.

(9) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish, and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:

- (i) Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part.
- (ii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance.
- (iii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance.
- (iv) Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance.
- (v) Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and
- (vi) Where the Continuum is designated a high-performing community, as described in Subpart G, policies and procedures set forth in 24 CFR 576.400(e)(vi), (e)(vii), (e)(viii), and (e)(ix).

(b) Designating and operating an HMIS. The Continuum of Care must:

- (1) Designate a single Homeless Management Information System (HMIS) for the geographic area.
- (2) Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead.
- (3) Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.
- (4) Ensure consistent participation of recipients and subrecipients in the HMIS; and
- (5) Ensure the HMIS is administered in compliance with requirements prescribed by HUD.

(c) Continuum of Care planning. The Continuum must develop a plan that includes:

- (1) Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following:
 - (i) Outreach, engagement, and assessment.
 - (ii) Shelter, housing, and supportive services.
 - (iii) Prevention strategies.

(2) Planning for and conducting, at least biennially, a point-in-time count of homeless persons within the geographic area that meets the following requirements:

(i) Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons.

(ii) Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons.

(iii) Other requirements established by HUD by Notice.

(3) Conducting an annual gaps analysis of the homeless needs and services available within the geographic area.

(4) Providing information required to complete the Consolidated Plan(s) within the Continuum's geographic area.

(5) Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum's geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.

§ 578.9 Preparing an application for funds.

(a) The Continuum must:

(1) Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a NOFA published by HUD under § 578.19 of this subpart.

(2) Establish priorities for funding projects in the geographic area.

(3) Determine if one application for funding will be submitted for all projects within the geographic area or if more than one application will be submitted for the projects within the geographic area.

(i) If more than one application will be submitted, designate an eligible applicant to be the collaborative applicant that will collect and combine the required application information from all applicants and for all projects within the geographic area that the Continuum has selected funding. The collaborative applicant will also apply for Continuum of Care planning activities. If the Continuum is an eligible applicant, it may designate itself.

(ii) If only one application will be submitted, that applicant will be the collaborative applicant and will collect and combine the required application information from all projects within the geographic area that the Continuum has selected for funding and apply for Continuum of Care planning activities.

(b) The Continuum retains all its responsibilities, even if it designates one or more eligible applicants other than itself to apply for funds on behalf of the Continuum. This includes approving the Continuum of Care application.

§ 578.11 Unified Funding Agency.

(a) **Becoming a Unified Funding Agency.** To become designated as the Unified Funding Agency (UFA) for a Continuum, a collaborative applicant must be selected by the Continuum to apply to HUD to be designated as the UFA for the Continuum.

(b) **Criteria for designating a UFA.** HUD will consider these criteria when deciding whether to designate a collaborative applicant a UFA:

(1) The Continuum of Care it represents meets the requirements in § 578.7.

(2) The collaborative applicant has financial management systems that meet the standards set forth in 2 CFR 200.32.

(3) The collaborative applicant demonstrates the ability to monitor subrecipients; and

(4) Such other criteria as HUD may establish by NOFA.

(c) **Requirements.** HUD-designated UFAs shall:

(1) Apply to HUD for funding for all the projects within the geographic area and enter into a grant agreement with HUD for the entire geographic area.

(2) Enter into legally binding agreements with subrecipients and receive and distribute funds to subrecipients for all projects within the geographic area.

(3) Require subrecipients to establish fiscal control and accounting procedures as necessary to assure the proper disbursement of and accounting for federal funds in accordance with the requirements of 2 CFR parts 200, subpart D.

(4) Obtain approval of any proposed grant agreement amendments by the Continuum of Care before submitting a request for an amendment to HUD.

§ 578.13 Remedial action.

(a) If HUD finds that the Continuum of Care for a geographic area does not meet the requirements the Act or its implementing regulations, or that there is no Continuum for a geographic area, HUD may take remedial action to ensure fair distribution of grant funds within the geographic area. Such measures may include:

(1) Designating a replacement Continuum of Care for the geographic area.

(2) Designating a replacement collaborative applicant for the Continuum's geographic area; and

(3) Accepting applications from other eligible applicants within the Continuum's geographic area.

(b) HUD must provide a 30-day prior written notice to the Continuum and its collaborative applicant and give them an opportunity to respond.

578.95 Conflicts of interest (of the Interim Rule of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act)).

- (a) **Procurement.** For the procurement of property (goods, supplies, or equipment) and services, the recipient and its subrecipients must comply with the standards of conduct and conflict-of-interest requirements under [2 CFR 200.317](#) and [200.318](#).
- (b) **Continuum of Care board members.** No Continuum of Care board member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.
- (c) **Organizational conflict.** An organizational conflict of interest arises when, because of activities or relationships with other persons or organizations, the recipient or subrecipient is unable or potentially unable to render impartial assistance in the provision of any type or amount of assistance under this part, or when a covered person's, as in [paragraph \(d\)\(1\)](#) of this section, objectivity in performing work with respect to any activity assisted under this part is or might be otherwise impaired. Such an organizational conflict would arise when a board member of an applicant participates in decision of the applicant concerning the award of a grant, or provision of other financial benefits, to the organization that such member represents. It would also arise when an employee of a recipient or subrecipient participates in making rent reasonableness determinations under [§ 578.49\(b\)\(2\)](#) and [§ 578.51\(g\)](#) and housing quality inspections of property under [§ 578.75\(b\)](#) that the recipient, subrecipient, or related entity owns.
- (d) **Other conflicts.** For all other transactions and activities, the following restrictions apply:
- (1) No covered person, meaning a person who is an employee, agent, consultant, officer, or elected or appointed official of the recipient or its subrecipients and who exercises or has exercised any functions or responsibilities with respect to activities assisted under this part, or who is in a position to participate in a decision-making process or gain inside information with regard to activities assisted under this part, may obtain a financial interest or benefit from an assisted activity, have a financial interest in any contract, subcontract, or agreement with respect to an assisted activity, or have a financial interest in the proceeds derived from an assisted activity, either for him or herself or for those with whom he or she has immediate family or business ties, during his or her tenure or during the one-year period following his or her tenure.
 - (2) **Exceptions.** Upon the written request of the recipient, HUD may grant an exception to the provisions of this section on a case-by-case basis, taking into account the cumulative effects of the criteria in [paragraph \(d\)\(2\)\(ii\)](#) of this section, provided that the recipient has satisfactorily met the threshold requirements of [paragraph \(d\)\(2\)\(ii\)](#) of this section.
 - (i) **Threshold requirements.** HUD will consider an exception only after the recipient has provided the following documentation:

- (A) Disclosure of the nature of the conflict, accompanied by a written assurance, if the recipient is a government, that there has been public disclosure of the conflict and a description of how

the public disclosure was made; and if the recipient is a private nonprofit organization, that the conflict has been disclosed in accordance with their written code of conduct or other conflict-of-interest policy; and

(B) An opinion of the recipient's attorney that the interest for which the exception is sought would not violate State or local law, or if the subrecipient is a private nonprofit organization, the exception would not violate the organization's internal policies.

(ii) ***Factors to be considered for exceptions.*** In determining whether to grant a requested exception after the recipient has satisfactorily met the threshold requirements under [paragraph \(c\)\(3\)\(i\)](#) of this section, HUD must conclude that the exception will serve to further the purposes of the Continuum of Care program and the effective and efficient administration of the recipient's or subrecipient's project, taking into account the cumulative effect of the following factors, as applicable:

(A) Whether the exception would provide a significant cost benefit or an essential degree of expertise to the program or project that would otherwise not be available.

(B) Whether an opportunity was provided for open competitive bidding or negotiation.

(C) Whether the affected person has withdrawn from his or her functions, responsibilities, or the decision-making process with respect to the specific activity in question.

(D) Whether the interest or benefit was present before the affected person was in the position described in [paragraph \(c\)\(1\)](#) of this section;

(E) Whether undue hardship will result to the recipient, the subrecipient, or the person affected, when weighed against the public interest served by avoiding the prohibited conflict.

(F) Whether the person affected is a member of a group or class of persons intended to be the beneficiaries of the assisted activity, and the exception will permit such person to receive generally the same interests or benefits as are being made available or provided to the group or class; and

(G) Any other relevant considerations.

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