

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by **9:00 a.m. on Friday**. Contact the Mayor's Legislative team with questions.

Date of Request: 10/29/2025

Please mark one: ☐ Bill Request or ☒ Resolution Request

Please mark one: The request directly impacts developments, projects, contracts, resolutions, or bills that involve property and impact within .5 miles of the South Platte River from Denver's northern to southern boundary? (Check map [HERE](#))

☐ Yes ☒ No

1. Type of Request:

☒ Contract/Grant Agreement ☐ Intergovernmental Agreement (IGA) ☐ Rezoning/Text Amendment

☐ Dedication/Vacation ☐ Appropriation/Supplemental ☐ DRMC Change

☐ Other:

2. **Title:** (Start with *approves*, *amends*, *dedicates*, etc., include name of company or contractor and indicate the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)

Amends a contract/grant agreement with the Colorado Coalition for the Homeless to add \$3,377,000.00 for a new total of \$13,508,000.00 and adding one year for a new end date of 12-31-2026 to allow the agency to continue providing housing services for people experiencing homelessness or housing instability through the Supportive Housing Pay for Performance (SHP4P) program, citywide (HOST-202265783/HOST-202581462-03).

3. **Requesting Agency:** Department of Housing Stability (HOST)

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution (e.g., subject matter expert)	Contact person for council members or mayor-council
Name: Kelsey Antun	Name: Polly Kyle
Email: Kelsey.Antun@denvergov.org	Email: Polly.Kyle@denvergov.org

5. General description or background of proposed request. Attach executive summary if more space needed:

Provider will use an appropriate level of care based on clinical assessment, integrated with a flexible array of housing options delivered through an evidence-based Housing First approach to provide housing and supportive services for the costliest members of the "Super Utilizers" population. This includes case management, housing, resource navigation, and access to clinical services.

6. **City Attorney assigned to this request (if applicable):** Brad Nieman

7. **City Council District:** All/City Wide

8. ****For all contracts, fill out and submit accompanying Key Contract Terms worksheet****

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____

Key Contract Terms

Type of Contract: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property): Professional Services

Vendor/Contractor Name (including any dba's): Colorado Coalition for the Homeless

Contract control number: HOST-202581462-03

Location: 2111 Champa St., Denver, Colorado, 80205

Is this a new contract? ☐ Yes ☒ No **Is this an Amendment?** ☒ Yes ☐ No **If yes, how many?** 3

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):

HOST-202265783 January 1, 2023 to December 31, 2023

HOST- 202371409-01 January 1, 2023 to December 31, 2024

HOST-202477087-02 January 1, 2023 to December 31, 2025

HOST-202581462-03 January 1, 2023 to December 31, 2026

Contract Amount (indicate existing amount, amended amount and new contract total):

<i>Current Contract Amount</i>	<i>Additional Funds</i>	<i>Total Contract Amount</i>
<i>(A)</i>	<i>(B)</i>	<i>(A+B)</i>
\$10,131,000	\$3,377,000	\$13,508,000

<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>
1/1/2023 to 12/31/2025	1 year	12/31/2026

Scope of work:

Provider will use an appropriate level of care based on clinical assessment, integrated with a flexible array of housing options delivered through an evidence-based Housing First approach to provide housing and supportive services for the costliest members of the homeless population. From initial contact with the Client, Provider will assess the Client's appropriate housing needs, establish a housing stability plan, and work with the Client to access and maintain appropriate housing. All services will be voluntary and driven by individual choice. Recognizing that individuals may initially refuse assistance or services, Provider will assertively and creatively engage tenants, including engaging Clients multiple times and in multiple settings, to maximize participation in services. The delivery of all services will be guided by the principles of cultural competence, trauma informed care, recovery, and resiliency with an emphasis on building enrollee strengths and resources in the community, with family, and with their peer/social network.

This performance contract will serve at least 245 clients. Bonus payments will be made based on CCH performance for Housing Stability Rates and Wellness Metrics.

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____

Was this contractor selected by competitive process? ☐ Yes ☒ No If not, why not? Continuation of SIB housing.

Has this contractor provided these services to the City before? ☒ Yes ☐ No

Source of funds: Special Revenue Fund

Is this contract subject to: ☐ W/MBE ☐ DBE ☐ SBE ☐ XO101 ☐ ACDBE ☒ N/A

WBE/MBE/DBE commitments (construction, design, Airport concession contracts): N/A

Who are the subcontractors to this contract? N/A

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