

Continuum of Care Board - Advisory Committee Values and Project Priorities

The Seattle-King County Continuum of Care Advisory Committee affirmed the following values and prioritization considerations to guide development of the FY 2022 Project Priority Listing:

- Center our theory of change *If* we create a homelessness response system that centers the voices of people who have lived experience of homelessness, *then* we will be able to focus on responding to needs and eliminating inequities, *in order to* end homelessness for all - in the planning, programming and evaluation of Continuum of Care services.
- 2. Promote our **mission** to significantly decrease the incidence of homelessness throughout King County, using equity and social justice principles.
- 3. Promote equitable access and service provision with an intersectional and anti-racist approach, serving those who are the most vulnerable to the experience of homelessness in our community, *including but not limited to*: the BIPOC community, the LGBTQ community, people living with disabilities, people exiting the foster care system, the aging, people with carceral system involvement, people living with behavioral health conditions and substance use disorders, and all immigrant and refugee communities.
- 4. Maximize our community response to homelessness while aiming to maintain as much HUD Continuum of Care Program funding in our CoC as possible.
- 5. Promote human-centered practices and partnerships with a Housing First approach instead of further displacement or the criminalization of our unhoused neighbors.
- 6. Prioritize projects that:
 - a. Elevate the voices of people with lived experience as experts in the development and implementation of planning, programming and evaluation.
 - b. Focus on those who are literally homeless (streets, shelter, transitional housing for homeless, and includes people fleeing domestic violence);
 - c. Actively participate in the Continuum of Care through demonstrable racial equity and social justice oriented practices that center community and are in alignment with values of community accountability, trauma-informed care, harm reduction, prevention and whole person care through focusing on what is meaningful to the individual.
 - d. Demonstrate commitment to power-sharing and deference to people with lived experience in organizational design and policy development processes through actions such as dedicated board seats or management positions.
 - e. Advance the collective goals of the CoC, including addressing racial disproportionality, and achieving equitable outcomes for Indigenous, Black, Pacific Islanders, and other people of color and the LGBTQ+ community.



- f. Have movement to permanent housing and subsequent stability, including economic stability, as the primary focus;
- g. Do not replace mainstream resources;
- h. Work to connect people served with community-based, culturally responsive resources;
- i. Participate in the HMIS with complete, high quality data per HUD data standards;
- j. Demonstrate alignment with HUD Housing First standards (including screening, program entry, person-centered services, and termination policies);
- k. Perform well against HUD Continuum of Care goals and positively impact *local* system performance and equity outcomes;
- I. Consistently meet and exceed operational standards for spending, match, occupancy, and reporting.