

# Seattle-King County Continuum of Care Board

## Application Form

Please complete the entire form and email to [CoC.Questions@kcrha.org](mailto:CoC.Questions@kcrha.org)

### Full Name and Pronouns:

Amy Thomas

### Preferred Contact Information:

Phone:	+1 (206) 851-9093
Email Address:	amythomas_92@msn.com
Preferred Method of Contact: (Circle One)	Text
Zip code:	98042
Are you able to commit up to 15 hours a month for the 2 year duration? (Circle One)	Yes

### Question 1: Please describe your understanding of a Continuum of Care (CoC).

The CoC program aims to end homelessness by providing funding to nonprofit organizations, state and local governments. It encourages collaboration, promotes access to mainstream programs, and uses data-driven approaches to strengthen homeless assistance systems. In essence, it's about creating a coordinated effort to ensure everyone has a safe place to call home.

### Question 2: What motivates you to be on the CoC Board?

Please share your specific field of interest related to the CoC.

Being part of the Continuum of Care (CoC) board will be deeply rewarding. I am driven by a commitment to ending homelessness and making a positive impact in my community. I am motivated by compassion, a desire for systemic change, and the chance to collaborate with others who share this vision. It's about creating lasting solutions and giving everyone a chance to find stability and hope.

### Question 3: What skills and experiences will you bring or draw upon as a member of the CoC Board?

Please list any experiences or familiarity you have with accessing homeless housing services or program delivery, funding, the Continuum of Care, or other relevant skills.

As a member of the Continuum of Care (CoC) Board, my extensive experience with Adult Family Homes, Medicaid, mental health, and healthcare providers for vulnerable adults brings valuable skills to the table. Here's how my background aligns with the CoC's mission:

**- Understanding of Vulnerable Populations:**

My work in Owning/operating an Adult Family Home (AFH) for 21 years has given firsthand knowledge of caring for vulnerable adults. I understand the unique challenges faced by individuals who may be at risk of homelessness due to health issues, aging, or other factors. I in fact had many residents who were homeless prior to coming into my AFH.

**-Navigating Medicaid and Funding Systems:**

My familiarity with Medicaid is crucial. Many homeless individuals rely on Medicaid for healthcare services. Understanding funding mechanisms and program delivery would help me advocate for effective resource allocation within the CoC.

**-Collaboration and Advocacy:**

The CoC board require collaboration with various stakeholders: nonprofits, government agencies, and community members. My experience working with healthcare providers and navigating complex systems equips me with the knowledge to advocate for homeless individuals effectively.

**-Long-Term Care Perspective:**

Adult Family Homes provide long-term care, emphasizing stability and quality of life. By applying this perspective to homelessness solutions ensures a focus on sustainable housing and support services.

**-Compassion and Empathy:**

My decades of service demonstrate a commitment to vulnerable populations. CoC board members need empathy and compassion to drive impactful change.

In summary, my expertise in healthcare, funding, and advocacy uniquely positions me to contribute to the CoC's mission of ending homelessness.

### Question 4: Describe your vision or understanding of a successful CoC Board.

**-Collaboration and Inclusivity:**

A successful CoC Board brings together diverse stakeholders: nonprofit organizations, government agencies, service providers, and community members. It fosters an environment where everyone's voice is heard, regardless of their background or role. Board members actively engage in dialogue, share insights, and work collectively toward common goals.

**-Strategic Planning and Data-Driven Decisions:**

The CoC Board develops a clear strategic plan to address homelessness comprehensively. Data plays a crucial role: analyzing trends, identifying gaps, and measuring outcomes. Evidence-based decision-making ensures efficient resource allocation.

**-Advocacy and Policy Influence:**

Board members advocate for policies that support homeless individuals and families. They collaborate with local, state, and federal policymakers to create systemic change. Advocacy extends beyond board meetings—into the community and legislative arenas.

**-Resource Allocation and Accountability:**

Successful boards allocate funding strategically, prioritizing prevention, shelter, and housing programs. Regular reviews ensure accountability and transparency. Board members actively seek additional funding sources and partnerships.

**-Community Engagement and Education:**

CoC Boards connect with the community, raising awareness about homelessness. Education initiatives dispel myths, reduce stigma, and promote empathy. Successful boards engage schools, businesses, and faith-based organizations.

**-Measurable Impact and Continuous Improvement:**

A successful CoC Board tracks progress through measurable outcomes.

~~It celebrates successes, learns from challenges, and adapts strategies.~~

The ultimate goal is to reduce homelessness and improve lives.

### Question 5: Describe your leadership experiences

In my career, I have led various initiatives, including strategic planning, advocacy, and community engagement to create lasting change.

For example, other boards you have been a part of, community groups or leadership activities.

**-Adult Family Home Operations {Burien/King County} (1997-2018):**

Managing an adult family home is no small feat. Coordinating staff, ensuring quality care, and overseeing day-to-day operations demonstrate your leadership skills. My commitment to vulnerable adults during this time reflects compassion and dedication.

**-Collective Bargaining Campaign and Ongoing Advocacy:**

Running a campaign for collective bargaining rights shows my determination to improve conditions for industry workers. Continuing to lobby annually in Olympia on behalf of long-term care and advocating for vulnerable adults exemplifies unwavering commitment.

**-Affiliate Business Partner of the Adult Family Home Council and Curriculum Development:**

As an affiliate business partner, I actively engage with the adult family home community. Creating curriculum and teaching continuing education specific to dementia, mental health, and developmental/intellectual disabilities enhances caregiver skills and knowledge.

**-Long-Term Care Foundation Advisory Board:**

Serving on this board demonstrates my dedication to improving long-term care practices. Leadership involves strategic planning, resource allocation, and shaping the future of care.

**-Vice President of the Adult Family Home Association of WA:**

Holding this position meant actively shaping industry policies and advocating for providers. My leadership extends beyond individual homes to positively influence the entire association.

**- Community Advocate and Independent Dispute Resolution Panel Member {RCS/DSHS}: Volunteering as a Community Advocate and being trained for the Informal Dispute Resolution Panel shows my commitment to fair resolutions.**

Leadership includes mediating and finding equitable solutions.

I also take the opportunity to stay aligned with RCS/DSHS/DOH stakeholder meetings to offer prospective, input, and guidance.

### Question 6: How does systemic racism impact housing and the root causes of homelessness?

#### -Disparities in Homelessness:

Most minority groups, especially African Americans and Indigenous people, experience homelessness at higher rates than Whites. African Americans, who represent 13 percent of the general population, account for 37 percent of people experiencing homelessness and over 50 percent of homeless families with children. This disparity persists due to long-standing historical and structural racism.

#### -Causes of Disparities:

\*Poverty: Poverty, particularly deep poverty, strongly predicts homelessness. Black and Latinx groups are overrepresented in poverty relative to their overall population representation. \*Segregation and Rental Housing Discrimination: Historical practices like redlining (systemic housing discrimination) have perpetuated the wealth gap between White households and households of color. African Americans still live disproportionately in concentrated poverty or neighborhoods with limited access to quality care, services, and economic opportunities. \*Incarceration: Racial disparities in incarceration rates have worsened. Black and Brown individuals face a higher risk of being targeted, profiled, and arrested for minor offenses, especially in high-poverty areas. \*Intergenerational Racial Inequality: Centuries of discrimination, from slavery to Jim Crow, redlining, and mass incarceration, have generated intergenerational racial inequality. These historical injustices have created conditions for housing insecurity and homelessness today.

In summary, systemic racism perpetuates disparities in housing access, economic opportunities, and criminal justice involvement, all of which contribute to homelessness.

### Question 6: Reviewing the Theory of Change what is one way you apply this theory in your everyday life and work? Briefly, describe how you will center the theory of change on the Board and how you plan to uplift the communities you represent and support.

#### KCRHA Theory of Change:

If we create a homeless response system that centers people with lived experience, then we will be able to focus on responding to needs and eliminating inequities, in order to end homelessness for all.

The Theory of Change is a powerful framework that guides my actions both personally and professionally. Here's how I apply it and plan to center it on the Board:

#### -Everyday Application:

\*Listening to Lived Experience: In my everyday interactions, I actively listen to people's lived experiences. By centering their perspectives, I gain insights into their needs and challenges. This informs my decisions and actions, ensuring a more effective response.

#### -Board-Centric Approach:

\*Prioritizing Lived Experience: As a Board member, I'll advocate for policies that prioritize people with lived experience. Their voices should guide our strategies, resource allocation, and service delivery. By centering their needs, we can create more equitable solutions.

\*Equity and Eliminating Disparities: I'll champion policies that address racial disparities, systemic racism, and economic barriers. This includes advocating for affordable housing, mental health services, and job opportunities.

\*Collaboration and Community Engagement: I'll actively engage with community members, service providers, and local organizations. By fostering collaboration, we can create a robust homeless response system. Community input ensures our efforts align with real-world needs.

\*Data-Driven Decision-Making: I'll advocate for data collection, analysis, and evidence-based practices. This informs resource allocation and program effectiveness.

#### -Uplifting Communities:

\*Community Empowerment: I'll work to empower communities by providing resources, education, and support. This includes connecting individuals to housing, healthcare, and employment opportunities.

\*Advocacy and Policy Change: I'll use my position to advocate for systemic change. Whether through legislative efforts or community awareness campaigns, I'll fight for equitable policies.

\*Education and Awareness: Educating the public about homelessness and its root causes is crucial. I'll engage in outreach, workshops, and awareness campaigns to foster understanding and empathy.

In summary, the KCRHA Theory of Change guides my actions by emphasizing lived experience, equity, collaboration, and data-driven decision-making. As a Board member, I'll uplift communities by advocating for transformative solutions.

### Question 6: Optional: Is there any resource you would need in order to fully participate as a CoC Board Member?

No

**Affiliation (please note any that apply):**

Lived experience of homelessness (circle)	Yes
Public or Private Funder (circle); If yes, please note organization	Yes Organization: Medicaid
Intersecting System – i.e. Behavioral Health, Child Welfare, Criminal Justice, etc. (circle); If yes, please note system & organization	Yes System & Organization: Catholic Community Service
Faith Based Organization or Partner	Yes
Homeless Housing and/or Service Provider (circle) If yes, please note organization)	No Organization:
Any other affiliations you'd like to note:	No

**Sub-Population Representation (please check any areas in which you have specific experience or expertise):**

Youth/Young Adults, Families, Chronic Homelessness, Single Adults (Not experiencing chronic homelessness and non-Veteran), Domestic Violence, Veterans, Immigrant and Refugees, American Indian/Alaska Native/Indigenous Communities, Black/African American Communities, Other

**Region (please check any areas in which you have specific experience or expertise):**

Regional (King County - Non-specific), Seattle, North King County, South King County, East King County

**Identity (optional):**

How do you identify your race?	Caucasian
Sexual Orientation	N/A
Age	47
Disability Status	None

**Agreement and Signature**

**I affirm that my application responses are true and complete to the best of my knowledge.**

Name ( <i>typed or signature</i> )	web-form@smartsheet.com
Date	04/26/24 1:24 PM

**When you have completed this form, please submit the final to the KCRHA at [CoC.Questions@kcrha.org](mailto:CoC.Questions@kcrha.org). Thank you!**