

Seattle-King County Continuum of Care

Values and Project Priorities

The Seattle-King County Continuum of Care Board affirms the following values and prioritization considerations, anchored in love for our community, to guide the development of the FY25 Project Priority Listing:

- 1. Center our theory of change in the planning, programming, and evaluation of Continuum of Care services.
 - a. *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
- 2. Promote the mission to significantly decrease the incidence of homelessness throughout King County.
- 3. Promote the development of new affordable, permanent housing in underserved areas of King County.
- 4. Promote human-centered wellbeing.
- 5. Promote accessible services and quality service provision for individuals disproportionately impacted by homelessness in our community.
- 6. Develop a proactive system that meets the needs of all people experiencing homelessness.
- 7. Maximize our community response to homelessness by leveraging as much U.S. Department of Housing and Urban Development (HUD) Continuum of Care Program funding as possible to preserve continuity of services and support in housing for program participants.
- 8. Grow a proactive, accountable system through transparent and ethical practices, guided by accountability to those we serve to ensure funding is clearly and thoughtfully allocated.
- 9. Prioritize projects that:
 - a. Elevate the voices of people with lived and living experience as experts in the development and implementation of planning, programming, and evaluation.
 - b. Focus on those who are currently experiencing literal and chronic

- homelessness, including those who are "experiencing trauma or lack of safety related to, or fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions."
- c. Actively participate in the Continuum of Care through demonstrable practices that center community and are in alignment with values of community accountability, prevention, and whole person wellbeing through focusing on what is meaningful to the individual.
- d. Projects that were reallocated or transitioned to a new subrecipient to improve outcomes outside of the NOFO competition.
- e. Permanent housing projects that have historically met or exceeded performance outcomes.
- f. Projects that leverage other funding from housing or healthcare entities.
- g. Demonstrate commitment to power-sharing and deference to people with lived and living experience in organizational design and policy development processes through actions such as dedicated board seats or management positions.
- h. Advance as a collective the goals of the CoC, including reducing homelessness and improving outcomes for all people experiencing homelessness.
- i. Advance as a collective the goals of the CoC to support our Elder community which is the largest growing population of those experiencing and at-risk of homelessness to access dignified, appropriate housing to thrive as they age.
- j. Have positive outcomes, as defined by the participant, to permanent housing and subsequent stability, including economic stability, as the primary focus.
- k. Do not replace mainstream resources but make sure that all eligible participants receive assistance enrolling in and keeping any federal or state benefits for which they qualify.
- I. Work to connect people served by CoC-funded programs with community-based resources that meet their unique needs.
- m. Participate in the Homeless Management Information System with complete, high-quality data per both local metrics and HUD data standards.
- n. Demonstrate alignment with evidence-based, nationally recognized best practices for accessing and securing permanent housing, and a commitment to delivering high-quality, participant-centered services that are modeled on evaluated approaches, meet participants where they are, and are appropriately staffed to address their needs

¹ https://nnedv.org/wp-content/uploads/2020/08/Library Policy HEARTH Creating Access for Survivors.pdf



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- o. Perform well against HUD Continuum of Care goals and positively impact local system performance and outcomes.
- p. Consistently meet and exceed operational standards for spending, match, occupancy, and reporting.

