



# Seattle-King County Continuum of Care Board Application

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

## CoC Board Member Expectations and Commitment

CoC Board members are expected to attend one regular meeting and participate in one subcommittee or workgroup each month, in addition to any special meetings that require a CoC Board vote. Responsibilities also include reading and responding to emails and phone calls, as well as completing other administrative tasks – up to 15 hours per month. All applicants must be able to commit to a minimum two-year term.

General Information	
<b>Full Name &amp; Pronouns:</b>	Tina Browne she/her
<b>Phone:</b>	[REDACTED]
<b>Email Address:</b>	[REDACTED]
<b>Zip Code:</b>	98121
<b>Are you able to commit up to 15 hours a month for the 3-year duration?</b>	Yes
<b>Please indicate which seat you are applying for:</b>	Homeless Service Provider
<b>Please indicate the King County region you primarily represent. (Select one).</b>	North King County
<b>Please indicate the sub-population(s) you directly represent.</b>	Youth and Young Adults (up to 24), Families, Domestic Violence or Intimate Partner Violence

## Application Questions

### 1. Please describe how you are a representative of the seat for which you are applying.

As the Senior Site Director at Mary's Place Regrade Family Shelter, I am a direct representative of the emergency shelter provider community. I oversee a 24/7 multi-shift operation serving families experiencing homelessness, managing staff across day, evening, and overnight teams while holding responsibility for guest services, policy implementation, incident response, and cross-system coordination with housing and case management partners.

But my representative capacity extends beyond the shelter floor. Mary's Place operates across the full continuum of family homelessness response: emergency shelter, mobile street outreach, and homelessness prevention. Over a decade at this organization, I have worked alongside colleagues in all three program areas. I understand what outreach workers need from the CoC to find and engage families before they reach crisis. I understand what prevention specialists need to intervene before a family loses housing. And I understand what shelter providers need to stabilize families and move them toward permanent housing once they have arrived at our doors.

I can, and will, represent the full range of providers working across the family homelessness continuum, and I can speak to how all three must work together if the system is going to function. Too often, providers in each intervention type advocate in isolation. I am positioned to represent them collectively, and to make the case at the board level that emergency shelter, outreach, and prevention are not competing priorities. They are one response.

My work puts me at the intersection of system-level policy and shelter-floor reality every day. I understand what emergency providers need from the CoC, and I have the operational experience to translate CoC priorities back into practice. I am not just familiar with this work; I am in it, and I am committed to bringing that grounded perspective to the board on behalf of the families and providers this system exists to serve.

### 2. Tell us how you use your influence, authority, or relationships within your representative community or sector to effect change. Please include a specific example.

As a senior shelter leader, I use my authority to build operational systems that translate policy commitments into consistent, accountable practice. Change at the systems level only matters if it reaches the people being served.

A recent example: I identified an inconsistency in how our staff were conducting Guest Direct Advocacy (GDA) meetings, a core case management touchpoint that connects guests to housing pathways. Rather than addressing it as an individual performance issue, I used my position to help redesign the process. I developed standardized documentation expectations, established a clear bi-weekly meeting cadence, and introduced a manager-facing reporting structure to track compliance across shifts. I also communicated the rationale directly to staff, framing GDA consistency not as a compliance requirement but as a matter of guest dignity and housing outcomes.

The result was a shift in culture, not just behavior. Staff began to understand GDA meetings as a core professional responsibility, and managers had the tools to support and monitor that standard consistently.

I use that same approach across the broader provider community. Because Mary's Place works across shelter, outreach, and prevention, I have relationships with staff and leaders in all three program areas, and I use those relationships to build shared understanding across what can otherwise feel like siloed work. When a family moves from outreach engagement into shelter, or from shelter into a prevention-supported housing situation, the handoff only works if the providers on each end understand what the other is trying to accomplish. I have worked deliberately to build those bridges inside our organization, and to model that kind of cross-continuum thinking in my relationships with partner agencies.

That is how I approach change broadly: using my authority to build structures, my relationships to create buy-in, and my voice to connect daily practice to mission. I would carry all of it into my role on the CoC board, representing not just the shelter where I work, but the full continuum of providers doing this work on behalf of families.



3. Please describe your understanding of the Continuum of Care (CoC).

A Continuum of Care is a regional planning and funding structure designed to organize the collective response to homelessness, connecting emergency shelter, different housing types, and prevention services into a coordinated system rather than a fragmented collection of programs.

From my position as a shelter director, I experience the CoC as both a resource and an accountability structure. When it functions well, it creates shared standards, reduces duplication, and ensures that the most vulnerable households are prioritized for the housing interventions most likely to end their homelessness. When gaps exist between CoC policy and shelter-level reality, it is the responsibility of providers like me to name them and work toward solutions. I understand the CoC not as a bureaucratic entity, but as a collective commitment.

4. What motivates you to be on the CoC Board? Please share your specific field of interest related to the CoC.

I have spent a decade doing this work from the inside - managing staff, supporting families in crisis, and navigating the gaps between what the system intends and what families actually experience. That gap is what motivates me.

I have sat in rooms where decisions get made about shelter standards, coordinated entry, and funding priorities, and I have gone back to my shelter and watched those decisions play out in ways the decision makers never anticipated. Families lose housing opportunities because of documentation barriers no one at the policy level knew existed. Staff burn out because the operational realities of running a 24/7 shelter are invisible to the people developing the performance standards.

But I also bring something broader than a shelter director's perspective. Mary's Place operates across all three points of the continuum, emergency shelter, mobile outreach, and homelessness prevention. I have worked alongside colleagues in each of those program areas, and I understand how deeply they depend on one another. Outreach finds families before they reach crisis. Prevention keeps families from losing housing in the first place. Shelter catches families when both of those systems fall short. When any one of those three legs is underfunded or undervalued, the whole system wobbles, and families pay the price.

The CoC Board is where those disconnects can be named and addressed, but only if the people in the room have actually lived them. I am motivated by the belief that the CoC can function as a genuine bridge between system design and shelter reality across the full continuum. I want to be part of making that true.



## 5. Describe your vision or understanding of a successful CoC Board.

A successful CoC Board is one where the distance between decision-making and service delivery is as short as possible, and where "service delivery" is understood in its full breadth, from the outreach worker meeting a family living in a car, to the shelter staff working an overnight shift, to the prevention case manager helping a family negotiate with a landlord before an eviction filing.

Mary's Place has built its model around the belief that emergency shelter, mobile outreach, and homelessness prevention are not separate programs, they are a unified response. Outreach builds trust and connection before families reach crisis. Prevention interrupts the path to shelter when intervention is still possible. Shelter provides safety and stabilization when both upstream systems fall short. A successful CoC Board holds that full continuum in view and resists the tendency to fund and evaluate each piece as if it exists in isolation.

It also means a board that holds itself accountable for outcomes, not just compliance, and that is honest about who the system is and is not working for. The CoC's job is to ensure that King County's homeless response is actually ending homelessness, for families, for people of color who are disproportionately represented in our shelter system, for young adults who aged out of systems that were supposed to protect them. I envision a board that uses data honestly, invites hard conversations, and does not mistake activity for progress. Governance is only as good as what it produces for the people being served.

## 6. Describe your leadership experiences and style.

I have led people in one of the hardest operational environments there is: a 24-hour, 365-day shelter serving families in some of the worst moments of their lives. My team spans multiple shifts, includes staff at every experience level, and operates under pressure that does not stop when the workday ends. That has shaped my leadership in ways that a traditional management role never could.

But because I work at Mary's Place, an agency that runs not just shelter but mobile outreach and homelessness prevention programs, my leadership has always required thinking beyond shelter. I have had to understand how decisions made in one part of the continuum create downstream effects in another. That cross-program perspective is part of how I lead, and it is what I would bring to the board.

My style is relational and accountable. I build trust by being consistent, saying what I mean, following through on what I commit to, and being present with my team. I lead with honesty, asking the hard questions, and naming the "why." Staff in this field can absorb a lot of difficulty when they understand the purpose behind what they are being asked to do. When people lose sight of the mission, I bring them back to it. When the mission starts to feel abstract, I connect it to the family we served that morning.

I have supervised staff, developed training systems, managed complex incident response, and built cross-agency relationships with housing providers, case management teams, and behavioral health partners. I have also navigated the harder parts of leadership, managing underperformance with care, holding accountability without losing relationship, and making decisions in real time without all the information I wish I had.

As a woman of color who has worked in this sector for a decade, I have also learned to lead in spaces where my authority is not always assumed. That experience has made me a more patient, more strategic, and more determined leader. I do not take the seat for granted. I use it.



7. Reflecting on the Theory of Change, please describe one way you incorporate this framework in your professional or personal life. Additionally, explain how you would integrate the Theory of Change into your work on the CoC Board and how you intend to advocate for and support the communities you represent.

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 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 — is not abstract to me. It describes what I try to build every day, and it maps directly onto the model I have watched Mary's Place develop over the years.

Mary's Place operates on the conviction that ending family homelessness requires all three interventions, outreach, prevention, and shelter, working together. Each piece of that model is an expression of the Theory of Change. Outreach centers lived experience by meeting families where they are, on their terms, before they are in survival mode. Prevention responds to needs before they become emergencies, addressing the underlying conditions - economic instability, housing insecurity, system failures - that make families vulnerable. Shelter holds the line for families when everything else has broken down, providing safety, support, and hope.

In my own professional life, I incorporate this framework by structuring shelter operations around guest voice: building feedback loops, ensuring that advocacy meetings are genuine conversations rather than compliance checkboxes, and hiring and training staff who reflect the communities we serve. But I also try to hold the full continuum in view - understanding that the families in our shelter are not the beginning of the story. They arrived after a series of missed opportunities for outreach and prevention, and part of my job is to make sure we are connected to those upstream systems, not operating in isolation from them.

On the CoC Board, I would integrate this framework by insisting that the full continuum be represented in every consequential conversation, including funding priorities, performance standards, coordinated entry design, data reporting. Prevention and outreach cannot be afterthoughts. They are the system's best tools for eliminating inequity, because they reach families before crisis has compounded the harm. I would push for performance frameworks that capture what prevention and outreach accomplish, not just what shelter produces.

And I would advocate loudly for families with children as a population that deserves specific attention within the equity commitments of the Theory of Change. Homelessness in King County falls disproportionately on Black families, Indigenous families, and families with young children. A system that centers equity must reckon with that reality, and a board that centers lived experience must include voices from providers who work with those families every day. That is the voice I would bring, rooted in a decade of shelter-floor experience, and informed by an organization that has built its entire model around the belief that no child should sleep outside.

6. Do you require any accommodations or support to fully participate as a member of the CoC Board?

No

