Maricopa Regional Continuum of Care

Board Meeting Agenda

August 24, 2026

Chapparal Room, Second Floor, 302 N 1st Avenue, Phoenix

The public is invited to join using the Webinar link.

1. Call to Order

2. Call to the Audience

An opportunity will be provided to members of the public to address the Board on items that are not on the agenda that are within the jurisdiction of the Maricopa Regional Continuum of Care, informational items, or on items on the agenda for discussion but not for action.

Members of the public attending in person are asked to fill out a Request to Speak form. Comments must not exceed three minutes in length. A total of 15 minutes will be provided for the Call to the Audience agenda item, unless the chair requests an exception to this limit. Members of the public attending in person may comment on agenda items posted for action at the time the item is heard.

Pursuant to Title II of the Americans with Disabilities Act (ADA), the Maricopa Regional Continuum of Care does not discriminate on the basis of disability in admissions to or participation in its public meetings. Persons with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting the Maricopa Association of Governments (MAG) at (602) 254-6300. Requests should be made as early as possible to allow time to arrange the accommodation.

The Maricopa Regional Continuum of Care and MAG work to ensure full compliance with Title VI of the Civil Rights Act of 1964, the Civil Rights Restoration Act of 1987, and related authorities and regulations in all programs and activities. See MAG's full Title VI Notice to the Public for more information. If you have any questions regarding the meeting, please contact MAG.

INFORMATIONAL ITEMS

3. Informational Items

Action requested: Information.

3A. HUD Heat & Disaster Relief Technical Assistance Update

This item provides a brief update on the ongoing HUD-funded heat relief and disaster preparedness technical assistance provided to the Maricopa Regional Continuum of Care.

Action requested: Information.

3B. Youth Homeless Demonstration Program (YHDP/YHSI) Update

This item provides an update regarding the joint Youth Homelessness Demonstration Program (YHDP) application submitted on behalf of the Maricopa and Balance of State Continua of Care. Enclosed is a copy of the project priority listing submitted with the application.

Action requested: Information.

3C. General Membership Meeting Update

This item provides a summary of the first meeting of the Maricopa Regional Continuum of Care General Membership, which was held August 11, 2026. Forty-two general members attended, and the meeting was led by the Board Co-Chairs, MAG staff, and Committee Co-Chairs.

Action requested: Information.

3D. Monthly Homelessness Data Report

This standing item provides the Board with the most recent Maricopa Homelessness Data Report. The Monthly Snapshot for July 2026 is enclosed and is published to the CoC website on a regular monthly cadence.

Action requested: Information.

ITEMS PROPOSED FOR CONSENT

4. Approval of Consent Agenda

Board members may request that an item be removed from the consent agenda. Prior to action on the Consent Agenda, members of the public attending in person will be provided with an opportunity to comment on consent items. Board members also are requested to review any written/online public comments received for the Consent Agenda.

Action requested: Approval of the Consent Agenda.

4A. Approval of July 13, 2026, Meeting Minutes

Action requested: Approval.

4B. Lead Agency Oversight Framework

This item presents the lead agency oversight framework for Board approval. The framework, which includes a guidance document and an oversight tool (enclosed), supports the Executive Committee in evaluating the CoC's staffing entities, including the Collaborative Applicant, the Coordinated Entry Leads, and the Homelessness Management Information System Lead. This item has been recommended for approval by the Executive Committee.

Action requested: Information.

ITEMS PROPOSED TO BE HEARD

5. Statewide HMIS Transition Update

Representatives from Solari and MAG staff will present an update on the statewide Homeless Management Information System (HMIS) vendor transition process and timeline.

Action requested: Information and discussion.

6. Call for Expression of Interest Update

The Board Co-chairs and MAG staff will provide an update on the 2026 Call for Expression of Interest (CEI). The CEI is the process through which the CoC appoints new members of the Board and committees.

Action requested: Information, discussion and/or action.

7. FY 2026 CoC NOFO Update

MAG staff will provide an update on the FY2026 CoC Notice of Funding Opportunity (NOFO), recent updates following federal litigation, and consolidated application strategies.

Action requested: Information, discussion and/or action.

8. Request for Future Agenda Items

An opportunity will be provided for the Board members to request topics or issues of interest they would like to have considered for discussion at a future meeting.

Action requested: Information.

9. Board Roundtable

An opportunity will be provided for the Board members to present a brief summary of current events. The Board is not allowed to propose, discuss, deliberate or take action at the meeting on any matter in the summary, unless the specific matter is properly noticed for legal action.

Action Requested: Information.

Adjournment

Agenda Item 3A

Official Memorandum

To: Maricopa Regional Continuum of Care Board Members
From: David Bridge, Community Initiatives
Date: August 19, 2026
Subject: 3A: HUD Disaster TA Community Workshop

This memo provides an update on participation in the U.S. Department of Housing and Urban Development (HUD) Technical Assistance Community Workshop focused on strengthening disaster response and recovery efforts for people experiencing homelessness.

Board and Committee Actions

No prior actions.

Summary

On behalf of the Maricopa Regional Continuum of Care (CoC), staff were invited by HUD to participate in its sponsored Technical Assistance Community Workshop designed to help CoCs across the country strengthen disaster response and recovery efforts for people experiencing homelessness. Although the Community Workshops began in June, staff participation was limited due to staffing transitions and competing deadlines for the CoC and YHDP NOFOs. The Community Workshop concluded on August 18, 2026. Staff now have access to HUD's Disaster Recovery Homelessness Toolkit and presentation materials, which will support local disaster coordination and implementation.

Next Steps

There are no additional program requirements for follow up. HUD technical assistance and/or participation in future Community workshops on disaster preparedness is available. HUD recommends that all CoCs initiate homeless disaster preparedness as part of their overall collaborative system planning

Official Memorandum

To: Maricopa Regional Continuum of Care Board Members
From: David Bridge, Community Initiatives
Date: August 19, 2026
Subject: 3B: Youth Homeless Demonstration Program (YHDP/YHSI) Update

This memo provides an update on the submission of the join collaborative application between the Maricopa Regional Continuum of Care (CoC) and the Arizona Balance of State CoC for the 2025 U.S. Department of Housing and Urban Development (HUD) Youth Homeless Demonstration Program/Youth Homeless System Improvement (YHDP/YHSI) Notice of Funding Opportunity (NOFO).

Board and Committee Actions

Date	Action	Body
June 22, 2026	BoS and Maricopa Regional Youth Action Boards (YAB) provided information update on HUD YHDP/YHSI NOFO.	Board
August 4, 2026	BoS and Maricopa Regional YABs approved YHDP Priority Listing.	BoS and Maricopa Regional YABs

Summary

The 2025 HUD YHDP/YHSI NOFO allows eligible applicants, including CoCs, to apply for funding to provide programs and services for unaccompanied homeless youth, including both youth under age 18 and transition-aged youth ages 18 to 24.

Per charters, Rank and Review of YHDP submissions was conducted by a joint panel of YAB members from both CoCs. Ultimately, the Rank and Review group recommended twelve (12) total projects. The recommended Priority Listing was approved by each YAB for submission to HUD on August 4, 2026. The Priority Listing, along with the YHDP

collaborative application, was successfully submitted as a joint application under Arizona Department of Housing (ADOH) as a Collaborative Applicant and Unified Funding Agency on August 9, 2026. The approved Priority Listing (enclosed) is posted on the CoC website.

The joint application requested the maximum available amount of $15,000,000 for a two-year grant period.

- Maricopa Regional Continuum of Care Projects: Eight (8) Projects - $11,503,698 (77%)
- Arizona Balance of State Continuum of Care: Two (2) Projects - $2,596,302 (17%)
- Joint COC infrastructure projects for HMIS and SSO-Coordinated Entry - $900,000 (6%)
- Joint Planning Grant (5% of total request) - $750,000

The Maricopa Regional CoC grants would provide a projected 178 Transitional Housing beds with integrated services as well as supportive service outreach capacity for approximately 1,000 youth and transition aged youth. Per HUD's objectives, the applicant pool included several new potential CoC recipients, including faith-based organizations and youth-focused programs.

Due to an existing statewide Youth Homeless System Improvement Grant, it was decided not to pursue the YHSI component at this time.

Next Steps

Per the YHDP NOFO, the anticipated HUD grant award date is September 15, 2026. Staff will continue to provide updates regarding funding decisions.

For questions or additional information, contact David Bridge at DBridge@azmag.gov.

Maricopa & Balance of State Joint Project Priority Ranking

#	CoC	Organization Name	Project Type	Project Name	Clients Served	Beds	Amount Ranked
1	BOS	Arizona Youth Partnership	TH-Crisis Residential	Pathways to Home (PATH)	120	42	$2,028,000
2	BOS	Impact 928, Inc.	TH-Crisis Residential	Impact 928 Transitional Housing for Young Women	13	8	$568,302
3	Maricopa	Homeless Youth Connection	SSO-Host Homes/Kinship Care	HYC Host Home Program	60	N/A	$770,000
4	Maricopa	ATR Resource Services	TH-Shared	Pathway to Permanence Initiative	110	72	$1,830,866
5	Maricopa	City Help Inc. of Phoenix	TH-Crisis Residential	Youth Transitional Pathways to Success	50	50	$1,675,520
6	Maricopa	Salosaa Resource Center	SSO-Street Outreach	Fight 4 Me	600	N/A	$1,852,000
7	Maricopa	Melabiz Community Hub	SSO-Street Outreach	The Landing Initiative	200	N/A	$623,744
8	Maricopa	ReNewWell Inc	TH-Shared	Garfield Gardens YHDP	208	52	$2,500,000
9	Maricopa	Jacinths Homeless Foundation	TH-Shared	Housing with Hope	40	4	$963,600
10	Maricopa	I Am Beautifully Broken	SSO-Street Outreach	Mobile Youth Outreach, Supportive Services and Resource Center	350	N/A	$1,287,968
11	Statewide	ADOH	Coordinated Entry	SSO-CE	N/A	N/A	$700,000
12	Statewide	Solari	HMIS	HMIS	N/A	N/A	$200,000
					1751	228	$15,000,000

Official Memorandum

To: Maricopa Regional Continuum of Care Board Members
From: Megan Sebok, Community Initiatives
Date: August 19, 2026
Subject: 3C. General Membership Meeting Update

This memo provides a summary of the first meeting of the Maricopa Regional Continuum of Care (CoC) General Membership, which was held August 11, 2026.

Board and Committee Actions

Date	Action	Body
January 26, 2026	Approved the General Membership Agenda	Board
April 7, 2026	Recommended Agenda updates to the Board for approval	Executive Committee
April 27, 2026	Approved Agenda updates	Board
July 13, 2026	Approved Agenda updates	Board

Summary

The first meeting of the Maricopa Regional Continuum of Care General Membership was held on August 11, 2026. Forty-two general members attended, and the meeting was led by the Board Co-Chairs, MAG staff, and Committee Co-Chairs.

The meeting began with a welcome and an explanation of the purpose of convening the General Membership. Attendees then received an overview of the new CoC Charter approved by the Board in 2025, during which Committee Co-Chairs presented on the role and work of their respective committees. This portion of the meeting included time for questions, discussion, and a formal vote to ratify the Charter, which had been sent out in advance to allow members to review it beforehand.

Following the Charter overview, staff provided an update on the HUD CoC NOFO and then described the committee structure along with ways members could become involved. The meeting concluded with a brief discussion of next steps. The Charter was unanimously ratified by all who voted, and staff shared that the next General Membership meeting will likely take place in January. Before that meeting, a survey will be distributed to gather input on topics and areas of interest for future presentations.

Next Steps

Staff

- Distribute meeting minutes.
- Distribute a survey to determine areas of interest for future meetings.

For questions or additional information, contact Megan Sebok at msebok@azmag.gov.

Official Memorandum

To: Maricopa Regional Continuum of Care Board Members
From: Megan Sebok, Community Initiatives
Date: August 19, 2026
Subject: 3D: Monthly Homelessness Data Report

This item provides the Board with the most recent *Maricopa Homelessness Data Report* and serves as the standing update on the CoC's monthly data reporting. The *Maricopa Homelessness Data Report — Monthly Snapshot: June 2026* is enclosed for the Board's reference.

Board and Committee Actions

Date	Action	Body
March 24, 2025	Briefed on planned changes to CoC data reporting during the Homelessness Trends Report presentation, including a proposed monthly one-page snapshot and a biannual comprehensive report.	Board
June 23, 2025	Received an information and discussion item on the proposed new structure for publicly available CoC data reporting, including monthly snapshots and biannual comprehensive trends reports.	Board
October 27, 2025	Approved the Monthly Data Reporting Format.	Board

Agenda Item 3D

Summary

The *Maricopa Homelessness Data Report* is a one-page monthly snapshot providing a regular, publicly available view of key indicators across the Maricopa regional homeless system. Its purpose is to provide the Board, system partners, and the public a consistent and timely picture of how the regional system is performing month over month.

Publication and Current Report

These reports are published to the Maricopa Regional CoC's website and updated on a regular monthly cadence. The *Maricopa Homelessness Data Report — Monthly Snapshot: July 2026* is attached for the Board's reference.

Next Steps

Staff will continue to update the Homelessness Trends page as new data becomes available.

For questions or additional information, contact Megan Sebok at msebok@azmag.gov.

Maricopa Regional Continuum of Care

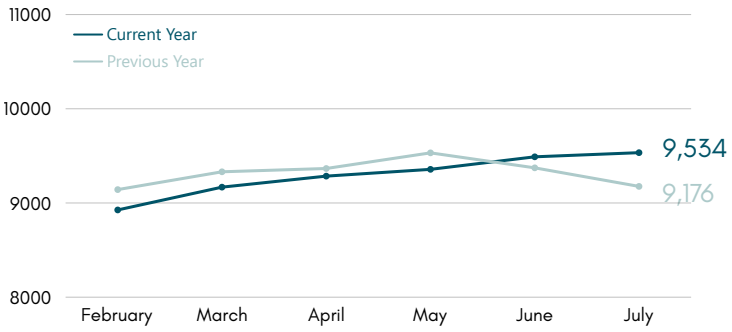
Maricopa Homelessness Data Report
Monthly Snapshot: **July 2026**

Maricopa Regional Continuum of Care

This monthly report highlights key metrics in the population experiencing homelessness in Maricopa County. All data comes from the Maricopa Homeless Management Information System (HMIS)

Who is active in our system?

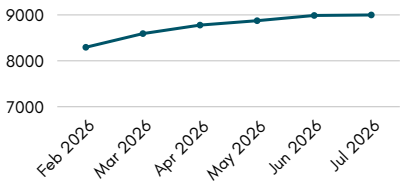
Total Actively Homeless Households



These are the households using homelessness services in Maricopa County and is equivalent to those on the local By-Name List.

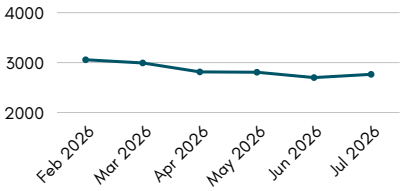
Singles

Households: 8,797
Individuals: 8,999



Families

Households: 737
Individuals: 2,765



Current subpopulation count and % increase/decrease over the last 3 months

Older Adults (62+)
Households: 1,323
Individuals: 1,358
2% ↑

Veterans
Households: 551
Individuals: 588
3% ↓

Chronically homeless
Households: 3,800
Individuals: 4,102
5% ↑

Youth (18-24)
Households: 669
Individuals: 886
12% ↓

Individuals served this month*

Emergency Shelter:	**3,334**	Transitional Housing:	**879**	Permanent Supportive Housing:	**4,740**
Street Outreach:	**7,327**	Rapid Rehousing:	**1,551**	Other Permanent Housing:	**212**

*Contains duplicated counts due to client use of multiple services

How did households enter the system?

New to system	Return from inactive	Return from housing
993 ↓ 5%	**1,018** ↑ 1%	**65** ↓ 3%

Current count and % increase/decrease over the last 3 months

How did households leave the system?

Rental (no subsidy)	Rental (subsidy)	Family & Friends	Unknown/Negative Exit
242 ↑ 8%	**176** ↑ 2%	**227** ↑ 50%	**1,387** ↓ 8%

Current count and % increase/decrease over the last 3 months

Monthly Takeaway

July saw a slight decrease in new to system households (-5%) along with a 3% decrease in return from housing. Chronically homeless households increased slightly (+5%) while youth households decreased by 12%. Family & Friends exits increased significantly (+50%), and unknown/negative exits decreased by 8%.

This report was compiled by the MAG Community Initiative's homelessness team. Special thanks to the Solari HMIS team for collecting the data for this report.

Agenda Item 4A

Maricopa Regional Continuum of Care

Board Meeting Minutes

July 13, 2026

This meeting was conducted in person and virtually.

MEMBERS	ATTENDANCE
Tamara Bridwell, Maricopa County	Virtual
Tim Burch, Co-Chair, City of Tempe	In-Person
Councilmember Wally Campbell, City of Goodyear	Not Present
David Crummey, PNC Bank	Virtual
Elizabeth da Costa, AHCCCS	Virtual
Jason Flam, City of Mesa	Virtual
Friend Kenny, Youth Action Board	Not Present
Emma Garcia, Valley of the Sun United Way	Virtual
Councilmember Doreen Garlid, City of Tempe	Virtual
Vice Mayor Kesha Hodge Washington, City of Phoenix	Not Present
Gabriel Jaramillo, Vitalyst Health Foundation	Virtual
Benjamin Jeffrey, MACV Foundation	In-Person
Matthew Kelly, Co-Chair, Mercy Care	In-Person
Tianna Matthews, Maricopa County Sheriff's Office	Virtual
Rachel Milne, City of Phoenix	Virtual
Gabe Priddy, Phoenix Rescue Mission	Virtual
Arianna "Nikki" Ramirez, Copa Health	Virtual
Amy Schwabenlender, Keys to Change	Virtual
Nathan Smith, CASS	Virtual
Amy Sullivan, City of Peoria	Virtual
Charles Sullivan, Arizona Behavioral Health Corporation	Virtual
Maria Wildey, Community Bridges, Inc.	Present

1. Call to Order

The meeting of the Maricopa Regional Continuum of Care (CoC) Board was called to order by Co-Chair Burch at 1:30 pm. Roll call was taken to confirm a quorum of members was present.

Co-Chair Burch welcomed David Bridge, the new MAG Community Initiatives Planning Manager supporting the Continuum of Care Board.

2. Call to the Audience

Co-Chair Kelly asked MAG staff whether any public comments had been received. MAG staff confirmed that there were no public comments received and no one had offered public comments at that time.

3. Informational Items

Co-Chair Burch noted that item 3A, the Consolidated Application Strategy Crosswalk Update, was on the agenda for information only and asked if any members had any questions or would like to request a presentation on the item. None were noted.

4. Approval of Consent Agenda

Co-Chair Kelly stated that Item 4A was on the Consent Agenda, which is the General Membership Agenda Update. Co-Chair Kelly asked if any board member had questions, comments, or wished to request a presentation on the item. None were noted.

Co-Chair Kelly requested a motion to approve the Consent Agenda item. David Crummy moved to approve Consent Item 4A, and Ben Jeffrey seconded the motion. The motion passed unanimously with the following members voting in favor: Tamara Bridwell, Co-Chair Tim Burch, David Crummey, Elizabeth da Costa, Jason Flam, Emma Garcia, Councilmember Doreen Garlid, Gabriel Jaramillo, Benjamin Jeffrey, Co-Chair Matthew Kelly, Tianna Matthews, Rachel Milne, Gabe Priddy, Nikki Ramirez, Amy Schwabenlender, Nathan Smith, Amy Sullivan, Charles Sullivan, and Maria Wildey.

4A. General Membership Agenda Update

The Board approved by consent the agenda update.

5. NOFO Interview Questions

Co-Chair Burch introduced Item 5 and noted that any board member with a conflict of interest must recuse themselves from the discussion and vote. Non-conflicted members were provided with an attestation to sign. In-person conflicted members were asked to leave the table and sit in the audience; virtual conflicted members were asked to remain muted for the duration of Item 5.

Senior Planner Natalie Davenport provided background on the Department of Housing and Urban Development (HUD) Continuum of Care Notice of Funding Opportunity (NOFO) as the primary mechanism by which the community receives federal funding for the regional homelessness system. In previous years, the community received $52,000,000, funding a wide portfolio of projects, the majority of which is permanent housing. Davenport described the local competition process: applicants submit applications to the local portal; a Rank and Review Committee reviews and scores applications; the CoC combines scored applications with regional narrative responses to create the consolidated application; the consolidated application is submitted to HUD; and HUD reviews and announces awards.

Davenport noted that three items the board typically approves related to the local competition are scorecards, interview questions, and project ranking recommendations. The scorecards and project ranking recommendations were approved at a previous meeting; the interview questions are the final item needed to conduct the local competition. The local competition opened July 1 and closes July 24; after July 24, the Rank and Review process begins.

Davenport provided a reminder on NOFO scorecards, noting they should be considered together with the interview questions as a package used by the Rank and Review Committee. Davenport described notable changes to the scorecard structure, including a standard point structure across shared categories, response to HUD's new requirements for objective and performance-based criteria, expanded financial capacity review for new projects, narrative responses for Permanent Supportive Housing (PSH) and renewal projects, expanded partnership criteria, workforce development and relationship criteria, addition of a new Supportive Services Only (SSO) Coordinated Entry (CE) scorecard, new terminology consistency, and shifts responding to changes between FY25 and FY26. Following the June 29, 2026, board meeting, several items were added to the scorecards: substance use treatment engagement points requiring participant engagement in substance use treatment services as a condition of continued participation (with a three-point and a two-point option); a system-level commitment for additional leverage to respond to a consolidated application measure; and opportunity zones, which were moved to the system level. All updated scorecards are available on the CoC website.

Davenport explained the distinction between new project interview questions and renewal project interview questions. For new projects, five points from the 70-point

total are dedicated to the interview process. For renewal projects, the interview questions are not explicitly scored but may inform performance discretionary points under scorecard item B13. For renewal projects, 60 to 61 of 70 points are drawn from Homeless Management Information System (HMIS) reports validated by staff and scored automatically; 9 points are narrative; and 4 of those 9 points are discretionary points concerning performance measures (B13), which can be informed by interview responses. HUD has heavily emphasized objective criteria for renewals, which is why the explicit interview point allocation is structured differently for renewals versus new projects.

Davenport presented the three interview questions applicable to all new projects, both brand-new and transition grants: (1) How does this project's housing or service model promote participant privacy, choice, and safety? (2) What is your agency's approach to trauma-informed care practices when serving participants, and how is this approach implemented in day-to-day operations? (3) How does your agency plan to effectively serve members of vulnerable populations, specifically survivors of domestic violence, older adults, individuals with complex medical needs and behavioral health conditions, and individuals with substance use disorders?

Davenport presented two additional questions applicable to new projects only, not transition grants: (4) How will this project address specific system-level gaps in housing inventory and service provision, and in what ways will it integrate into and enhance the overall regional homelessness response system? (5) If funding is awarded, what timeline does your agency anticipate for full implementation, and how will your established staffing and financial oversight capacities support that timeline? Davenport noted the NOFO Workgroup's emphasis on Questions 4 and 5: Question 4 addresses new applicants' awareness of the system and where gaps exist; Question 5 addresses the depth of understanding of an agency's capacity needed to assess project viability, particularly for applicants who have not previously administered federal grants or complex operational requirements.

Davenport presented two interview questions applicable to transition grants only: (1) How will this transition change your service model, and what adjustments will be made to staffing and internal systems to successfully implement this new project? Please provide detailed information where available. (2) Describe your transition plan, including key activities the agency will undertake, partnerships that will support the

transition, anticipated challenges, and how you will ensure the continuity of services for current program participants.

Board members indicated the questions were straightforward and well put together and David Crummey moved to adopt them. Natalie Davenport noted the renewal questions had not yet been presented; Co-Chair Kelly confirmed there was more to cover. The presiding officer tabled the informal motion and indicated it would be revisited after the full presentation.

Natalie Davenport proceeded to present renewal project interview questions. Two scored questions already embedded in the scorecards were: (1) Why were full points not received on performance items? (2) What will be done moving forward to improve current project performance? Three unscored clarifying questions were: (1) Is your project proposing any significant programmatic or operational changes for the upcoming grant year in response to the current NOFO? If yes, briefly describe those changes. (2) What factors influenced your decision to submit this project as a renewal project versus a transition project? (3) What distinguishes your project from other projects beyond the project score that supports its placement in Tier 1? Davenport summarized that interview questions are designed to supplement rather than duplicate scorecards; new project questions are scored; renewal questions may inform discretionary points; and both new and renewal projects will have an opportunity for Rank and Review Committee members to ask clarifying questions.

Davenport then presented a local application strategy update and described the Tier 1 and Tier 2 structure, noting that Tier 1 is at 60% of the grant portfolio, which is dramatically different from past years when it was typically around 90%. This change, combined with a $1.3 to $1.4 billion federal set-aside for transitional housing and Supportive Services Only (SSO) projects, means that Tier 2 projects that are not transitional housing or SSO are unlikely to receive HUD funding.

Davenport announced that the team had explored and confirmed the ability to allow agencies to submit dual applications for their renewal projects. Under this framework, an eligible renewal project could submit both a standard renewal application and a new transition grant application simultaneously. If the renewal application does not achieve Tier 1 ranking, the separately submitted transition grant application could still be evaluated and potentially funded. Davenport characterized this as a pivot mechanism to give applicants maximum flexibility in a highly uncertain federal funding environment without compromising the fairness of the local competition. The team settled on this

option after completing viability checks and reviewing policy, and will communicate the option to all applicants immediately upon receiving affirmative board feedback.

There was a question about fairness, and staff responded that the team would ensure all applicants are informed of the option immediately upon board approval. David Crummey asked whether family renewal applicants could be encouraged to submit dual applications so that if they score highly and are funded in Tier 2 as a transition grant, additional permanent supportive housing slots for individuals might be preserved in Tier 1. Staff responded that applicants would be encouraged to review their recent performance data and scorecard information to assess their competitive position and determine whether a dual application is appropriate for their project type.

Elizabeth Da Costa raised two concerns: the timeline — noting that applications are due in approximately 11 days and that rapid dissemination of the dual application guidance is critical — and the Rank and Review Committee's capacity to handle additional applications, including interviews and discretionary points for dual submissions. Staff addressed the capacity concern by describing the transition from a single-track to a two-track interview process implemented in response to the prior year's workload, noting that the prior year saw a 160 to 200% increase in applications, and by noting the availability of a third track if needed. Staff also noted that the new scorecard is predominantly objective HMIS data, reducing the per-reviewer burden even as the total number of applications increases.

Gabe Priddy asked whether dual applications had ever been used before and whether any negative pitfalls or unintentional biases had been observed. Staff confirmed this is the first time dual applications have been considered, directly attributable to the Tier 1/Tier 2 changes in the current NOFO and acknowledged that unique challenges may arise but expressed confidence in the team's ability to adapt.

Co-Chair Kelly raised a procedural concern about whether additional prioritization guidance needs to be provided to the Rank and Review Committee for dual application scenarios, noting that the prioritization list was developed based on the assumption of single applications. Staff responded that the existing board framework is a sufficient base and that operational guidance will come from staff; the board cannot earmark funding or telegraph preferences for specific providers or projects. Co-Chair Kelly noted that in past cycles, insufficient direction to the Rank and Review Committee had resulted in ambiguity. Staff confirmed that operational guidance from staff will facilitate the process and that the board's existing framework is appropriate.

Elizabeth da Costa proposed that a policy statement be added to document the board's decision on how the renewal-to-transition-grant flip would be handled — specifically, that a project's transition grant application would be considered if the renewal application does not make Tier 1. Staff indicated the team would take that note and follow up with a written analysis. Staff noted the existing Rank, Review, and Reallocation Policy has a section addressing projects straddling the Tier 1/Tier 2 line and offered to strengthen language further if board members prefer.

MAG staff provided a clarifying statement that no additional policy language is needed because the ranking process already addresses the Tier 1/Tier 2 transition: projects first compete for Tier 1, and anything that does not fit in Tier 1 automatically falls into Tier 2 under the existing framework.

Co-Chair Kelly confirmed no further hands were raised and called for the motion. Co-Chair Kelly requested a motion for the agenda item. David Crummey moved to approve the proposed 2026 NOFO interview questions, and Amy Sullivan seconded the motion.

The motion passed with the following members voting in favor: Tamara Bridwell, Co-Chair Tim Burch, David Crummey, Elizabeth da Costa, Emma Garcia, Councilmember Doreen Garlid, Gabriel Jaramillo, Benjamin Jeffrey, Co-Chair Matthew Kelly, Amy Sullivan, Tianna Matthews, Rachel Milne, Gabe Priddy, and Maria Wildey. Nathan Smith, Amy Schwabenlender, Jason Flam, and Nikki Ramirez recused from the vote. No members voted against the motion.

6. NOFO Advancing Recovery Policy

MAG staff announced the transition to Item 6 and invited all members who had recused themselves from Item 5 to return to the conversation for the remainder of the meeting. MAG staff read the agenda paragraph, noting that the FY26 CoC Program NOFO includes an optional opportunity for CoCs to earn up to 10 preference points by adopting a policy prohibiting illicit drug enablement in CoC-funded housing projects. MAG staff identified Natalie Davenport, Senior Planner, as the presenter of the recommended policy.

Natalie Davenport opened the Item 6 presentation by indicating they would first provide an overview of the consolidated application strategy and scoring snapshot to contextualize the importance of the Advancing Recovery Policy, before presenting the policy itself. Davenport noted that a great deal of the strategy work occurs at both the

staff team level and the NOFO Workgroup level, and invited board members who wish to engage more deeply to contact MAG staff.

Davenport then introduced the Advancing Recovery Policy as the second actionable bonus point category. This policy would bring the CoC's estimated score to 156 out of 202 points. Davenport described the four core policy prohibitions identified by HUD: (1) the CoC will not operate drug injection sites or safe consumption sites; (2) the CoC will not distribute drug paraphernalia on or off property; (3) the CoC will not knowingly permit illicit drug use on property; and (4) the CoC will not conduct any of the above under the pretext of harm reduction. HUD provides for partial credit — 50% of points — if a CoC adopts some but not all elements, with full points awarded for full adoption; a proposed fully compliant policy was included in the board packet. HUD's additional requirements were described: CoCs must also describe remedies for violations, encourage substance use disorder treatment, and not prohibit sobriety requirements in programs; the proposed policy addresses all of these elements.

Davenport described the NOFO Workgroup's review of the policy, noting that the workgroup had a substantive discussion about how the policy aligns with community values and how the community adapts to HUD's changing priorities. The workgroup recommended that the board approve the policy. A key factor in the workgroup's recommendation was a 2025 Dear Colleague letter issued by the U.S. Department of Health and Human Services (HHS), which HUD confirmed as the reference standard for determining allowable versus unallowable activities under this policy.

Davenport described the allowable activities under the HHS Dear Colleague letter, which include: life-saving overdose prevention and response services such as Narcan and naloxone, substance use test kits, lock boxes, medication disposal kits, and overdose reversal training; common-sense public health approaches focused on prevention, treatment, and long-term recovery; advancing community and school substance use prevention knowledge; expanding access to evidence-based treatment; enhancing recovery support services; raising awareness of overdoses and associated tools; and increasing distribution, training, and use of naloxone and similar life-saving interventions. Unallowable activities — those that may not be funded with federal CoC dollars under this policy — include safer smoking kits, syringes, needle exchanges, and other items associated with facilitating drug use. Davenport emphasized that because allowable activities include Narcan and naloxone, the workgroup's recommendation for

approval was made in consideration of both competitiveness and the guidance received from HUD.

Davenport summarized the policy's effect: it increases restrictions for agencies on certain activities, includes remedies the CoC would need to take for violations, but preserves space for activities aligned with the HHS Dear Colleague letter. The policy as drafted refers specifically to CoC-funded housing projects throughout, consistent with the NOFO language. Regardless of whether the Dear Colleague letter is directly referenced in the policy text, the MAG team is able to transmit the letter alongside the policy.

Board member discussion was substantive. Elizabeth da Costa raised a concern that the HHS Dear Colleague letter and the allowable/unallowable table shown in the slide deck are not referenced or attached in the actual policy document, and suggested attaching the table to the policy to clarify the definition of paraphernalia for providers. Benjamin Jeffrey asked whether adoption of the policy at face value — which applies only to housing projects — could put the CoC at risk in other CoC-funded project types such as street outreach, particularly if partner organizations or outreach efforts include items on the not-allowed list. Natalie Davenport responded that the policy as written refers specifically to CoC-funded housing projects and is designed to meet the NOFO requirements as directly as possible; any inclusion of other project types would be beyond the current policy's scope and beyond what the CoC currently funds.

David Crummey asked whether any current CoC recipients operate outside the proposed rules. The presiding officer noted that some recipients may not directly engage in prohibited activities but may partner with or allow organizations to come onto their campuses to offer those services, which under the amended language would not be allowed.

Amy Schwabenlender clarified that her prior question in the NOFO Workgroup concerned harm reduction vending machines funded through a county correctional health subcontract and confirmed those machines do not contain items on the not-allowed list. Schwabenlender also confirmed that to her knowledge, no funded permanent supportive housing programs use federal dollars to purchase not-allowed items. Schwabenlender emphasized the importance of clarifying that the policy applies to CoC-funded housing projects specifically, and that adopting it does not mean the board believes no project anywhere in Maricopa County should engage in activities in the not-allowed column.

Emma Garcia asked how the Dear Colleague letter could be referenced in or alongside the policy to provide guidance to agencies, expressing concern that providers might self-censor or incorrectly assume their services are ineligible. Members agreed about not embedding detailed specifics that could become outdated, but advocated for some form of reference to the letter to reduce the risk of inadvertent non-compliance. Staff responded that it would be straightforward to add a reference to the Dear Colleague letter in the policy; if the guidance changes in the future, the team would bring the matter back to the board through a consent item or presentation. The MAG team is able to transmit the Dear Colleague letter alongside the policy when the policy is transmitted to the community.

Co-Chair Kelly requested a motion for the agenda item. David Crummy moved to adopt the policy as presented with no changes, and Amy Schwabenlender seconded the motion. The presiding officer noted the motion and second were on the floor and clarified for the record that staff had indicated they would transmit the Dear Colleague letter alongside the policy regardless of whether it is directly referenced in the policy text.

The motion passed unanimously with the following members voting in favor: Tamara Bridwell, Co-Chair Tim Burch, David Crummey, Elizabeth da Costa, Jason Flam, Emma Garcia, Councilmember Doreen Garlid, Gabriel Jaramillo, Benjamin Jeffrey, Co-Chair Matthew Kelly, Tianna Matthews, Rachel Milne, Gabe Priddy, Amy Schwabenlender, Nathan Smith, Charles Sullivan, and Maria Wildey.

7. Request for Future Agenda Items

Co-Chair Kelly asked if any members had requests for future agenda items.

Benjamin Jeffrey requested that a future agenda item be added regarding the anticipated August deadline for 211 live operator services in Arizona, specifically Maricopa County, describing it as a significant hit to the live operator system. Jeffrey noted that approximately 30 days prior, a domestic violence presentation in another setting had referenced an active state stakeholder meeting on this issue, and expressed concern that no updates had been received in the intervening weeks given the proximity to the deadline.

MAG staff acknowledged the request and indicated the team is currently monitoring the situation; no updates are available to share at this time, but the team will bring information back to the board once updates are received. The presiding officer noted

that monitoring is also occurring at the jurisdiction level; indicated that a letter of official response has been requested from relevant parties regarding their plans; and noted that 211 online will continue and that most case managers navigating with clients use the digital tool, providing some continued support. The presiding officer committed to bringing updates back to the board when available.

8. Board Roundtable

Co-Chair Kelly asked if any members had items to share for the Board roundtable.

Emma Garcia provided an update on the 211 live operator situation, noting that their team attended a meeting with the Governor's office and partner organizations. Garcia reported that the Governor's office is actively looking for funding to continue 211 services for a period of time while the state reconsiders the service overall. The takeaway from that meeting was that partner organizations would collaborate with United Way Worldwide to identify models working in other cities and proactively share best practices, including how services are funded, with further local conversations to follow about future options. Garcia noted that it is reassuring that additional funding appears likely to be provided to continue 211 services, and offered to return to the board with more information or to work with the MAG team to identify a presenter for a future board meeting.

Adjournment

The presiding officer announced that the next meeting of the Maricopa Regional Continuum of Care Board will take place on July 27, 2026. There being no further business, the meeting adjourned.

These meeting minutes were initially drafted using artificial intelligence (AI) and have been reviewed, edited, finalized, and verified for accuracy by MAG staff.

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Official Memorandum

To: Maricopa Regional Continuum of Care Board Members
From: Megan Sebok, Community Initiatives
Date: August 19, 2026
Subject: 4B. Oversight Framework

This memo provides a summary of the oversight framework tools created to review the Continuum of Care's (CoC) designated staffing entities.

Board and Committee Actions

Date	Action	Body
August 14, 2026	Recommend the staffing entity Oversight Framework and tools for Board approval.	Executive Committee

Summary

Although the Charter Implementation Strategic Committee (CISC) formally sunset in April 2026, consultant Kristy Greenwalt continued working with the Executive Committee to complete the development of tools that support oversight of the CoC's staffing entities, including the Collaborative Applicant, the Coordinated Entry leads, and the HMIS Lead.

Because part of the Executive Committee's responsibility under the Charter is to provide oversight to these staffing entities, the final deliverable of the CISC focused on establishing practical resources to help the committee fulfill this role. The Executive Committee was presented two final products: a written framework outlining the who, what, where, when, and how of the annual review process, and an Excel-based tool that operationalizes this review using the executed Memorandums of Understanding (MOUs) as the basis for evaluation.

The framework clarifies that while the Executive Committee is responsible for ensuring that annual reviews occur, it is not required to conduct those reviews directly. Members may choose to complete the reviews themselves, designate an alternative process, or engage a

consultant to do so. The intent of the framework is to identify issues early, support continuous improvement, and avoid creating an overly burdensome, documentation-heavy compliance exercise. The Executive Committee reviewed several draft versions over the past months, providing feedback that shaped the final tools. After discussion during the August 12 meeting, the committee reached consensus, and final approval of the framework and Excel review tool was completed through an electronic vote on August 14.

Next Steps

- The Board will be asked to formally approve the framework and Excel review tool.
- Following Board approval, the Executive Committee will begin using these tools to carry out annual reviews of the CoC's staffing entities.

For questions or additional information, contact Megan Sebok at msebok@azmag.gov.

MARICOPA REGIONAL CONTINUUM OF CARE

EXECUTIVE COMMITTEE GUIDE: ANNUAL REVIEW OF DESIGNATED STAFFING ENTITIES

About this Tool

This tool is designed to help the CoC review the performance of its designated staffing entities against the responsibilities outlined in the executed MOU. It is intended to support a fair, evidence-informed, and collaborative review process that identifies strengths, areas for improvement, and any follow-up action needed.

The tool should be used as a practical guide—not a rigid scorecard. Reviewers should consider available evidence, context, and resource constraints, and should approach the review as a collaborative opportunity to strengthen performance, clarify expectations, and support continuous improvement. Staffing entities should be given an opportunity to provide context, clarify information, and respond to findings before conclusions or next steps are finalized.

1. PURPOSE OF THE REVIEW PROCESS

The CoC Board is responsible for overseeing the performance of its designated staffing entities, including the Collaborative Applicant, Homeless Management Information System (HMIS) Lead, and Coordinated Entry System (CES) Lead. Under the Governance Charter, the Executive Committee is responsible for ensuring that these reviews occur and that results are used to support effective oversight, continuous improvement, and Board decision-making.

The purpose of the review process is to:

- Support strong system performance and continuous improvement;
- Ensure roles, responsibilities, and expectations are understood and aligned with executed MOUs;
- Identify strengths, challenges, and needed adjustments early;
- Provide a structured basis for Board awareness, follow-up, and decision-making; and
- Help determine when routine adjustments, additional support, a performance improvement plan, or other action may be warranted.

The process is intended to be collaborative and constructive. It is not designed to be punitive or unnecessarily burdensome, but to strengthen alignment, accountability, and effectiveness across the CoC.

Note on Review of CES Lead vs Annual CES Evaluation

HUD requires CoCs to evaluate the Coordinated Entry System annually, with a focus on how the system is functioning for people seeking assistance, including access, fairness, transparency, assessment, referral, follow-up, and overall participant experience. This requirement is related to, but distinct from, evaluating the performance of the CES Lead entity. The annual CES evaluation should inform the Board's understanding of system strengths and gaps, but the CES Lead evaluation should focus specifically on whether the designated lead is carrying out its assigned responsibilities effectively, supporting system partners, meeting Board expectations, and using evaluation findings to improve CES operations.

2. ROLE OF THE EXECUTIVE COMMITTEE

The Executive Committee is responsible for ensuring that:

- Performance reviews of designated staffing entities are conducted annually
- Reviews are informed, balanced, and grounded in evidence
- Results are used to support continuous improvement and appropriate action

The Executive Committee is accountable for the process but does not need to conduct all reviews directly.

3. OPTIONS FOR CONDUCTING REVIEWS

The Executive Committee may determine the most appropriate approach for conducting each review, based on context, capacity, and need. The approach should ensure that the review is informed by people with direct knowledge of the role being reviewed, the work performed, and the evidence available.

Options include:

- Executive Committee-led review
- Committee-led review (e.g., HMIS Committee, Coordinated Entry Committee)
- Collaborative Applicant-supported review (for HMIS/CES, if roles are held by separate entities)
- Hybrid approach (shared responsibility across groups)
- Third-party review, particularly when:
    - There are ongoing performance concerns
    - A deeper evaluation is needed (e.g., during periods of change or complexity)
    - Additional neutrality or technical expertise is desired

The Executive Committee should use judgment to ensure the review approach is proportionate, informed, and not unnecessarily burdensome. In some cases, the Executive Committee may have sufficient direct insight to lead the review itself, particularly for Collaborative Applicant responsibilities tied to Board operations, governance support, and CoC-wide planning. In other cases—especially for HMIS and Coordinated Entry—the review should rely more heavily on committees, workgroups, partners, or others with direct knowledge of the relevant functions.

Even when one body leads the review, targeted input from others may be needed on specific topics. For example, a Collaborative Applicant review may require input from the committee or workgroup involved in the PIT Count, NOFO process, or other major deliverables.

4. TIPS FOR CONDUCTING THE REVIEW

The Executive Committee should determine an approach that is efficient, fair, and proportionate to the level of review needed. The following guidance is intended to support consistency while allowing flexibility.

Process-At-A-Glance

1. Executive Committee confirms the review approach and selects any targeted domains to be reviewed for the year.
2. Based on the scope of the review, Executive Committee identifies who should be involved in each review, including a lead for each role who will coordinate the process.
3. Staffing entity provides relevant context or materials, as requested.
4. Reviewers complete the tool through a group discussion, individual + synthesis process, or delegated/committee-led approach.
5. Draft findings are shared with the staffing entity for review and response.
6. Executive Committee reviews the draft findings, considers any staffing entity response, and finalizes findings and recommended action.
7. Board receives a summary of findings and any follow-up recommendations.

WHO SHOULD PARTICIPATE

- The review should involve Executive Committee members, with input from relevant committees (as outlined above).
- As a general guideline, 3–7 reviewers is sufficient to ensure multiple perspectives without creating unnecessary burden.

LEVEL OF REVIEW

Each designated staffing entity should receive an annual review focused on key performance areas and overall functioning. This annual review is intended to be practical and proportionate, not necessarily a full audit of every responsibility outlined in the MOU.

The role-specific tools (attached) distinguish between **core domains**, which should be reviewed each year, and **targeted domains**, which may be reviewed on a rotating basis or as needed. This approach allows the Executive Committee to focus on the most critical functions annually, while also creating space for deeper review of specific areas over time.

A deeper or more targeted review may be appropriate when significant concerns arise, when it has been several years since a comprehensive review, when the CoC is approaching a recompete period, or when additional analysis is needed to inform a major decision. In these cases, the Executive Committee may expand the scope of the review, incorporate additional input, or use a more in-depth process to better understand performance and identify needed improvements.

HOW TO COMPLETE THE TOOL

The review may be conducted using one of the following approaches:

1. Group Discussion Approach (Recommended for most cases)

- Reviewers meet to discuss each domain and complete the tool collaboratively.
- This approach supports shared understanding, reduces variability, and allows for real-time clarification.

2. Individual + Synthesis Approach

- Reviewers complete the tool individually in advance.
- The group then meets to discuss differences and align on final ratings and key observations.
- This approach may be useful when:
    - There are differing perspectives
    - The review is more complex or sensitive

3. Delegated or Committee-Led Approach

- A committee or subset of reviewers completes a draft assessment.
- The Executive Committee reviews, discusses, and finalizes findings.

Note: Simple averaging of scores is not recommended. Final assessments should reflect discussion, evidence, and consensus**,** rather than purely numerical results.

TIME COMMITMENT

- A standard annual review can typically be completed within:
    - **1–2 meetings (60–90 minutes each)**, depending on scope and preparation
- Deeper or targeted reviews (e.g., in advance of recompete or when concerns exist) may require additional time

The process should be efficient and focused**,** avoiding unnecessary duplication of information already available through committees, reports, and regular CoC operations.

TIMING WITHIN THE ANNUAL GOVERNANCE CYCLE

In alignment with the current Executive Committee work cycle, reviews will typically occur during the Governance Review phase (fall/early winter)**.** This timing allows the Executive Committee and Board to:

- Reflect on performance over the prior year, including major activities such as the NOFO
- Identify strengths, challenges, and system-level issues
- Incorporate findings into **priority setting and committee work planning for the coming year**

The Executive Committee should aim for a **consistent annual cadence**, while retaining flexibility to conduct additional or deeper reviews as needed.

5. INPUTS TO THE REVIEW PROCESS

Reviews should be informed by multiple perspectives, while maintaining a streamlined process.

Expected inputs include:

- Relevant Board and committee input
- Performance data and deliverables
- HUD compliance and monitoring information (as applicable)
- Additional stakeholder input (when needed)

The staffing entity should be provided an opportunity to review and respond to the draft findings before conclusions or next steps are finalized. This step is intended to ensure accuracy, allow the entity to provide context, and surface any factors that may be impacting performance – including broader system issues such as breakdowns in coordination, delayed decision-making, or misalignment between expectations and resources.

6. APPROACH TO PERFORMANCE ASSESSMENT

Reviews should consider both **compliance** and **performance**.

- Compliance focuses on whether the staffing entity is meeting required duties outlined in the executed MOU and any applicable HUD or CoC requirements in a timely and compliant manner.

- Performance focuses on how effectively duties are carried out in practice, including the quality and usefulness of work products, responsiveness to Board and committee direction, coordination with partners, and contribution to overall system functioning and improvement.

When assessing performance, reviewers should be mindful of context. Resource limitations, staffing capacity, timing of Board decisions, changes in HUD requirements, and other external factors may affect an entity's ability to carry out its responsibilities. These factors should not excuse unresolved performance issues, but they should help reviewers distinguish between issues within the staffing entity's control and broader system conditions that may require shared problem-solving.

The role-specific review tools (attached) include prompts to help reviewers assess both compliance and performance.

7. DECISION FRAMEWORK

The purpose of the review is not simply to "check a box," but to support clear, appropriate action that strengthens performance and ultimately improves the CoC's ability to serve people experiencing homelessness.

After reviewing the evidence, committee input, and any response from the staffing entity, reviewers should identify an overall recommended action category. These categories are **intended to guide judgment, not replace it.**

- **No Action Needed** may be appropriate when performance is strong, required duties are being met, and there are no significant concerns requiring follow-up. In these cases, the review may document key strengths and continue the current approach.

- **Minor Adjustments / Opportunities for Enhancement** may be appropriate when performance is generally strong and required duties are being met, but reviewers identify opportunities to strengthen coordination, communication, consistency, efficiency, documentation, or overall system functioning. These observations are intended to support continuous improvement and do not necessarily reflect deficiencies, noncompliance, or performance concerns requiring formal monitoring.

- **Targeted Improvements** may be appropriate when specific areas require corrective action or more focused follow-up. Examples might include recurring delays in deliverables, gaps in communication or coordination, inconsistent implementation of policies or procedures, or areas where expectations, priorities, timelines, or resources need to be clarified or better aligned. In these cases, the review should identify the specific improvement needed, who is responsible, and when progress should be revisited.

- **Performance Improvement Plan (PIP) / Further Review** may be appropriate when concerns are more significant, recurring, systemic, or require structured follow-up, and when less formal efforts—such as clarifying expectations, adjusting timelines, improving communication, or aligning responsibilities with available resources—have not resolved the issue. A PIP may be applied to one or more specific areas of responsibility, rather than the full scope of the MOU. A PIP should clearly describe the concern, expected corrective action, timeline, support needed, and how progress will be monitored.

8. USING AND COMMUNICATING RESULTS

At minimum, the Executive Committee should provide the Board with a summary of review findings for each designated staffing entity.

- When **performance is strong** and no significant concerns are identified, a concise summary may be sufficient. The summary can highlight key strengths, note any minor adjustments or follow-up items, and confirm that the entity is generally meeting expectations.

- When **concerns are identified**, findings should be documented more clearly and specifically. The documentation should describe the issue, the evidence considered, the expected improvement or next step, and the timeline for follow-up. The staffing entity should have an opportunity to review and respond to findings before they are finalized.

The goal is to ensure transparency with the Board, clarity for staffing entities, and a no-surprises approach over time.

ATTACHMENT 1: STAFFING ENTITY ANNUAL REVIEW SUMMARY

Entity Reviewed: [Collaborative Applicant / HMIS Lead / CES Lead]
Review Period: [Month Year–Month Year]
Date of Review: [Date]
Review Lead: [Name/Role]
Reviewers / Participating Body: [Executive Committee / Committee / Workgroup / Other]

1. PURPOSE OF THE REVIEW

This review was conducted as part of the CoC's annual process for reviewing the performance of designated staffing entities. The purpose of the review is to assess how effectively the staffing entity is carrying out its assigned responsibilities, identify strengths and areas for improvement, clarify expectations, and determine whether any follow-up action is needed.

The review is intended to be constructive, evidence-informed, and proportionate. It is not intended to serve as a full audit of every responsibility in the MOU unless a deeper review was specifically identified as necessary.

2. SCOPE OF REVIEW

The review focused on the domains selected by the Executive Committee for this review cycle. This may include domains reviewed annually, as well as any additional domains selected for targeted review based on timing, emerging issues, prior findings, major transitions, or upcoming decisions.

Domains reviewed:

[Domain 1]

[Domain 2]

[Domain 3]

Reason for targeted review, if applicable:
[Briefly note why any targeted domains were included, such as rotation schedule, emerging concern, prior follow-up item, transition planning, or upcoming recompete decision.]

3. REVIEW PROCESS AND INFORMATION CONSIDERED

The review was informed by the following sources of information, as applicable:

- Board and/or committee input
- Staffing entity materials or updates
- Relevant deliverables, reports, meeting materials, or work products

- Performance data or compliance information
- Partner or stakeholder input
- Prior feedback, follow-up items, or improvement efforts
- Other: [Specify]

The staffing entity was provided an opportunity to review and respond to draft findings before findings and recommended actions were finalized.

4. SUMMARY OF STRENGTHS

Reviewers identified the following strengths:

- [Strength 1]
- [Strength 2]
- [Strength 3]

These strengths reflect areas where the staffing entity is meeting expectations, supporting CoC operations effectively, and/or contributing positively to system functioning.

5. SUMMARY OF FINDINGS BY DOMAIN

[DOMAIN NAME]

Compliance assessment: [No concerns / Minor concerns / Significant concerns / Not enough information]
Performance assessment: [No concerns / Minor concerns / Significant concerns / Not enough information]

Summary of findings:
[Briefly summarize what reviewers found. Include both strengths and concerns, if applicable.]

Information considered:
[Briefly note the key information or examples that informed the finding.]

Context or system-level factors:
[Note whether any issue appears related to staffing entity performance, system-level conditions, resource limitations, Board/committee decisions, partner participation, unclear expectations, or other shared factors.]

Follow-up needed, if any:
[None / Monitor / Clarify expectations / Targeted improvement / Structured follow-up / Consider PIP or further review]

Recommended next step:
[Describe the action, owner, and timeline.]

[DOMAIN NAME]

[Repeat for Each Additional Domain]

6. AREAS REQUIRING FOLLOW-UP

The following areas require follow-up:

Domain	Concern or Opportunity	Recommended Action	Responsible Party	Timeline
[Domain]	[Concern]	[Action]	[Owner]	[Timeline]
[Domain]	[Concern]	[Action]	[Owner]	[Timeline]

7. STAFFING ENTITY RESPONSE

The staffing entity was provided an opportunity to respond to draft findings.

Summary of response/context provided:
[Summarize any clarifications, contextual factors, disagreements, commitments, or additional information provided by the staffing entity.]

Changes made to findings based on response, if any:
[Note any updates, corrections, or clarifications incorporated into the final summary.]

8. OVERALL RECOMMENDED ACTION

Recommended action category:
[Select one]

- ☐ No Action Needed
- ☐ Minor Adjustments Suggested
- ☐ Targeted Improvements Needed w/ Ongoing Tracking
- ☐ PIP / Further Review

Rationale:
[Explain the basis for the recommended action. If one domain has significant concerns but other domains are strong, clarify that the recommendation is focused on the specific area of concern rather than the full scope of the entity's responsibilities.]

9. FOLLOW-UP AND MONITORING PLAN

[Describe how progress will be revisited, including timing, responsible party, and whether follow-up will occur through the Executive Committee, a standing committee, Board update, or other process.]

10. FINAL NOTES

[Optional space for any additional considerations, unresolved questions, or issues to carry forward into committee work planning, future reviews, or Board discussion.]

INSTRUCTIONS

About This Tool	This tool supports the annual review of the CoC's designated staffing entities, including the Collaborative Applicant, HMIS Lead, and CES Lead, based on their executed MOUs. It is intended to guide a fair, evidence-informed, and collaborative review process that identifies strengths, areas for improvement, and appropriate next steps. The tool should be used as a practical guide—not a rigid scorecard—and applied with consideration of context and resource constraints.
How to Use This Tool	Each row represents a domain of responsibility. Reviewers should assess both compliance and performance, document key observations, and identify any follow-up actions. The tool is intended to support discussion and shared understanding; final assessments should reflect evidence and consensus, not simple averaging of scores.
Core vs Targeted Domains	**CORE** domains should be reviewed each year. **TARGETED** domains may be reviewed on a rotating basis or as needed, depending on priorities and any emerging issues (as determined by the Executive Committee).
Rating Guidance	Ratings are intended to guide discussion and support consistent interpretation across reviewers. They are not a substitute for judgment, and final assessments should be based on evidence, context, and group discussion. See tables below for more detail.
Information to Consider	Reviewers should identify the key evidence and observations that inform their assessment. This may include data, deliverables, committee input, or specific examples. The goal is to support clarity, consistency, and a no-surprises approach over time. Be sure to note specific strengths and areas of improvement.
Collaborative Review Reminder	The staffing entity should be provided an opportunity to review and respond to findings before conclusions are finalized. This process is intended to support continuous improvement and may include identification of system-level factors affecting performance.
Review Summary	The summary section is intended to help reviewers synthesize key observations across the domains reviewed, including major strengths, areas needing attention, system-level factors, and suggested follow-up. It may be completed by individual reviewers or by the review group, but it is not intended to replace the final summary report prepared for the staffing entity or Board.

COMPLIANCE RATING GUIDANCE

Rating	General Meaning
No concerns	Required duties are being met consistently, on time, and in alignment with MOU and applicable requirements.
Minor concerns	Duties are generally being met, with occasional issues that do not create significant risk or disruption.
Significant concerns	Duties are not being met consistently, or there are issues that may create compliance, operational, or system risks.
Not enough information	There is insufficient information to assess compliance.

PERFORMANCE RATING GUIDANCE

Rating	General Meaning
No concerns	Work is strategic, timely, responsive, well-coordinated, and supports effective CoC functioning.
Minor concerns	Performance is generally effective, with some issues related to timeliness, communication, quality, coordination, or follow-through that should be adjusted or enhanced
Significant concerns	Performance issues are recurring or consequential and are affecting Board/committee work, partner coordination, system functioning, or the CoC's ability to meet expectations.
Not enough information	There is insufficient information to assess performance.

FOLLOW-UP/ACTION GUIDANCE

Rating	General Meaning
No action needed	No follow-up required beyond routine annual monitoring.
Minor adjustments suggested	Minor issues identified; enhancements suggested
Targeted improvements needed	Specific improvements are needed and should be tracked over time.
Consider PIP/further review	Multiple, significant concerns. Deeper review and more structured follow-up required.
Not applicable	Domain was not reviewed or not active during this period.

Domain Type	Domain	Summary of Responsibilities	Compliance Rating	Performance Rating	Information to Consider	Reviewer Findings: Strengths & Areas for Improvement	Follow-Up / Action	Review This Year?
Core	CoC NOFO	The Collaborative Applicant is responsible for coordinating the annual development and timely submission of the CoC Consolidated Application, including the local competition, project application process, ranking support, GIW/data coordination, Board review, final submission, and post-submission debrief.			- NOFO timeline/process materials - Local competition documents - Board/committee materials - Applicant/provider feedback - Submission confirmation/results - Post-submission debrief			
Core	Governance & Committee Support	The Collaborative Applicant provides administrative, project management, and strategic support to the Board, Executive Committee, committees, subcommittees, advisory groups, and General Membership. Duties include meeting membership processes, onboarding, supporting development of committee workplans, logistics, agenda planning, minutes/records, communications, website updates, and supporting follow-up on action items.			- Committee workplans - Board and committee agendas/materials - Meeting minutes - Membership/CEI materials - Website postings - Co-chair feedback - Board/committee onboarding materials			
Core	Strategic Planning & System Performance	The Collaborative Applicant supports the Board in strategic planning, establishing annual priorities, policy development, system-level performance monitoring, reporting, and action planning. This includes drafting key deliverables, analyzing system trends, and helping the Board and committees identify gaps, barriers, and needed responses.			- Strategic plan - Annual priorities/Action Plans - System performance reports or dashboards - Policies/protocols/written standards - Board/committee feedback - Examples of issue identification or problem-solving			
Core	Planning Grant Administration & Resource Alignment	The Collaborative Applicant is responsible for applying for, administering, budgeting, tracking, and reporting on HUD CoC Planning Grant funds. The MOU also expects the Collaborative Applicant to identify resource gaps, communicate staffing limitations, and work with the Board to align responsibilities with available resources.			- Planning Grant budget - Financial reports / expenditure tracking - Match documentation - Board materials related to resource needs - Communications regarding capacity constraints			
Core	Coordination Across Roles	The Collaborative Applicant is expected to work in close partnership with the HMIS Lead and CES Lead to support effective CoC operations, committee work, system monitoring, and implementation of Board priorities. The Collaborative Applicant generally provides backbone and governance support, while HMIS and CES Leads provide technical and operational expertise within their respective domains.			- Committee agendas/meeting materials involving multiple staffing entities - Shared workplans or project timelines - Tools or protocols used for cross-role coordination and problem-solving (e.g., standing meetings) - Issues elevated to Executive Committee or Board (are issues actively discussed/resolved or avoided/hidden?)			
Targeted	Support for Lived Experience Participation	The Collaborative Applicant supports the Board in recruiting, onboarding, compensating, and retaining people with lived experience in CoC governance and planning. This includes helping reduce participation barriers, supporting stipend administration, and working with Board and committee leadership to create meaningful opportunities for involvement.			- Recruitment protocols/onboarding materials - Stipend records/process documentation - Lived Experience Subcommittee member feedback (Do members feel supported to actively participate? Are barriers to participation being addressed?) - Board/committee participation records (Is there evidence of consistent participation? Is retention an issue?)			
Targeted	Compliance & Performance Monitoring of CoC-Funded Projects	The Collaborative Applicant coordinates monitoring activities to support the Board's responsibility for ensuring CoC-funded projects comply with HUD requirements and perform effectively. This includes identification of higher risk projects, creation of an annual monitoring schedule, development of monitoring protocols/tools, development of monitoring reports to identify risks/findings/corrective actions, provision of technical assistance, and reporting to the Board or relevant committees.			- Monitoring schedule/protocols/tools - Provider communication - Monitoring reports - Corrective action tracking - Provider TA/training records - Committee/Board materials			
Targeted	Point in Time Count Planning & Implementation	The Collaborative Applicant coordinates planning, execution, reporting, and communication related to the annual Point-in-Time Count, in partnership with the Board, HMIS Lead, committees, municipalities, outreach partners, and other stakeholders.			- PIT methodology and timeline - Volunteer recruitment and training materials - HMIS/data validation documentation - PIT report/public materials - post-count debrief or lessons learned			
Targeted	Advocacy Support	If funded or activated by the Board, the Collaborative Applicant may support CoC advocacy activities, including policy tracking, drafting advocacy materials, supporting Board-approved positions, coordinating with coalitions, and helping the Board engage public officials or other policy stakeholders.			- Board-approved advocacy priorities/messages - Talking points, letters, or policy materials - Legislative or policy updates - Coalition/partner coordination records - Feedback from Board or relevant committee			
Targeted	Fundraising & Resource Development	If funded or assigned, the Collaborative Applicant may support the Board and Funders Committee in identifying funding opportunities, developing investment materials, supporting applications, tracking funding gaps, and helping align resources with CoC priorities.			- Funders Committee materials - Funding opportunity tracking - Grant/application materials - Case statements or investment materials - Resource gap analyses - Board discussions on staffing/resources			
Targeted	Communications, Media, and Public Education	If funded or assigned, the Collaborative Applicant may support public communications, education materials, press materials, dashboards, reports, and other communications that promote transparency, public understanding, and alignment with Board-approved messaging.			- Public reports/dashboards - Success stories - Website updates - Press releases/talking points - Public education materials - Board-approved messaging - Stakeholder feedback			

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Domain Type	Domain	Summary of Responsibilities	Compliance Rating	Performance Rating	Information to Consider	Reviewer Findings: Strengths & Areas for Improvement	Follow-Up / Action	Review This Year?
Core	HMIS Governance, Coordination, and Board Support	The HMIS Lead is responsible for supporting the governance, operation, and continuous improvement of the CoC's HMIS in partnership with the Board, HMIS & Data Systems Coordination Committee, Collaborative Applicant, CES Lead(s), and participating agencies. This includes supporting committee work, identifying challenges and opportunities, coordinating on priorities, and ensuring the Board has the information needed for effective oversight and decision-making.			- Committee agendas/materials - Board or committee feedback - Meeting attendance/participation - Workplans/timelines - Examples of issue escalation or coordination			
Core	HMIS Operations and System Administration	The HMIS Lead is responsible for day-to-day administration and operation of the HMIS, including system functionality, user management, system configuration, report/query support, vendor coordination, and overall compliance with HUD technical requirements.			- System issue logs/resolution tracking - Vendor coordination materials - User communications/training records - System upgrade/change documentation - Stakeholder feedback			
Core	Reporting, Dashboards, and System Analytics	The HMIS Lead is responsible for producing required HUD reports and supporting system-wide performance monitoring, operational reporting, and data analysis. This includes formal HUD reporting (PIT, HIC, LSA, SPMs, APRs) as well as local reports and dashboards to support active system management.			- HUD reports/submissions - Dashboards or performance reports - Data to support NOFO rating/ranking or monitoring efforts - Committee/Board feedback - Examples of analytical support provided			
Core	HMIS Data Quality, Monitoring, and User Compliance	The HMIS Lead is responsible for monitoring data quality and supporting the CoC in meeting HMIS participation, data entry, and reporting requirements. This includes monitoring provider data entry practices, identifying patterns of incomplete or inaccurate data, communicating expectations to users and agency leadership, and coordinating corrective action or training when needed.			- Data quality reports - Corrective action documentation - Participation compliance records - Technical assistance communications - Monitoring schedules/results - Committee/provider feedback			
Core	HMIS Policies, Privacy, Security, and System Compliance	The HMIS Lead is responsible for maintaining HUD-compliant HMIS policies and procedures, including privacy, security, data quality, participation agreements, and related governance documents. The HMIS Lead is also responsible for ensuring privacy protections and compliance across HMIS operations.			- Privacy/Security/Data Quality Plans - Participation agreements - Policy update records - Compliance communications - Security or incident documentation			
Core	Coordination Across Designated Staffing Entities	The HMIS Lead is expected to work in close partnership with the Collaborative Applicant, CES Lead(s), committees, and participating agencies to support aligned system operations, reporting, monitoring, planning, and implementation of Board priorities.			- Cross-role workplans/projects - Committee feedback - Examples of issue resolution - Dashboard/report coordination - Communication records			
Targeted	HMIS End User Support, Monitoring, and Training	The HMIS Lead is responsible for providing onboarding, training, technical assistance/troubleshooting, and ongoing support to HMIS users and participating agencies.			- Onboarding/training materials - Technical assistance logs - Help Desk/support records - User feedback/surveys			
Targeted	Vendor Management, Software Functionality, and System Enhancements	The HMIS Lead is responsible for managing the relationship with the HMIS software vendor and ensuring the software supports HUD compliance, required reporting, system administration, user needs, and Board-approved priorities. This may include monitoring vendor performance, tracking system issues, managing upgrades or enhancements, communicating changes to users, and coordinating implementation activities when major system changes occur.			- Vendor meeting records - Issue tracking/escalation logs - User communications - Upgrade/enhancement plans - Stakeholder feedback - System testing/troubleshooting documentation			
Targeted	HMIS Staff Development and Capacity Building	The HMIS Lead is responsible for maintaining sufficient staff expertise and capacity to support HMIS administration, reporting, training, and data analysis functions.			- Staffing/training records - Organizational updates - Capacity concerns communicated to Board - Examples of succession/cross-training efforts - Professional development activities			
Targeted	HMIS Grant Administration	The HMIS Lead is responsible for administration of HMIS grant funding, including application submission, budgeting, match, drawdowns, APR submission, fiscal management, and required reporting/documentation.			- Grant applications/APRs - Budget materials - Drawdown records - Monitoring documentation - Fiscal communications/reports			
Targeted	Data Requests and Research Support	The HMIS Lead may support non-standard data requests, research activities, analysis projects, or emerging planning needs in coordination with the Board, Collaborative Applicant, and approved governance processes.			- Research/data request logs - Board approvals - Analytical products - Stakeholder feedback			

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Core	CES Governance, Committee Support, and System Leadership	The CES Lead is responsible for supporting the governance and operation of the Coordinated Entry System in partnership with the Coordinated Entry Committee and Board. This includes supporting committee workplans and meetings, drafting required deliverables, facilitating implementation of Board-approved policies and priorities, and elevating operational or policy issues requiring committee or Board attention.			- Committee agendas/materials - Committee workplans/deliverables - Board/committee feedback - Examples of issue identification or troubleshooting			
Core	Outreach, Access Points, and System Accessibility	The CES Lead is responsible for ensuring CES is accessible across the CoC's geographic area through appropriate access points, phone access, language access, marketing materials, and partnerships with places people experiencing or at risk of homelessness may frequent.			- Access point list/map - Phone system data - Marketing/outreach materials - LEP/language access procedures - Participant/provider feedback			
Core	Assessment Quality, Consistency, and Equity	The CES Lead is responsible for ensuring households receive an initial, comprehensive assessment using the standardized assessment tool approved by the CoC Board, and that assessment practices are consistent across staff and access points.			- Assessment policies/procedures - Training records - Quality assurance/fidelity monitoring - Data showing assessment patterns/outcomes - Participant/provider feedback			
Core	Prioritization, By-Name Lists, and Referrals	The CES Lead is responsible for implementing Board-approved prioritization protocols, maintaining By-Name Lists for interventions, making timely referrals as units become available, and tracking referrals in HMIS.			- Prioritization protocols - BNL data/reports - Referral timeliness data - HMIS referral records - Provider/participant feedback			
Core	CES Monitoring, Feedback, and Continuous Improvement	The CES Lead is responsible for supporting ongoing evaluation and improvement of CES operations and outcomes. This includes working with the HMIS Lead and Collaborative Applicant to develop dashboards and monitoring tools, soliciting feedback from participating projects and people with lived experience, identifying operational challenges or inequities, and summarizing findings and recommendations for the Board annually.			- Annual evaluation - CES dashboards - Provider feedback results - Participant/lived experience feedback - Improvement plans or follow-up actions			
Core	Coordination Across Designated Staffing Entities	The CES Lead is expected to work in close partnership with the Collaborative Applicant and HMIS Lead to support aligned system operations, policy implementation, data coordination, project monitoring, and problem-solving across the CoC.			- Cross-role workplans/projects - Committee materials involving multiple staffing entities - Dashboard/data coordination examples - Examples of issue resolution - Board/committee feedback			
Targeted	CES Policies, Procedures, and Written Standards	The CES Lead is responsible for working with the Coordinated Entry Committee to update relevant sections of the CES Operations Manual, written eligibility standards, prioritization protocols, and other CES policies or procedures.			- CES Operations Manual - Prioritization protocols - Written standards/eligibility criteria - Committee feedback/materials - Board approval records			
Targeted	Client Safety, Confidentiality, and Privacy Protections	The CES Lead is responsible for protecting participant safety, confidentiality, and privacy, including for households fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking.			- Privacy/confidentiality policies - Staff training records - DV safety procedures - Incident/concern documentation, if applicable - Participant/provider feedback			
Targeted	HMIS Data Entry, Sharing, and Data Quality	The CES Lead and access points are required to use HMIS and comply with HMIS data entry, reporting, referral tracking, and data sharing expectations.			- HMIS data quality reports - Referral tracking reports - HMIS Lead feedback - CES dashboard/data reports - Corrective action or TA records			
Targeted	Household-Specific Access and Coordination	The CES Lead may have responsibilities or workflows that differ by household type or subpopulation, including families with minor children, single adults/adult-only households, youth, survivors of domestic violence, veterans, justice-involved households, or people connected to healthcare/behavioral health systems.			- Household-specific protocols/workflows - Famity/single adult/youth/DV/ veteran partner feedback - Referral/access data by household type - Examples of cross-system coordination			
Targeted	Diversion/Housing Problem-Solving	The CES Lead is responsible for providing diversion and housing problem-solving services at access points, with the goal of resolving housing crises outside the homeless services system whenever safe and appropriate.			- Diversion/problem-solving protocols - Training materials/records - HMIS or other documentation - Outcome data - Participant/provider feedback			
Targeted	CES Staffing, Training, and Internal Management	The CES Lead is responsible for recruiting, training, supervising, and supporting staff to operate CES, including annual training for staff administering assessments.			- Staffing records/organizational updates - Training records/materials - Supervision/quality assurance documentation - Capacity concerns communicated to Board/committee			
Targeted	CES Grant Administration and Fiscal Management	The CES Lead is responsible for administering CES grant funds, including application submission, budget development, match, fiscal documentation, reimbursements, drawdowns, APR submission, and documentation for monitoring.			- Grant application/APR - Budget materials - Drawdown/reimbursement records - Match documentation - Monitoring documentation			

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