



TUCSON PIMA COLLABORATION TO END HOMELESSNESS GENERAL COUNCIL MEETING MINUTES DRAFT 2/9/2023

MINUTES OF MEETING

Roll Call and Consent Agenda

Jocelyn Muzzin opened meeting and conducted roll call for voting members. Elaine MacPherson, CoC Lead staff, reminded attendees that if General Council member names are not read during roll call, this means that they do not currently have voting privileges due to either losing them since the last meeting or because they have not yet attended enough General Council meetings to gain voting privileges.

Motion: To approve the current agenda and previous minutes from November 10, 2022, General Council. Made by Phil Pierce, seconded by Brandi Champion.

Motion passes with 21 in favor, 0 opposed, and 0 abstentions.

Community Celebrations

Jocelyn M. invited attendees to share organizational or other celebrations.

CoC Lead staff and OPCS staff celebrated the recent funding announcement from the U.S. Department of Housing and Urban Development (HUD) of \$7.8 million available through the Supplemental Notice of Funding Opportunity to Address Unsheltered Homelessness. This funding adds Permanent Supportive Housing (PSH) beds to the community as well as a coordinated outreach program with multiple partners to ensure that the most vulnerable members of the unsheltered community are referred to and navigated to housing. Other attendees also shared about additional community awards, including money from the Arizona Housing Coalition that was in part due to an application from the City of Tucson Housing and Community Development Department.

New Spirit Lutheran Church member Laurie Bernard shared that the church will be conducting homeless outreach the second Saturday of each month, but that this month's outreach event will be especially engaging with Super Bowl hotdogs and hamburgers for clients. Our Family Services staff member Chalee Chavez introduced Colleen McDonald, who will be taking over her role as Chief Program Officer.

Attendees also shared positive experiences of the 2023 Everyone Counts! Point in Time Count. The event was marked as a success, with many teams connecting to folks in the area for resource sharing and survey completion.

Call to the Public

Continuum of Care (CoC) Lead Cindy McClain asked the council if members of the public, Dave Gamrath and Matt Kovaleski, could speak on behalf of the Tucson Tiny Home coalition. Dave Gamrath and Matt Kovaleski, representing the Tucson Tiny Home Coalition and Hope Factory Productions, shared that they asked to join General Council to present their joint venture into building tiny home villages as a solution to the homelessness and housing crisis. They shared a presentation, which is attached.

The operation is run across multiple sectors: commercial, small business, large corporate philanthropies, and volunteer groups such as rotary groups and church volunteers. So far, the

project has been very successful in Seattle with strong community support across those sectors, with engaging volunteer days to install the homes after they are manufactured. The group is proposing this strategy due to the small cost compared to other transitional housing solutions. The skillsets Dave G. and Matt K. bring are from their positions and experiences in engineering, coalition building, nonprofit and grant administration, and small business. The CoC Lead staff have the contact information for both Dave G. and Matt K., and in the event the council wants to collaborate, can set up a meeting to explore those opportunities.

TPCH Updates

Cindy McClain, CoC Lead, announced that the team has updated the Need Help pocket guides. They were distributed during the 2023 Everyone Counts! Point in Time (PIT) Count. Agencies can request guides by emailing TPCH@tucsonaz.gov. Attendees asked when the Point in Time (PIT) count data will be released. The CoC lead shared that preliminary results will be released at the end of February.

The CoC Lead recently concluded its administrative review of all continuum projects. Next steps related to that will occur with the regularly occurring project monitoring process.

The CoC Lead continues to have emergency blankets available for agencies serving people experiencing homelessness. Pick-up times are Mondays from 10am to 12pm, excluding holidays, and no appointments are necessary, unless a provider needs more than 100 boxes. To request more than 100 boxes, email tpch@tucsonaz.gov.

Financial Overview

Cindy McClain, CoC Lead, provided the following planning grant and General Fund balances:

Planning Grant (10/1/22-9/30/23)

- Award Amount: \$319,066
- Spent To Date: \$83,042.96
- Remaining: \$236,023.04
- Percent Expended: 26%

TPCH General Fund

- Previous Balance: \$37,865.37
- Revenue: \$150.00
- Expenses: \$1,500.00
- Current Balance: \$36,515.37

Updates to the TPCH Governance Charter

CoC Board Chairperson Jocelyn Muzzin shared that the CoC Board recently voted to make several updates to the TPCH Governance Charter. Those changes include:

- Removing voting rights for individual members of TPCH General Council;
- Establishing a Lived Experience Council to retain voting power for members with lived experience;
- Reducing lived experience requirements from 5 years to 7 years;
- The addition of person-centered language;
- Explicit acknowledgement that fees are not required for TPCH membership; and
- Adding annual renewal requirements for TPCH membership.

Attendee Zoe Cookenboo asked the group why they should vote to remove voting privileges from individual members. Cindy McClain staff spoke to the concern that in some CoCs, individual members who are not closely tied to delivering services to people experiencing homelessness, who take issue with the community response, may join and dominate the decisions with their votes, that outnumber the other member organizations. Diversity, Equity, and Inclusion Chairperson Cat Polston shared that the DEI committee had concerns around removing votes from individual members who are of lived experience but resolved that concern

by ensuring there would be a Lived Experience Council to ensure their formal governing representation. No other attendees raised concerns and the vote was taken.

Motion: Approve the attached updates to the TPCH Governance Charter. Made by Brandi Champion, seconded by Phil Pierce.

Motion passes with 21 in favor, 0 opposed, and 0 abstentions.

Updates to the TPCH Written Standards

The CoC Board Chairperson shared that there were fewer edits to the TPCH Written Standards than the governance charter, and most were around the addition of person-centered language and definitions of cultural responsiveness.

Motion: Approve the attached updates to the TPCH Written Standards. Made by Diego Coronado, seconded by Chaelee Chavez.

Motion passes with 21 in favor, 0 opposed, and 0 abstentions.

Committee and Coalition Updates

Continuum of Care Program Grant Committee

CoC Lead staff Elaine MacPherson shared that currently the CoC Program Grant committee does not have any officers, and an election needs to be held. Most members are new to the committee and are learning their roles and responsibilities and how their work can be meaningfully collaborative with the System Performance Evaluation Committee (SPE). Currently, the committee is working to improve their data literacy with the TPCH Performance Standards. Longer term goals for the committee include:

- Bringing in more than just the highest and lowest performing projects to discuss strategies and best practices;
- Collaborating with SPE Committee to build out questions to ask grantees about their performance; and
- Setting a standing collaborative meeting schedule with the SPE Committee.

The committee is also considering a proposal from the TPCH Youth Action Committee (YAC) on building out a Continuous Quality Improvement (CQI) process for youth projects, which ultimately could become expanded to the entire CoC. A formal CQI process implemented by the COCPG Committee would enable the committee to foster proactive discussion with projects before they are compelled to initiate performance improvement plans, thus improving our ability to understand project needs and address concerns before they arise and are escalated to corrective levels. This project will start as the pilot with youth projects only, and then be expanded to all projects.

Coordinated Entry Committee

Vice Chairperson Valerie Grothe shared that the Coordinated Entry (CE) Committee had two meetings in the past four months. During the October and November meetings, the committee agreed to create a housing navigator coalition at the request of Built for Zero with the purpose of increasing collaboration among housing navigators in the community, identifying housing barriers, increasing housing placement, and building property owner relationships. The Outreach Contacts List was updated and re-uploaded for community use. The Language Access resource was updated and re-uploaded to the TPCH website. Upcoming activities for the CE Committee include the start of 2 new workgroups. One will work on implementing

recommendations from C4 Innovations and the other will address coordinated entry in response to interpersonal violence. The Committee will be working on the annual review and update of CE Policies and Procedures and hopes to fill vacant positions. The committee will also review recommended changes from the Board related to Coordinated Entry systems change. The committee does not currently have the infrastructure to begin looking at interim housing options – including bed holds. The development of new prioritization tool may include some of Coordinated Entry Equity Initiative recommendations.

Diversity, Equity, and Inclusion Committee

Committee Chairperson Cat Polston shared that the committee was working on the following:

- A new standing collaborative agenda structure to get regular committee updates for cross-committee projects;
- A workgroup to create the structure of the Lived Experience Council;
- Collaboration with the Youth Action Committee on CQI; and
- Prioritization of the committee’s annual plan goals.

The annual plan is robust, and some items will be ongoing. The committee hopes to start with a deep dive into data by hearing from the System Performance Evaluation Committee (SPE) on the new Performance Equity Tracker (PET) and the YAC with collective impact outcomes once those reports are provided by the Homeless Management Information System (HMIS) Lead.

Homeless Management Information System (HMIS) Committee

Committee Chairperson Megan Sanes shared that the committee was working on the following:

- Review of User Satisfaction Survey: Common themes include that some agencies struggle to input updates to data (e.g., income and benefits) and that data between different agencies aren’t being reported consistently, leading to confusion over which data is accurate.
- Recommendation to implement HMIS Agency Admin Meetings: These will take place (monthly or every other month) to improve communication across agencies around:
 - HMIS trainings specifically related to areas of low satisfaction in the HMIS user satisfaction survey; and
 - Any TPCH policy changes that impact HMIS.

Upcoming actions for the HMIS committee include forums on Transitional Housing, planning for a new HMIS “desk guide” and approval of the Housing Inventory and Point-in-Time Count (HIC and PIT).

System Performance Evaluation Committee

Committee Chairperson Ana Lucero shared that former SPE Committee Chair, Lori Kindler, resigned in November. Ana Lucero was ratified as Chair and the Committee will be electing a new Vice Chair in February. The SPE Committee motioned to skip the 2022-2023 Gaps Analysis, and moving forward there is a plan in place to incorporate the contract for the Gap Analysis to the contract for the PIT. This allows for a timelier completion of the Gaps Analysis so that results are incorporated into the NOFO (annual Notice of Funding Opportunity). The Committee refined the Emergency Solutions Grant (ESG) Quarterly Monitoring process and conducted ESG Quarter 4 monitoring. Results and recommendations were shared with the Board on 1/24/2023. The committee also conducted the CoC Lead monitoring and shared the monitoring report with the Board and is set to complete HMIS Lead Monitoring in February. The

HMIS Lead is scheduled to provide the SPE Committee with two fiscal years of data using the PET in the coming quarter. The SPE Committee had previously developed this tracker to examine outcomes by race, ethnicity, gender, and disability status. The SPE Committee began exploring the gathering of data on voucher transfers from PSH. Brandi Champion and Anna (Christy) Lopez shared some potential data sources. The SPE Committee will continue exploring the gathering and reporting of this data in the next quarter. There is one remaining position on the SPE Committee for a person with lived experience. Anyone interested should email tpch@tucsonaz.gov. In the coming quarter, the SPE Committee will elect a Vice Chair, complete the HMIS Lead Monitoring, continue Quarterly ESG Monitoring, report out on the PET, continue gathering data sources on transfers from PSH, and developing a report-out plan.

Youth Action Committee

Darius Miles, co-chairperson of the YAC, summarized what the Youth Action Committee is working on. The committee has been reviewing the TPCH Governing documents. Since the end of the Youth Homelessness Demonstration Project (YHDP), the YAC is trying to redefine how it can best contribute to the CoC. Both Darius Miles and Keona Rose attended the CoC Board Retreat on 1/12/2023. The YAC has designated two board delegates: Darius Miles and Hannah Ross. For the next four months, the YAC will:

- Continue to review governing documents;
- Carry out any strategic plan directives that result from the TPCH Board Retreat;
- Learn the data contained in the previously approved YHDP Collective Impact measures;
- Collaborate with the DEI and SPE Committees, as well as additional workgroup members and YHDP grantees, to build out a CQI process.

Some delays to the YAC workplan have occurred. Currently, the YAC is cross referencing it's assignments from the strategic plan versus its assignments that committee members agreed to in 2022. As the YAC continues to learn the TPCH governing documents, policies, and procedures, these items will be reconsidered alongside the new priorities assigned by the COC Board.

Homeless Youth Coalition

Interim Coalition Chairperson Shannon Fowler shared that the coalition conducted a survey to assess what community collaborators were expecting out of the monthly meetings. With those ideas came a three-part series on the foster care system. The coalition continues to troubleshoot any resource needs that agencies may have and discuss what is happening for youth in our community. The coalition has resumed in person meetings and is conducting them at different agency sites every month. In the near future, the coalition will be looking to appoint a steadier chair and vice chair since there has been significant turnover in chair positions.

Built for Zero Coalition

Coalition Chairperson Jocelyn Muzzin shared that the past four months has been focused on working on a Property Owner Engagement strategy. The group put together and submitted a Case for Investment to Community Solutions with the overall purpose to develop a coordinated/centralized property owner engagement and housing navigation process and received word in January that the project was not funded.

The Board voted to institute a housing navigator coalition and we are working on setting up a regular meeting time and space. One recommendation to the board is to seek this funding elsewhere. The group will explore other funding opportunities to develop the coordinated/centralized property owner engagement and housing navigation system.

Going forward, the Built for Zero Coalition will be looking at inflow data, case conferencing participation rates, and increase participation and engagement in the coalition. There is no update on the annual workplan. We will be reviewing the annual plan in the coming meetings. General Council member Betty Bitgood asked if the Built for Zero Case for Investment application is published to the website. CoC lead staff committed to publishing this for the community to view.

Community Outreach Coalition

Coalition Chairperson Kim Noble shared that the Community Outreach Coalition held regular monthly meetings with community agencies that provide outreach and navigation every 2nd Tuesday of the month. At this meeting, there is collaboration between multiple agencies to relocate encampment residents into shelter. Those efforts included encampment outreach efforts with Homeless Protocol, shared resources and any new programs, and collaboration with the Tucson Police Department Homeless Outreach Team (HOT), Tucson Collaborative Community Care (TC3), ES (Environmental Services) and Community Safety Health and Wellness (CSHW). During this time period, the following occurred:

- Street Outreach housed 38 people into permanent housing and 18 into shelter.
- Street Outreach has served 452 clients with 4 outreach staff.
- The Housing First team started the mobile shower program and have outreach staff participating.

In the next four months, the coalition will continue to collaborate with all agencies, provide outreach to homeless encampments, and collaborate with Homeless Protocol to determine priority of encampments and assign priority tier levels (Tier 1, 2, or 3). With the Community Outreach Coalition, community leaders are working on securing funding to increase outreach efforts with medical outreach available to those willing to participate.

New Business and Announcements

Attendees were encouraged to stay for the optional training sessions after the meeting.

February 9, 2023 GENERAL COUNCIL ATTENDANCE

Quorum established with 21 of 40 voting members present. Attendance is attached.

Meeting adjourned at 2:15 pm.

Minutes prepared by Cindy McClain.

Tucson Tiny Home Coalition

Volunteer-Fueled Tiny Home Production

(Program currently in 15 states and 25 cities)

Before



Prior to tiny home village

After



Miracle Village, Tukwila, WA
Opened October 19, 2022

Dave Gamrath volunteer at www.soundfoundationsnw.org
Matt Kovaleski www.hopefactoryproduction.com

206-499-8767 davegamrath@gmail.com
310-590 9767 matthew.kovaleski@gmail.com

Homeless Crisis: Arizona



Tucson –

- Over 60% increase since 2018
- Over 2,200 people (2022 point-in-time count)

Phoenix –

- 73% increase since 2016
- Over 9,000 people (2022 point-in-time count)



What can be done to effectively reverse these trends?

Our “first, best solution to homelessness”* Hope Factory Production

Tiny home production at The Hope Factory

1



Tooling jigs; moving assembly line

2



Currently building 170 homes/year**

4



Volunteers building homes

3



** Increasing production rate to 240/year in 2023

*Quote from Seattle Mayor Bruce Harrell October 19, 2022



Volunteer-Fueled

- Over 1,000 volunteers and counting...



Betty – 80 years young





Strong Community Support

- Volunteer groups: churches, clubs, etc.



- Corporate “build days” multiple days/week (large and small businesses)
 - Highly effective team-building program; participants include:



UW Medicine



- Corporate sponsorships – donated/discounted tools and materials



Community support is key to success

Tiny Home Villages

- Small fraction of cost of other transitional housing
 - EG, incarceration, purchase of motels
- Provide community to get people back on their feet
- Social worker(s) located onsite in villages –
 - Provide extensive assistance to residents
 - Transition to permanent housing
- Median length of stay: 114 days
 - One tiny home averages 3+ residents/year
- 63% transition rate into permanent housing –
 - Six-times higher than national average
- Strong support from local public safety departments (police, fire, public health)



Currently in 15 states; can this program be adapted in Tucson? Phoenix?

15 States and 25 Cities Have Adopted This Program



DEVELOPMENT TEAM



Taek Kim

Architect, Rios Achitects, Santa Monica, CA

Taek has eighteen years of professional experience leading innovative designs of various typologies and programmatic challenges with a strong architectural vision. Taek's design approach is focused on enhancing the user experience, building works that are playful yet thoughtful. His proficiency with advanced design tools allows him to lead by example and optimize teams' design and documentation strategies that excel.



Errin Stanger

Advisor, North Little Rock AR

Errin has been active in urban planning and non-profit development over the last twenty years throughout central Arkansas. Her research and field experience studying homelessness and villages created throughout the United States brings a sharp focus of community, collaboration and methodology. Errin holds degrees in urban studies and biology and is dedicated to transforming homelessness.



Sophie Pennetier

Façade Engineer, Enclos, Los Angeles, CA

Sophie's engineering experience spans international firms including Arup, Guy Nordenson and Associates, and SHoP Construction in New York. Infinitely curious, Sophie is now working on the "build" side with national façade contractor [Enclos](#) in their Advanced Technology Studio located in Los Angeles.



Soheil Mohammadi

Principal, Engineer, Walter P Moore, CA

Soheil is a principal at Walter P Moore in LA, where he leads a team on stadium scale Façade projects of enormous complexity. His broad experience is matched by an international Education. Soheil is passionate in directing AEC to benefit the social good. His work will focus on refining the engineering definition of the Hope Home and identify parameters for design Flexibility.



Elliot Mistur

Associate Architect, SHoP Architects, NYC

Elliot is a senior associate at SHoP Architects currently working on multiple government embassy projects internationally, leading a team focused on enclosure design. His experience ranges between civic masterplanning, fully integrated affordable and market rate housing, physical prototyping, and enclosure design. While working on all aspects of project design and delivery he also co-leads an office enclosure design & research initiative.



Matt Kovaleski

BIM Manager, Hope Factory Production, WA

Matt is an industrial designer with extensive production planning experience in aerospace, Architecture and furniture industries. He carries an LFA credential from the International Living Future Institute and is focused on applying modern production process to social issues

Pro bono technical support to communities throughout the country

Full Digitization of Process Offered as Freeware

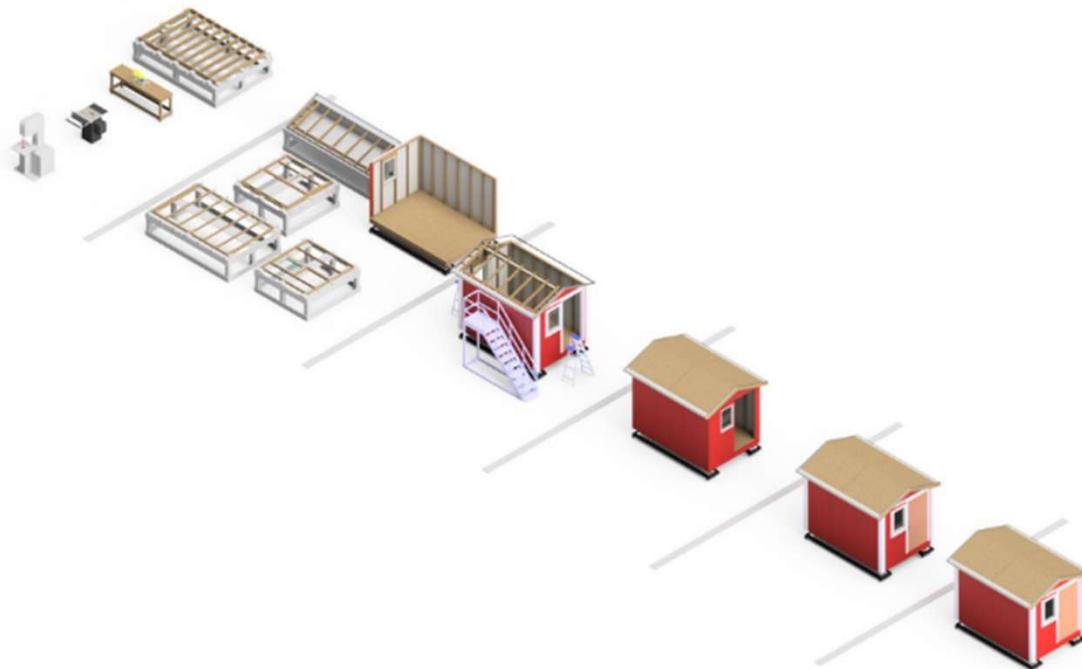


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HFP has collaborated with all parties to document every Phase of planning, production, installation and operation



Provide a full dashboard of project lifecycle tools

Nationwide Experience Brought to Tucson

- Sharing best practices to –
 - Meet community needs and requirements
 - Focus on local demographics, zoning, rules and politics
 - Assist with engaging broader community
- Integrate with other city/county projects and initiatives
- Collaborate with local agencies/organization –
 - Step by step collaboration and problem solving
 - Preparation of feasibility studies
 - Site specific proposal
 - Resource optimization
 - Facilitate communication with existing projects around the country



Work with community to enable all parties to participate and contribute

Next Steps

- Build broad Tucson Tiny Home Coalition –
 - Key agencies, organizations, people
- Explore potential projects with local leadership
 - Governmental agencies/departments
 - Private organizations
- Continuous support with problem solving
- Provide education to key constituents and community
- Support preliminary project reviews and feasibility studies
- Detailed support with kickoff project
- Continued support through expansion

Let's go from this:



To this:



Typical timeline: 12 to 18 months to implementation

Tucson Tiny Home Coalition (TTHC)

Joined TTHC

- La Frontera Center
- Idea'l Institute
- Tucson Alliance for Housing Justice
- Arizona Housing Coalition (AZHC)
- Building Out Safer Spaces (BOSS)
- Graduates from Idea'l Institute
- Splinter Collective
- Home Community Services
- Tucson Ward 3 staff
- Hope of Glory Ministries
- Lived experience individuals
- Local volunteers/activists

Upcoming Meetings

- Tucson Pima Coalition to End Homelessness (TPCH)
- Equitable Housing Commission
- Tucson Ward 1

Open Communications

- Tucson Housing and Community Development Department
- La Frontera
- Tucson Crime Free Coalition

Also assisting a tiny home village start-up in Phoenix

Back Up

Support for Tiny Home Village Residents

- Onsite case manager(s)
- Needs assessment
- Permanent housing
- Healthcare
- Documents
- Education support
- Food assistance
- Job training and placement
- Daycare
- Transportation (local and long distance)
- Reunification with families and relatives



Onsite case manager(s) critical component

Build Cost

\$345 buys a roof.

\$300 buys the insulation.

\$215 buys two windows.

\$135 buys the flooring.



\$665 buys the lumber for the frame.

\$460 buys the interior paneling.

\$185 buys the a five gallon bucket of paint.

2022 cost of a tiny home: \$4200 in materials

University of Denver Study – Village Protocol

Table 2

Priority Specifications of Tiny Home Villages Identified by Delphi Panel (n = 31)

	Rank Order	%	Characteristic
1	1	90%	clear code of conduct/community agreement/lease agreement
2	2	84%	onsite plumbing - i.e., showers, toilets, running water
3	3	81%	houses connected to electricity
4	4 (tied)	71%	clear conflict resolution process
5	4 (tied)	71%	located near public transportation/coordination with local transit authority
6	5	68%	coordination with local social service providers
7	6 (tied)	65%	clear warning/eviction policy
8	6 (tied)	65%	community spaces onsite
9	6 (tied)	65%	staff members working onsite (during set hours)
10	7 (tied)	61%	clear alcohol and drug policy
11	7 (tied)	61%	dedicated efforts to build relationships with surrounding neighborhood

University of Denver Study – Village Protocol

12	7 (tied)	61%	individuals with lived experience of homelessness involved from beginning
13	8 (tied)	58%	communal kitchen facility onsite
14	8 (tied)	58%	homes reserved for those experiencing literal homelessness
15	8 (tied)	58%	transparency about village operations
16	9 (tied)	55%	animals allowed
17	9 (tied)	55%	houses meet minimum federal, state, and municipal habitability standards - e.g., insulation, ventilation
18	9 (tied)	55%	laundry facility onsite
19	10 (tied)	52%	needs assessment to understand needs of the local unhoused community
20	10 (tied)	52%	strict guest policy
21	10 (tied)	52%	strict screening process for new residents



Tucson Pima Collaboration
To End Homelessness

**TUCSON PIMA COLLABORATION
TO END HOMELESSNESS**

GOVERNANCE CHARTER

**PROPOSED REVISIONS ~~JUNE~~ JANUARY
2023~~2~~**

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GOVERNANCE CHARTER REVIEW AND REVISION HISTORY

- Adopted June 12, 2014
- Revised November 12, 2015
- Revised January 26, 2016
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- Revised February 14, 2019
- Revised March 12, 2019
- Revised May 9, 2019
- Revised June 25, 2020
- ~~Revised January 24, 2022~~ [August 11, 2023](#) (pending)

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ARTICLE I. NAME AND PURPOSE

Section 1.01 Name

The name of the organization shall be **Tucson Pima Collaboration to End Homelessness (TPCH)**. It shall be a common-interest collaboration.

Section 1.02 Purpose

Tucson Pima Collaboration to End Homelessness is a coalition of community and faith-based organizations, government entities, businesses and individuals committed to the mission of:

- a. ending homelessness;
- b. addressing the issues that contribute to homelessness;
- ~~b.c. promoting equitable, person-centered solutions to homelessness; and~~
- ~~e.d. acting as the local Continuum of Care, as defined by the Federal Homeless Emergency Assistance and Rapid Transition to Housing Continuum of Care Program (24 CFR 578), including operating a coordinated entry system where active participation in the Coordinated Entry system is required for all TPCH members who are HUD funded.~~

The Continuum of Care (CoC) is defined as and composed of the CoC Board, General Council, all committees and their subcommittees and workgroups, the CoC Lead/Collaborative Applicant, and the HMIS Lead.

ARTICLE II. MEMBERSHIP

Section 2.01 Eligibility for Membership

Membership shall be composed of two groups: Organizational Members and Individual Members. There are no dues or fees for membership.

- a. Any organizational entity which completes an organizational membership application and commits to TPCH's Guiding Principles and Code of Conduct may become a member. Membership forms must be updated annually between July 1 and September 30.
- b. Any individual who is not directly affiliated with an organizational member who completes an individual membership application and commits to TPCH's Guiding Principles and Code of Conduct may become an individual member. For the purpose of determining eligibility, direct affiliation is defined as employees, directors, and high-level volunteers. ~~The CoC Board shall make final determination as to individual membership eligibility.~~ Membership forms must be updated annually between July 1 and September 30.

Section 2.02 Membership

Members may be elected to CoC Board and committee service, participate in General Council discussions, and participate in CoC projects and other activities. TPCH is committed ensuring diverse membership and participation within the Continuum of Care which reflects the population served by the Continuum of Care in terms of race, ethnicity, cultural affiliation, sex, gender, gender identity, disabilities, and other identities and experiences.

Section 2.03 Voting Privileges

~~Individual and organizations~~ Individual members are not eligible for voting privileges or counted toward quorum. Organizational members may vote on matters brought before the TPCCH General Council if the representative of the member organization member has attended two (2) of the immediately preceding three (3) TPCCH General Council meetings.

- a. ~~O~~Individual and organizational members with voting privileges shall have only one (1) vote in TPCCH business and elections.
- b. Members with voting privileges may make or second motions and vote on issues brought before TPCCH General Council for decision.
- c. The TPCCH General Council votes exclusively on the Governance Charter, CoC Board and committee elections, approval of the TPCCH Strategic Plan, and selection of the CoC Lead/Collaborative Applicant and the HMIS Lead. General Council may vote on other issues as needed.

Section 2.04 Notification of Voting Status

The CoC Lead Agency/Collaborative Applicant will publish a list of members gaining voting privileges, at risk of losing voting privileges, and having lost voting privileges within 15-30 days following each General Council meeting. This posting is made publicly on the TPCCH website and through the TPCCH email distribution list.

Section 2.05 Resignation and Termination

Any member may resign by sending a resignation letter via email to the CoC Board Chair and/or CoC Lead/Collaborative Applicant. A member can have their membership terminated by a two-thirds (2/3) vote of the membership as prescribed in the TPCCH Code of Conduct.

ARTICLE III. CONFLICT OF INTEREST

Section 3.01 Purpose

The purpose of the Conflict of Interest policy and procedures is to ensure that TPCCH decisions do not result in organizational, personal financial, professional, or political gain on the part of participants at the expense of the TPCCH and its stakeholders.

Section 3.02 Policy

Each member and/or member organization shall disclose their relationship to any agenda item of TPCCH meetings, Board meetings, or committee meetings requiring a vote during discussion of the agenda item. No member of the TPCCH may participate in a vote that could result in financial benefit to them personally or to the organization they represent.

Section 3.03 Definition

Conflict of Interest means an actual conflict, or the appearance of a conflict, between the private, professional, political, or financial interests of a participant or the organization that the participant represents while participating in TPCCH activities and decision-making. According to 24 CFR 578.95,

- a. *Procurement.* For the procurement of property (goods, supplies, or equipment) and services, the recipient and its subrecipients must comply with the standards of conduct and conflict-of-interest requirements under 24 CFR 200.317 and 200.318. (b).
- b. *Continuum of Care board members.* No Continuum of Care board member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.
- c. *Organizational conflict.* An organizational conflict of interest arises when, because of activities or relationships with other persons or organizations, the recipient or subrecipient is unable or potentially unable to render impartial assistance in the provision of any type or amount of assistance under this part, or when a covered person's, as in paragraph (d)(1) of this section, objectivity in performing work with respect to any activity assisted under this part is or might be otherwise impaired. Such an organizational conflict would arise when a board member of an applicant participates in decision of the applicant concerning the award of a grant, or provision of other financial benefits, to the organization that such member represents. It would also arise when an employee of a recipient or subrecipient participates in making rent reasonableness determinations under § 578.49(b)(2) and § 578.51(g) and housing quality inspections of property under § 578.75(b) that the recipient, subrecipient, or related entity owns.

Section 3.04 Procedures

- a. At the introduction of each meeting, participants will disclose their name and agency affiliations.
- b. Prior to contributing to a discussion, whether verbal or electronic, each participant will disclose their potential conflicts of interest regarding the discussion topic before commenting.
- c. If one member thinks another member has a conflict of interest, that participant will state the reason for believing so. The other person will have the opportunity to respond. Both statements will be included in the minutes.
- d. The officer presiding over the meeting may require the member to abstain at the officer's discretion.
- e. Any participant who has a conflict of interest based upon the definition here must abstain from voting.

ARTICLE IV. CODE OF CONDUCT

Section 4.01 Purpose

TPCH believes that an organization's representatives have a responsibility to demonstrate the highest standards of ethical and accountable behavior, to set the tone and to foster the same conduct in others. Each participant accepts ~~an obligation~~ responsibility to act in the best interest of TPCCH as a whole. For this reason, our conduct and ethical behavior must be ~~beyond reproach~~ exemplary and free of impropriety.

Section 4.02 Public Availability

The Code of Conduct is posted on the TPCH website for public review at www.tpch.net.

Section 4.03 Violations and Remedies

The CoC Board will address any violation of this Code on a case-by-case basis. By a majority vote, the Board may take disciplinary action to remedy a violation up to and including severance of contracted relationships and/or removal from the CoC, Board, or other TPCH bodies.

Section 4.04 Code of Conduct

All members will adhere to the principles and policies and procedures of the Continuum of Care, including but not limited to:

- a. Review, understand and comply with all TPCH governance documents, policies and procedures.
- b. Promptly disclose any current or potential conflict as outlined in the TPCH Conflict of Interest Policy and Procedures.
- c. Report behavior that crosses ethical boundaries to the TPCH Board Chair in written or electronic form.
- d. Speak up when you disagree or have a question; participate fully in discussions; once an issue has been discussed and decided, support and defend the final decision.
- e. Think broadly of the entire community. Treat all members and constituents in a fair and consistent manner when participating in TPCH discussion and decision-making. Refrain from promoting personal interests or biases.
- f. Keep confidential any privileged or sensitive information gained by TPCH participation.
- g. Look for ways to collaborate with other local organizations and government agencies.
- h. Treat colleagues respectfully. Ask questions from curiosity and for clarification. Disagreements should focus on issues, not personalities or individuals. Look for ways to draw on the expertise of all members.
- i. Come to meetings prepared to be as knowledgeable as possible about the issues.
- j. Encourage innovation and improvement while respecting history and prior accomplishments.
- k. Be a good ambassador for TPCH. Look for the opportunities to educate community members/potential stakeholders about TPCH.

ARTICLE V. MEETINGS OF MEMBERS

Section 5.01 Annual Meeting

An annual meeting of the members shall take place in the month of May. The specific date, time and location of which will be designated by the Chair. At the annual meeting the members shall elect members of the CoC Board, receive reports on the activities of TPCH, and review and affirm the direction of TPCH for the coming year.

Section 5.02 Regular Meetings

Regular meetings of the members shall be known as General Council Meetings and shall be held at least four (4) times per year including the Annual Meeting. The date, time and location of regular meetings will be designated by the Chair.

Section 5.03 Special Meetings

Special meetings may be called by the CoC Board Chair or a simple majority of the CoC Board and/or CoC members with voting privileges.

Section 5.04 Notice of Meetings

Notice of each meeting shall be emailed to each voting member not less than one week prior to the meeting.

Section 5.05 Quorum

A quorum for an announced meeting shall consist of fifty-one percent (51%) of the entire voting membership.

Section 5.06 Voting

The TPCH voting members will strive to reach consensus on issues that come before the membership. A simple majority vote is required for the passage of all motions and elections except motions to limit debate, motions to close nominations, motions to object to the consideration of a question, motions to suspend the rules, and motions to remove a member from the CoC or a CoC body. In such cases, a super majority vote of 66.7% (2/3) shall be required to pass. Roll call voting will be used in regular and scheduled General Council meetings; signed ballots may be used for sensitive vote topics at the discretion of the CoC Board Chair.

Section 5.07 Electronic Voting (E-Voting)

Should a vote be required between meetings of the TPCH General Council, the CoC Board Chair may activate an electronic voting process. Electronic votes shall be cast by 5pm local time on the second full business day after the electronic vote was activated. Electronic votes are subject to quorum and the same voting rules as votes conducted during meetings of the body.

Section 5.08 Procedural Rules

Rosenberg's Rules of Order (Rev. 2011) shall be followed as the rules of order for voting bodies of TPCH to include the General Council, CoC Board, and Committees.

ARTICLE VI. CONTINUUM OF CARE BOARD

Section 6.01 Board Role and Size

TPCH members will elect the CoC Board to approve and oversee policy and direction of TPCH. Responsibility for implementation of policies and procedures remains with the committees of TPCH and the CoC Lead/Collaborative Applicant and HMIS Lead. The Board shall have up to twenty but not fewer than fifteen (15) members. Board members do not need to have voting privileges at General Council to vote on board actions. The Board reviews and approves the annual Continuum of Care consolidated application. The Board considers recommendations regarding policies and procedures and ongoing operations of the CoC from the committees, workgroups, councils, General Council, and the CoC Lead/Collaborative Applicant and HMIS Lead.

Section 6.02 Board Composition

The CoC Board includes seven (7) seats designated by the entity represented on the Board and approved by vote of the CoC Board; three (3) seats for persons with lived experience of homelessness and housing instability.

- a. Designated- Seats
 - i. Pima County – two (2) seats
 - ii. City of Tucson – two (2) seats
 - iii. Arizona Department of Economic Security – one (1) seat
 - iv. US. Department of Veterans Affairs – one (1) seat
 - v. Youth Action Committee – one (1) seat represented by two youth members
- b. Appointed Seats
 - i. Three (3) seats for persons with lived experience of homelessness and/or housing instability. Appointed seats may not be filled by staff members of agencies already represented on the CoC Board, and shall have experienced homelessness and/or received services through a homeless assistance program within the past ~~seven~~five (7~~5~~) years.
- c. Elected Seats
 - i. General Council will elect not less than five (5) and up to ten (10) additional members to the CoC Board representing the varying interests of the CoC and as needed to fulfill the CoC's strategic plan. The CoC Board shall annually convene an ad hoc nominating committee for the purposes of reviewing the CoC Board matrix, identifying under-represented sectors, recruiting prospective members, reviewing applications, and putting forward to the TPCH General Council a slate of candidates for election. No single entity may be represented by more than two members on the CoC Board.

Section 6.03 Terms

Elected CoC Board members will serve a two-year (2) term. Elected Board members are eligible to serve up to two (2) consecutive appointed by the CoC Board; and up to 10 seats elected by the TPCH General Council. One half of the elected Board members will be elected each year. After completing two (2) consecutive elected terms, an individual/organizational member must wait one (1) year before serving another elected term on the Board.

Section 6.04 Meetings and Notice

The CoC Board will meet at least monthly, at an agreed upon time and place, and an official Board meeting schedule will be posted on the TPCCH website. Each Board member will be sent an agenda and any supporting materials by email at least one week in advance of the monthly meeting as a meeting reminder.

Section 6.05 Board Elections

CoC Board members will be elected or re-elected by the TPCCH voting membership present at the annual meeting. In the event of a contested seat, the highest vote-getter(s) shall be elected. In the event of a tie vote for one or more available seats, the CoC Board Officers shall select the from the tie-getting candidates with a particular focus on promoting diversity in terms of expertise, experience, race, ethnicity, cultural affiliation, gender, sex, gender identity, sexual orientation, disability, and other relevant factors.

Section 6.06 Election Procedures

Any person residing or working in Pima County may apply to join the TPCCH Board by submitting an application to the Collaborative Applicant by March 31 each year. The CoC Board will annually convene a nominating committee for the purpose of reviewing applications and recommending a slate of qualified candidates with brief biographical summaries for review and election by the General Council during the Annual Meeting.

Section 6.07 Quorum

Over fifty percent (50%) of Board members constitutes a quorum of the Board for the transaction of business.

Section 6.08 Officers and Duties

There will be three officers of the CoC Board: Chair, Vice-Chair, and Treasurer. The officers shall be elected from the CoC Board Membership at the first meeting of the new CoC Board for one-year terms. Staff will promptly announce election results by email. Officers are eligible to serve up to two consecutive terms within their term limits. After completing two (2) consecutive terms, an officer must wait one (1) year before serving another elected term as an officer of the CoC Board except in the case of the Vice-Chair who is eligible to serve up to one additional consecutive term in the role of Chair regardless of that officer's Board term limit. An individual waiting a year from an officer position may, if elected and otherwise eligible, chair a committee during the interim year. Outgoing CoC Board chairs may remain on the CoC Board for up to one year as a non-voting emeritus member regardless of term limit.

The duties of the Board officers are described in the TPCCH Operating Policies and incorporated herein by reference.

Section 6.09 Electronic Voting (E-Voting)

Should a vote be required between meetings of the TPCCH General Council, the CoC Board Chair may activate an electronic voting process. Electronic votes shall be cast by 5pm local time on the second full business day after the electronic vote was activated. Electronic votes are subject to quorum and the same voting rules as votes conducted during meetings of the body.

Section 6.10 Vacancies

The CoC Lead/Collaborative Applicant will notify the TPCCH membership of mid-year Board vacancies.

- a. When a vacancy exists, any TPCCH member may apply or nominate a replacement by submitting an online nomination no less than two weeks (14 days) in advance of the next scheduled Board meeting.

- b. The CoC Lead/Collaborative Applicant will send these nominations by email to Board members with the regular Board meeting announcement.
- c. The Board will vote as to whether to invite an application from the prospective candidate.
- d. If the application is solicited and approved, an election will occur at the next scheduled Board meeting. These vacancies will be filled only to the end of the vacating Board member's term.
- e. After completing that partial term, the newly elected Board member will be eligible to serve up to two consecutive terms of two (2) years each.
- f. Upon learning of changes to a Board Member's or their organization's role, the Board member must immediately notify the CoC Board Chair and/or CoC Lead Agency/Collaborative Applicant of such changes. The Board will review the change and determine what disposition is in the best interest of the TPCH.

Section 6.11 Resignation, Termination, and Absences

Resignation from the Board must be in writing or email and received by the TPCH Board Chair and Collaborative Applicant. A Board member may be terminated from the Board due to more than three consecutive absences from Board meetings. A Board member may be removed for other reasons by a sixty-six percent (66%) vote of the remaining directors as prescribed in a the TPCH Code of Conduct.

Section 6.12 Special Meetings

Any Board member can request a special meeting. They can make the request at a Board meeting, which would then be voted upon and require simple majority approval by the CoC Board. Any Board member can request a special meeting outside a Board meeting by emailing the Board Chair and/or CoC Lead/Collaborative Applicant. An e-vote will be established by the CoC Lead/Collaborative Applicant within two (2) business days of the receiving the request. Simple majority approval by the Board is needed for the request to pass.

ARTICLE VII.

COMMITTEES

Section 7.01 Committee Formation

The Board may create committees and workgroups as needed, in order to assist the Board and the TPCH in carrying out TPCH's Strategic Plan goals and CoC policies. Committees may establish subcommittees or workgroups to assist in carrying out the work of the committee subject to Board approval. Once formed, all subcommittees and workgroups remain responsible to their parent committee. All committees, subcommittees and workgroups are responsible to the Board.

Section 7.02 Standing Committees

There are ~~seven~~ (76) Standing Committees of the Board: System Performance and Evaluation Committee; HMIS Committee; Continuum of Care Program Grant Committee; Coordinated Entry Committee; Youth Action Committee; ~~and~~ Diversity, Equity, and Inclusion Committee; and Lived Expertise Council.

Section 7.03 Committee Membership

Committee membership shall be limited to the number of seats and key sectors determined annually by the CoC Board documented in the TPCB Operating Policies and incorporated herein by reference. No individual may serve on more than two (2) standing committees at any time.

Section 7.04 Committee Member Selection

Fifty (50) percent of CoC Committee seats shall be elected by the General Council. In the event of a contested seat, the highest vote-getter shall be elected to the seat. The remaining seats shall be appointed by the CoC Board at its next regular meeting ~~to ensure diversity of representation~~. The CoC Board is responsible for ensuring that such appointments result in committee membership which reflects the diversity of the population served by the Continuum of Care in terms of race, ethnicity, cultural affiliation, sex, gender, gender identity, sexual orientation, disabilities, and other relevant identities and experiences.

Section 7.05 Election Procedures

The CoC Lead/Collaborative Applicant shall issue a public call for committee member applications annually. Applications will be brought forward with brief biographical summaries to the General Council for election. Committee elections shall be conducted during the General Council Annual Meeting. In the event of a tie vote for one or more available seats, the CoC Board Officers shall select the from the tie-getting candidates with a particular focus on promoting diversity in terms of expertise, experience, race, ethnicity, cultural affiliation, gender, sex, gender identity, sexual orientation, disability, and other relevant factors.

Section 7.06 Meetings and Notice

CoC committees will meet at regular intervals as defined by the committee. An official committee meeting schedule will be posted on the TPCB website. Each committee member will be sent an agenda and any supporting materials by email at least one week in advance of the meeting as a meeting reminder.

Section 7.07 Quorum

Over fifty percent (50%) of committee members constitutes a quorum of the committee for the transaction of business.

Section 7.08 Persons with Lived Experience of Homelessness and/or Housing Instability

Each committee shall have not less than two (2) seats reserved for persons with lived experience of homelessness and/or housing instability. Members serving under this designation shall be appointed by the CoC Board.

Section 7.09 Vacancies

The CoC Lead/Collaborative Applicant will notify the TPCB membership of mid-year committee vacancies.

- a. When a vacancy exists, any TPCB member may apply or nominate a replacement by submitting an online nomination no less than two weeks (14 days) in advance of the next scheduled Board meeting.

- b. The CoC Lead/Collaborative Applicant will send these nominations by email to Board members with the regular Board meeting announcement and will include a summary of the committee's current gaps in diversity in terms of race, ethnicity, cultural affiliation sexual orientation, sex, gender, gender identity, disabilities, lived expertise, and other relevant factors. The CoC Board shall strive to fill vacancies with qualified individuals who enrich the diversity of the committee.
- c. The CoC Board will vote as to whether to invite an application from the prospective candidate.
- d. If the application is solicited and approved, an election will occur at the next scheduled Board meeting. These vacancies will be filled only to the end of the vacating committee member's term.
- e. After completing that partial term, the newly elected committee member will be eligible to serve up to two consecutive terms of three years each.
- f. Upon learning of changes to a committee members's or their organization's role, the committee member must immediately notify the TPCB Board Chair and/or CoC Lead Agency/Collaborative Applicant of such changes. The committee will review the change and make a recommendation to the CoC Board as to what disposition is in the best interest of the TPCB.

Section 7.10 Resignation, Termination, and Absences

Resignation from CoC committees must be in writing or email and received by the committee chair and/or CoC Lead/Collaborative Applicant. A committee member may be terminated from the committee after three consecutive absences at committee meetings. A committee member may be removed for other reasons by a sixty-six percent (66%) vote of the remaining committee members as prescribed in a the TPCB Code of Conduct.

Section 7.11 Committee Chairs and Vice Chairs

Committee vice-chairs shall be elected for one-year (1) terms in April. Terms shall begin in July and end in June.

- a. Current committee vice-chairs will transition to the committee chair role upon the vice-chair's consent and a vote of ratification by the committee.
- b. In the event that a vice-chair declines the chair position or is not ratified by the committee, the committee shall elect from its current membership a new chair.
- c. Election results will be announced to the General Council Annual Meeting.
- d. An individual waiting a year from one committee chair position may, if elected or appointed, chair a different committee during the interim year.

Committee Chairs or Vice Chairs are expected to ~~attend-present written and oral reports of the committee's work to the all~~ CoC Board meetings on a quarterly basis and to attend all CoC Board meetings at which a recommendation or motion from the committee is presented~~provide written and oral monthly reports of the committee's work to the CoC Board.~~ Committee reports shall include recommendations from the committee including supporting and dissenting opinions.

Committee Chairs and Vice Chairs or a designated proxy are expected to attend a Committee Chair meeting which will be convened by the CoC Board Chair and held no less than quarterly. This meeting will coordinate efforts of each committee, increase collaboration among the committee members, and prepare for presentations to the Board.

Section 7.12 Committee Voting

Committee voting shall be limited to elected/appointed committee members and shall be conducted in accordance with Rosenberg's Rules of Order.

Section 7.13 Committee Terms

Committee members serve two-year (2) terms. Committee members may serve two consecutive terms after which the member may not serve on the committee for a period of at least one year. The member may be elected or appointed to another committee during the interim year. The only exception to this rule is Vice-Chairs who may complete up to one additional year in the Chair role regardless of term limit.

Section 7.14 Community Participation

All committee meetings shall be publicly posted and any interested person may attend a committee meeting. All committee meetings shall include a call to the public in which such persons may provide input to any item on the agenda and/or request that the committee address an issue or take action in furtherance of TPCCH objectives. Individuals deemed disruptive by vote of the committee shall be required to leave the meeting. Failure to do so may result in loss of TPCCH voting privileges, membership, and/or prohibition against committee attendance at the discretion of the CoC Board.

Section 7.15 System Performance and Evaluation Committee (SPEC)

: The System Performance and Evaluation Committee (SPEC) shall be responsible for:

- a. Compiling and reviewing data to improve the performance of the entire Continuum of Care.
- b. Analyzing and sharing system performance data with the CoC Board and membership.
- c. Overseeing the process of conducting an gaps analysis annually; reviewing and sharing data from the gaps analysis with the CoC Board and membership.
- d. Working to enhance and expand community-wide services based on identified gaps and community need.
- e. Recommending to the CoC board proven strategies for prioritizing the use of Emergency Solutions Grant (ESG) funds; acting as the liaison between and among City, County, and State ESG funding sources.
- f. Evaluate the performance of the CoC Lead/Collaborative Applicant and HMIS Lead at least annually, and report evaluation findings to the CoC Board.

Section 7.16 Homeless Management Information System Committee (HMIS)

The Homeless Management Information System (HMIS) Committee shall be responsible for:

- a. Reviewing and providing guidance to the CoC Board regarding TPCCH's HMIS capabilities, software selection, and planning recommendations.
- b. Reviewing HMIS data quality to include data completeness and data accuracy and reporting this data to the CoC Board, membership, and HMIS participating agencies.

- c. Reviewing, updating, and overseeing policies and procedures concerning HMIS data and its use.
- d. Reviewing and recommending for approval the Point in Time Count, Housing Inventory Count, Annual Performance Report, Longitudinal System Analysis, System Performance Report, and other HUD data submissions to the CoC Board.
- e. Reviewing and providing recommendations to the CoC Board regarding HMIS data-sharing agreements, data partnerships, and external data requests.
- e.f. Ensuring that the HMIS and HMIS Lead have the capacity to produce regular programmatic and system-level reports disaggregated by race, ethnicity, age, and sexual orientation, and gender identity.
- e.g. Conducting on-going evaluation of HMIS system and gathering user feedback to improve the HMIS experience.

Section 7.17 Continuum of Care Program Grant Committee (CoC Program)

The Continuum of Care (CoC) Program Grant Committee shall be comprised of not more than 49% CoC Program grant recipients and/or subrecipients. The committee shall be responsible for:

- a. Monitoring CoC recipient and subrecipient performance; recommending performance improvement plans to the CoC Board.
- b. Recommending priorities and community strategies related to the use of CoC Program funds to the CoC Board.
- c. Developing and recommending performance improvement targets for CoC projects consistent with the CoC's adopted system performance improvement strategies.
- d. Reviewing, updating, and overseeing the implementation of the CoC's approved reallocation policies.

Section 7.18 Coordinated Entry Committee (CE)

The Coordinated Entry (CE) Committee shall be responsible for:

- a. Recommending policies and procedures to improve and expedite the CE process to the CoC Board.
- b. Engaging in on-going planning and evaluation of the CE system at least annually.
- c. Expanding housing and service linkages including but not limited to education and employment services within the CE system.
- d. Expanding and improving coordination among outreach, shelter, diversion, and homelessness prevention and eviction prevention resources within the CE system.
- e. Monitoring participation and utilization of the CE system among CoC and ESG projects; reporting participation and utilization information to the CoC Board.

Section 7.19 Youth Action Committee (YAC)

The Youth Action Committee (YAC) is comprised of youth and young adults under the age of 25 who possess lived experience of homelessness and/or housing instability. The YAC is responsible for:

- a. Providing guidance and policy recommendations on the implementation, administration and oversight of services impacting youth who are experiencing homelessness or at risk of homelessness.
- b. Guiding ongoing planning of homeless youth services and oversee the Tucson/Pima County Coordinated Community Plan to Prevent and End Youth Homelessness.
- c. Providing a youth voice in decision making within the CoC.
- d. Developing and overseeing implementation of strategies to serve youth experiencing homelessness more effectively throughout the CoC.
- e. Assist in the development and design of applications for funding for youth homelessness projects.
- f. Integrating youth input throughout the CoC and coordinating youth focused activities with other committees, work groups, the HMIS Lead, and the CoC Lead/Collaborative Applicant.

Section 7.20 Diversity, Equity, and Inclusion Committee (DEI)

The Diversity, Equity, and Inclusion (DEI) Committee shall be responsible for:

- a. Collaborating with CoC Board, ~~and Lead Entities,~~ and community stakeholders to plan and coordinate equity initiatives within TPCB and in cross-sector partnership with other aligned systems with particular focus on issues of racial equity, LGBTQIA+ inclusivity, and citizenship.
- b. Reviewing existing and proposed TPCB policies and practices; recommending strategies to increase representation from diverse stakeholders and prevent structural of systemic inequities prior to new policy adoption.
- c. Collecting and analyzing quantitative data regarding equity and inclusivity within the local homelessness response system.
- d. Issuing recommendations to improve equitable outcomes for all populations served through the local homelessness response system to the CoC Board.
- e. Collaborating with CoC Lead/Collaborative Applicant and HMIS Lead to issue periodic reports, at least annually, on efforts to address equity and inclusivity within the homelessness response system and the outcomes of those efforts.

Section 7.21 Lived Expertise Council

The Lived Expertise Council is a standing TPCB committee comprised of persons with lived experience and expertise of homelessness within the past seven years. The Lived Experience Council is responsible for:

- a. Providing guidance and policy recommendations on the implementation, administration and oversight of services impacting individuals and families who are experiencing homelessness or at risk of homelessness.

- b. Guiding ongoing planning of homeless services and the creation and implementation of the TPCCH Strategic Plan/Community Plan to Prevent and End Homelessness.
- a.c. Ensuring that the voices of persons with lived experience and expertise are centered within decision making within the CoC.
- b.d. Addressing and dismantling stereotypes, prejudices, and disparities by recruiting individuals with lived experience to represent the voice of marginalized and intersecting groups within the Continuum of Care. Recruitment of lived experience individuals would include, but not be limited to, Black, Indigenous, People of Color, LGBTQIA+ individuals, and people living with disabilities.
- e.e. Developing and overseeing implementation of strategies to address homelessness more effectively throughout the CoC.
- d.f. Integrating lived experience and expertise input throughout the CoC and coordinating participant-centered activities with other committees, work groups, the HMIS Lead, and the CoC Lead/Collaborative Applicant.
- e.g. Assisting in the development and design of funding strategies and applications related to homelessness

~~Addressing & dismantling stereotypes, prejudices and disparities by recruiting individuals with lived experience to represent the voices of marginalized and intersecting groups in the continuum of care including but not limited to Black, Indigenous, people of color, LGBTQ+ individuals, and individuals living and experiencing disabilities.~~

~~Section 7.21~~ Section 7.22 *Committees Comprised Primarily of People with Lived Experience of Homelessness*

Committees comprised primarily of people with lived experience of homelessness and/or housing instability may utilize alternate membership, participation, and governance structures with approval of the CoC Board.

ARTICLE VIII. SUBCOMMITTEES, WORKGROUPS, AND COALITIONS

Section 8.01 Formation

The CoC Board and Committees may establish subcommittees, workgroups, and coalitions as needed to carry out the work of TPCCH and advance the CoC’s Strategic Plan. All subcommittees and coalitions are subject to the approval of the CoC Board.

Section 8.02 Subcommittees

Subcommittees are on-going bodies intended to carry out a specific duty or duties assigned to the committee. Subcommittees are not formal voting bodies and achieve consensus to bring forward one or multiple proposals to their parent committee for vote.

- a. Subcommittee composition shall be appointed by the committee and may include persons who are not members of the committee.
- b. Subcommittee participation is strictly voluntary.
- c. Subcommittees shall be limited in size to achieve the efficient accomplishment of the assigned duty or duties.
- d. Subcommittees shall establish working norms and are not subject to the Rosenberg's Rules of Order.
- e. The parent committee shall appoint a committee member to lead the subcommittee's work.
- f. The subcommittee leader will be responsible for taking attendance, documenting meeting notes, and submitting to the parent committee and CoC Lead/Collaborative Applicant for recordkeeping. Subcommittee notes shall be posted on the TPCCH website for public inspection.

Section 8.03 Workgroups

Workgroups are time limited bodies intended to conduct research and/or propose plans related to one or more duties of the CoC Board or committee.

- a. Workgroup composition shall be appointed by the voting body establishing the workgroup and may include persons who are not members of the Board or committee.
- b. Workgroup participation is strictly voluntary.
- c. Workgroups should be limited in size to achieve efficient accomplishment of the assigned duty or duties.
- d. The CoC Board or committee establishing the workgroup shall select a Board or committee member to lead the workgroup.
- e. The workgroup leader will be responsible for taking attendance, documenting meeting notes, and submitting to the parent committee or CoC Board, and the CoC Lead/Collaborative for recordkeeping. Workgroup notes shall be posted on the TPCCH website for public inspection.

Section 8.04 Coalitions

Coalitions are TPCCH affinity groups established around specific populations, service types, and/or other relevant topics.

- a. Coalitions are open to all interested persons and intended to improve coordination, collaboration, and resource-sharing throughout the CoC.
- b. Coalitions shall establish working norms and are not subject to the Rosenberg's Rules of Order.
- c. Coalition participation is strictly voluntary.
- d. Coalitions shall self-select an individual or individuals to lead the coalition.
- e. Coalitions may request time on the agenda of any CoC Committee, the CoC Board, and the TPCCH General Council for discussion and vote.

- f. The CoC Lead/Collaborative Applicant shall be responsible for staffing coalition meetings, taking attendance, and documenting meeting notes for recordkeeping.

ARTICLE IX. POLICIES

Section 9.01 Purpose

TPCH Policies guide the administrative operations of the Continuum of Care. These include:

- a. TPCH Operating Policies
- b. TPCH Written Standards
- c. TPCH HMIS Policies and Procedures
- d. TPCH Coordinated Entry Policies and Procedures
- e. TPCH Service Standards for Domestic Violence Projects
- f. TPCH Performance Evaluation and Monitoring Procedures
- d.g. TPCH CoC Project Reallocation Policy

Section 9.02 Policy Authority

TPCH Policies may be approved, amended, or rescinded by the CoC Board. They are incorporated into the Governance Charter by reference. In the event that an approved TPCH Policy is inconsistent with the Governance Charter as approved by the General Council, the Governance Charter shall prevail.

ARTICLE X. ROLES OF COC LEAD/COLLABORATIVE APPLICANT AND HMIS LEAD AGENCIES

Section 10.01 CoC Lead/Collaborative Applicant/Fiscal Agent

The TPCH CoC Lead/Collaborative Applicant is the legal entity that has been designated by the Continuum of Care (TPCH) in accordance with the Federal Homeless Emergency Assistance and Rapid Transition to Housing Continuum of Care Program (24 CFR 578) to fulfill the responsibilities defined below and any additional duties defined in the Memorandum of Understanding mutually agreed and signed by the TPCH Board Chair and CoC Lead/Collaborative Applicant. The General Council approves the CoC Lead/Collaborative Applicant for a time period of at least five (5) years.

The CoC Lead/Collaborative Applicant works cooperatively with the CoC to follow all U.S. Department of Housing and Urban Development (HUD) regulations. The CoC Lead/Collaborative Applicant will consult on the annual updates made to the Governance Charter.

a. HUD Responsibilities of the CoC Lead/Collaborative Applicant

- i. Collects and submits the CoC Registration, Consolidated Application (which includes the CoC Application and CoC Priority Listing).
- ii. Applies for CoC planning funds on behalf of the CoC during the CoC Program Competition.
- iii. Participates in the continuous development of the Governance Charter with the CoC.
- iv. Acts on behalf of the CoC when applying for HUD grants and is the point of contact with HUD representatives.

b. TPCCH Additional Responsibilities of the CoC Lead/Collaborative Applicant

- i. Assumes leadership role in the development of the CoC Consolidated Application, aligning with the Notice of Funding Availability.
- ii. Posts and maintains formal records of all TPCCH documents, meeting agendas and minutes, and records all decisions, including membership records for maintenance of voting privileges.
- iii. Consults with CoC Board on the development of the annual CoC Planning Grant budget
- iv. Applies for additional funding as directed by the TPCCH.
- v. Fulfills fiscal responsibilities for CoC planning and related funds in accordance with HUD requirements (OMB 2 CFR 200), as well as non-federal funds, that include, but are not limited to: ensuring match requirement is fulfilled, maintain all financial records of related expenses for HUD-required and TPCCH activities, provide at least quarterly financial reports to the CoC Board and General Council, conduct all TPCCH Request for Proposal and purchasing processes, execute and oversee fulfillment of contracts as directed by the CoC.
- vi. Employs staff to perform CoC functions and maintains internal leadership to ensure all responsibilities of the Collaborative Applicant are continuously fulfilled.
- vii. Collaborates with the HMIS Lead to plan and implement the annual point in time count of persons experiencing sheltered and unsheltered homelessness.
- viii. Implements CoC policies and processes as approved and directed by the CoC Board.
- ix. Develops and distributes CoC publications.
- x. Informs community of TPCCH's work to prevent and end homelessness.
- xi. Maintains accurate CoC membership rosters.

- xii. Reviews and reports ongoing progress toward the TPCH strategic plan to the CoC Board and membership.

Section 10.02 HMIS Lead

The HMIS Lead is a legal entity that has been designated by the Continuum of Care (TPCH) in accordance with the Federal Homeless Emergency Assistance and Rapid Transition to Housing Continuum of Care Program (24 CFR 578) to operate the Continuum's Homeless Management Information System (HMIS) on its behalf. The General Council approves the HMIS Lead for a time period of at least five (5) years.

The HMIS Lead Agency works cooperatively with the CoC to follow all U.S. Department of Housing and Urban Development (HUD) regulations, and the HMIS Protocol. The HMIS lead will consult on the annual updates made to the Governance Charter. The HMIS Lead is responsible for the duties described below and any additional duties defined in the TPCH HMIS Lead Protocol mutually agreed and signed by the TPCH Board Chair and HMIS Lead.

a. Responsibilities of the HMIS Lead

- i. Develops and submits reports as required by the CoC Board and HUD including but not limited to the annual sheltered and unsheltered Point in Time Count, Housing Inventory Count, Longitudinal System Analysis, and System Performance Reports.
- ii. Collaborates with CoC Lead/Collaborative Applicant for the purposes of process improvement and submissions to HUD.
- iii. Partners with CoC committees to provide data needed for CoC Program, ESG Program, and system performance evaluation and improvement.
- iv. Conducts and implements all activities prescribed in the CoC Strategic Plan and/or directed by the CoC Board.
- v. Makes recommendations to the CoC Program Grant Committee regarding process and performance improvement at the project and system levels.
- vi. Works with HMIS participating agencies to help identify improvement opportunities and make recommendations for overall system improvement for the HMIS Lead and HMIS participating agencies as needed.
- vii. Assists CoC Board and committees to manage and interpret community data.
- viii. Shares data with HMIS participating agencies and outside entities in accordance with CoC policies and procedures.
- ix. Consult with the CoC Board to develop and implement an annual workplan addressing community needs and priorities.
- x. Develop and implement process for communication with HMIS users for the purposes of sharing information.
- xi. Collaborate with the CoC Lead/Collaborative Applicant to plan and implement the point in time count.

ARTICLE XI. AMENDMENTS

This Governance Charter may be amended at any General Council by a simple majority vote. Proposed amendments may be brought for discussion to any CoC Board Meeting throughout the year or submitted to the CoC Lead/Collaborative Applicant sixty (60) days in advance of the Annual Meeting.

The ~~Board of Directors~~CoC Board may approve formatting, grammar, or usage changes which do not fundamentally alter the Governance Charter to improve clarity or readability by a simple majority vote at any regular meeting. All revisions shall be published for inspection through the TPCCH listserv.

DRAFT

**TUCSON PIMA COLLABORATION TO END HOMELESSNESS
COC PROGRAM WRITTEN STANDARDS**

**Adopted April 28, 2015, Amended Jan. 26, 2016, June 28, 2016 and May 11, 2017; Dec. 18, 2018; Feb. 26, 2019;
June 26, 2019, DRAFT REVISIONS – 8/9/21**

Introduction & Purpose
Key Terms
General Policies
Performance Standards
Prioritization for HUD-VASH Housing
Permanent Supportive Housing
Rapid Rehousing
Transitional Housing
Evaluating and Documenting Eligibility (Categories of Homelessness & Required Types of Verification)
Appendices

INTRODUCTION & PURPOSE

Tucson Pima Collaboration to End Homelessness (TPCH) has established written standards that encompass local community needs and follow guidelines set forth by the Department Housing and Urban Development (HUD) and comply with requirements established by law and HUD Notice. These written standards are developed to ensure people within this community who are experiencing homelessness are prioritized and provided with the most appropriate housing and services to meet their needs.

These written standards are reviewed and adjusted at least annually. Changes to priorities may supersede this notice if voted on by the TPCH Board of Directors (for example; a surge in prioritizing veterans). Further requirements are detailed in TPCH Policy and Procedure documents.

These written standards are developed in coordination with recipients of Emergency Solutions Grants program funds to achieve the following:

- Create and maintain a centralized or coordinated entry system that provides an initial, comprehensive assessment of the needs of families and individuals for housing and services
- Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part.
- Policies and procedures for determining and prioritizing which eligible families and individuals will receive transitional housing assistance.
- Policies and procedures for determining and prioritizing which eligible families and individuals will receive rapid rehousing assistance.
- Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance.
- Policies and procedures for determining and prioritizing which eligible families and individuals will receive permanent supportive housing assistance.
- Promoting person-centered and culturally responsive approaches to preventing and ending homelessness in Tucson and throughout Pima County.

KEY TERMS

Beds

A bed is each assigned spot in a housing program for a person; not literally a bed. If there are three people in a household, regardless of their sleeping arrangements, the household has three beds.

Client Person-Centered

~~Client-centered~~ (or ~~pp~~ person-centered) services are designed and delivered based on the specific needs and wants of each family or individual as they perceive those needs and wants rather than as required or delivered by the service provider based on a schedule, program participation, or the providers' perception. A ~~person~~ client-centered service delivery process involves mutual discussion and decision-making on what steps are needed for client stability and when and how to take those steps. For example, ~~person~~ client-centered service could include, but not be limited to, determining a family's preferences and helping them find housing that is not just to their needs and liking, but also near a particular school.

Cultural Responsiveness

Cultural responsiveness refers to services that are respectful of, relevant to, honor, and uplift the beliefs, practices, culture, and linguistic needs of diverse populations and communities. That is, communities whose members identify as having particular cultural or linguistic affiliations by virtue of their place of birth, ancestry or ethnic origin, religion, preferred language or language spoken at home. Cultural responsiveness describes the capacity to respond to the issues of diverse communities and requires knowledge and capacity at different levels of intervention: systemic, organizational, professional, and individual. Research suggests that providing culturally responsive care has the potential to lead to improved:

- Access and equity for all groups in the population.
- Utilization of available housing and service assistance among disparately impacted communities.
- Communication and understanding of meanings between participants and providers resulting in:
 - Increased participation in beneficial services.
 - Clearer expectations.
 - Reduced programmatic and adverse events.
 - Improved participant satisfaction.
 - Long-term outcomes.
 - Safety and quality assurance
 - Business practice and better use of resources

Cultural responsiveness thus may be viewed as a viable strategy to improve the links between access, equity, quality and safety; improve housing and stability outcomes among culturally and linguistically diverse populations; and as a strategy to enhance the cost effectiveness of service delivery.

Chronically Homeless

An individual or family is chronically homeless when the person or head of household (adult or minor) meets all three criteria established as the final rule for 24 CRF Parts 91 and 578 as amended December 4, 2015. The three criteria are that the person/family:

- Has a qualifying disability (a diagnosable substance use disorder, serious mental illness, developmental disability,

post-traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability)

- Is literally homeless (at the time of eligibility assessment for a specific project opening)
- Has at least 12 months of homelessness from one of the below avenues:
 - The current episode of homeless has lasted at least the past 365 nights, including the night before assessment, without breaks in homelessness.
 - Having four episodes, or more, of homelessness within the past three years up to and including the date of assessment. These episodes, when added together, total 365 nights or more of literal homelessness. Also, each break in homelessness must have lasted at least seven (7) consecutive nights.
 - Both the cumulative nights and four or greater episodes criteria must be met. Fewer than four episodes in three years – even if homeless nights add up to 12 or more months – will not qualify the person/family as chronically homeless. Greater than four episodes in three years will not suffice if the total nights homeless are under 365.

Equal Access:

This community provides equal access to all programs and activities, regardless of (actual or perceived) sexual orientation, gender identity, marital status, race, color, national origin, religion, sex, familial status, disability, or any other protected class as identified by Federal or Local law.

This community houses people based on ~~the gender they identify as, without requesting documentation to validate their report~~ the person's self-identified gender and expressly prohibits organizations from questioning, requiring documentation of, or otherwise interrogating any individual's self-reported gender. This community recognizes the HUD Final Rule and all amendments published 2/3/2012, 9/21/16 and the Notice on Equal Access Regardless of Sexual Orientation, Gender Identity, or Marital Status for HUD's CPD Programs.

Gender Identity

This is defined as a person's concept of oneself as male, female, both or neither. Gender identity may or may not align with the "sex" or "gender" described on an individual's birth certificate or other identity documents.

Homeless

HUD classifies homelessness into categories, or levels, of homelessness. These include literally homeless, imminent risk of homelessness and chronically homeless and are detailed in the Evaluating and Documenting Eligibility (Categories of Homelessness & Required Types of Verification) section of this document.

Unsheltered: People are considered homeless, and unsheltered, when they are living in places not meant for human habitation.

Sheltered: People are considered homeless, yet sheltered, when they are staying in places meant for human habitation, emergency shelters, transitional housing, or facing imminent homelessness.

Housing First

Housing First is an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements. Rapid placement and stabilization in permanent housing are primary goals. Service participation is not required for continued tenancy. Projects that use a Housing First approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services, yet offer assertive engagement in support and treatment options to the participants who are housed.

LGBTQIA+

This is an acronym for “lesbian, gay, bisexual, transgender or transsexual, questioning or queer, intersex, asexual, and other sexual orientations and gender identities.” It is intended to emphasize a honor and validate the diversity of sexualities and gender identities, including identities that do not fall within the binary of “male” and “female,” and may be used to refer to anyone who self-identifies as non-heterosexual. of people who do not identify as cisgender and/or heterosexual.

Permanent Supportive Housing (PSH)

Permanent Supportive Housing is rental assistance with supportive services without a designated length of stay to assist homeless persons with a disability to live independently and achieve housing stability.

Rapid Rehousing (RRH)

Rapid Rehousing Assistance is client-centered housing relocation and stabilization services with short and/or long-term rental assistance. RRH helps an individual or family move as quickly as possible into permanent housing and achieve stability in that housing.

Safe Haven

A Safe Haven is a temporary supportive housing program that serves hard-to-reach literally homeless persons with severe mental illness who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services. These facilities allow 24-hour residence for an unspecified duration, have private or semi-private accommodations, and provide access to needed, but not required, services in a low demand facility.

Severity of Service Needs

TPCH classifies service needs into four categories; Severe, High, Moderate and Low. Families and Individuals are classified via the SPDAT score indicates which level of service needs the individual or family will be classified as.

	VI SPDAT			Full SPDAT	
	Individuals	Youth	Families	Individuals/Youth	Families
Severe Service Needs	12-17	12-17	12-22	45-60	66-80
High Service Needs	8-11	8-11	9-11	35-44	54-65
Moderate Service Needs	4-7	4-7	4-8	20-34	27-53
Low Service Needs	0-3	0-3	0-3	0-19	0-26

An individual or family is considered to have a high severity of services needs when at least one of the following is true:

- i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; or
- ii. Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing.
- iii. For youth and victims of domestic violence, there is a high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.
- iv. When applicable CoC Program-funded PSH may use alternate criteria used by state Medicaid departments to identify high-need, high-cost beneficiaries.

The determination is not to be based on a specific diagnosis or disability type. The determination will not be based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements. (See 24 CRF § 5.105 (a).)

Families and individuals with low service needs will not be served in CoC-funded projects.

SPDAT (Service Prioritization Decision Assistance Tool)

The SPDAT portfolio consists of evidence-based, standardized assessment tools that allow providers to effectively assess the severity of service needs for people experiencing homelessness. TPCH utilizes SPDAT scores for prioritization of families and individuals for housing resources. The Vulnerability Index (VI) SPDAT is utilized for pre-screening families, individuals, and youth. The Full SPDAT assessment also has versions for these populations. These SPDATs are more in-depth assessments and case management tools.

Transitional Housing (TH)

Transitional housing provides homeless families and individuals with the interim stability and support to successfully move to and maintain permanent housing. Homeless persons may live in transitional housing for up to 24 months and receive support services that help them live more independently.

TPCH

Tucson Pima Collaboration to End Homelessness (TPCH) is a coalition of community and faith-based organizations, government entities, businesses, and individuals committed to the mission of ending homelessness, advocating for and addressing the issues related to homelessness in our community, and acting as the U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) for the geographic area of Tucson and Pima County, Arizona.

Victim Service Provider

A victim service provider is an organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, stalking or human trafficking.

GENERAL POLICIES

Family Admission and Non-Separation
Ensuring Educational Rights

Promoting Cultural and Linguistic Responsiveness

Persons Fleeing Domestic Violence
Persons Identifying as
LGBTQ/LGBTQIA+ Housing First

Family Admission and Non-Separation

Consistent with the CoC Program Interim Rule 578.93, neither CoC nor ESG program-funded grant recipients and subrecipients may involuntarily separate families. The age and gender of a child under age 18 will not be used as a basis for denying any family's admission to a project that receives CoC or ESG funds. The gender, sexual orientation and/or marital status of a parent or parents will also not be used as a basis for denying any family's admission to a project that receives CoC or ESG funds.

The CoC will work closely with providers to ensure that placement efforts are coordinated to avoid involuntary family separation, including referring clients for the most appropriate services and housing to match their needs. Any client who believes that they or a family member has experienced involuntary separation may report the issue to the CoC through www.tpch.net and "Contact TPCH". The CoC will investigate the claim and take appropriate remedial action.

Ensuring Educational Rights

CoC and ESG recipients and subrecipients may not make decisions regarding the educational participation of children receiving services and may not require or limit educational decision-making of parents/guardians except where required to do so by Federal or State regulation or statute. Consistent with the CoC Program Interim Rule 578.23 and 578.93 (e), all CoC and ESG program funded recipients and subrecipients assisting families with children or unaccompanied youth must:

1. Take into account the educational needs of children when placing families in housing and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education.
2. Inform families with children and unaccompanied youth of their educational rights, including providing written materials, provide linkage to McKinney Vento Liaisons (including assistance with enrollment if needed) as part of intake procedures.
3. Not require children and unaccompanied youth to enroll in a new school as a condition of receiving services.
4. Allow parents or the youth (if unaccompanied) to make decisions about school placement.
5. Not require children and unaccompanied youth to attend after-school or educational programs that would replace/interfere with regular day school or prohibit them from staying enrolled in their original school.
6. Post notices of educational rights at each program site that serves homeless children and families in appropriate languages.
7. Designate a staff member who will be responsible for:
 - a. ensuring that homeless children and youth in their programs are in school and are receiving all educational services to which they are entitled.
 - b. coordinating with the local McKinney Vento Educational Coordinator and Liaison, the appropriate school district, the CoC, and other mainstream providers as needed.
 - c. facilitating unaccompanied youth who have not obtained a high school diploma or certificate of General Educational Development (GED) to obtain such a credential and ensuring that unaccompanied youth are connected to appropriate services in the community.

Clients who believe that their educational rights have not been observed may report the issue to the CoC through www.tpch.net and "Contact TPCH".

Promoting Cultural and Linguistic Responsiveness

Given the cultural and linguistic diversity of Pima County's population it is incumbent on homeless service agencies and providers to ensure both equitable access to, and the provision of, quality services for the whole population. This requires that service agencies and professionals be able to respond appropriately to the needs of the diverse communities they serve.

The following guidelines and principles are adopted by TPCH to promote cultural and linguistic responsiveness within all services provided for people experiencing or at risk of experiencing homelessness and expected of Emergency Solutions Grant and Continuum of Care Program Grant projects:

- Every person shall be entitled to high-quality care regardless of their cultural, ethnic, linguistic, or religious background or beliefs.
- Understanding and addressing the links between ethnicity, culture and language will care and outcomes for culturally and linguistically diverse communities. Persons working in and/or administering homeless service programs shall receive training that includes foundational concepts of equity, cultural humility, and inclusivity as well as detailed information about the cultural practices and beliefs of communities disparately impacted by homelessness and/or commonly served by the provider agency.
- Agency services shall be made available in the preferred language of the program participants and, whenever possible, by persons who reflect the culture and/or linguistic traditions of the participant. Translation services must be made available to all participants at no cost to the participant and programmatic forms must be provided in participants' preferred language upon request.
- Participants may not be required to participate in services or activities that the participant identifies as inconsistent with their cultural, ethnic, religious, or linguistic traditions except where required by federal regulation and/or statute governing the project.
- Participants may not be prohibited from or otherwise disincentivized from participating in activities that the participant identifies as important to their cultural, ethnic, religious, or linguistic traditions except where prohibited by federal regulation and/or statute governing the project.

Persons Fleeing Domestic Violence

Consistent with the CoC Program Interim Rule 24 CFR Part 578.5 (8), all CoC program funding recipients and subrecipients will provide safe, confidential and equal access to TPCH's "no wrong door" coordinated entry process and referrals to either

domestic violence service providers or CoC or ESG funded project recipients and subrecipients for families and individuals who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking regardless of whether or not they consent to share their data through the HMIS.

The CoC will work closely with ESG and domestic violence service providers to ensure that any individual or family fleeing as described above will have the opportunity through coordinated entry and in accordance with the CoC's Coordinated Entry Policies and Procedures to be safely, confidentially and immediately transferred to a domestic violence services provider, if desired. While domestic violence service providers do not participate in the TPCH HMIS, these providers are encouraged to obtain from their clients consent for confidential staffing (using de-identified data) and referral to housing and services from other providers through the coordinated entry as desired and needed by clients. If individuals or families fleeing domestic violence do not desire such a transfer, they may be assessed and/or undergo intake through the normal coordinated entry system.

All CoC grant recipients and subrecipients within the CoC geographic area will make all efforts to: protect the privacy and safety of domestic violence survivor; uphold client choice by presenting a range of housing and service options; and ensure that housing, once established, is not endangered because of reports of domestic violence or re-victimization. TPCH will offer staff training on dealing with those fleeing domestic violence and/or trauma informed care no less than annually.

In compliance with under §578.51 (c)(3), any program participants who have complied with all program requirements during their residence and who have been a victim of domestic violence, dating violence, sexual assault, or stalking, and who reasonably believe they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, or stalking (which would include threats from a third party, such as a friend or family member of the perpetrator of the violence), if they remain in the assisted unit, and are able to document the violence and basis for their belief, may retain the rental assistance and may move to a different CoC geographic area if they move out of the assisted unit to protect their health and safety and the CoC to which they are moving did not participate in the decision to move.

For each program participant who elects to move to a different CoC due to imminent threat of further violence under §578.51 (c) (3), the CoC project in which they participated must retain:

1. Documentation of the original incidence of violence.
2. Documentation of the reasonable belief of imminent threat of further violence. This would include threats from a third party, such as a friend or family member of the perpetrator of the violence.

In either case, the documentation may be the housing or service provider's written observation; a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider or other professional from whom the victim has sought assistance; medical or dental records; court or law enforcement records; or written certification by the program participant to whom the violence occurred or by the head of household.

Persons Identifying as LGBTQ+LGBTQIA+

Consistent with the CoC Program Interim Rule 578.93 (a), final rule 77 FR 21 5662 and CPD-15-02, all CoC recipients and subrecipients will make available their housing and services to families and individuals without regard to actual or perceived sexual orientation, gender identity (whether actual or perceived gender-related characteristics), or marital status. In addition, CoC and ESG program funded recipients and subrecipients will:

1. Recognize that biological sex as reported at birth may not correspond to an individual's gender identity, ask about gender identity or sexual orientation to determine eligibility if the facility to which the individual client seeks admission has shared sleeping areas or bathrooms, or to determine the number of bedrooms to which a household may be entitled.
2. Provide access to shelter and housing programs based on a person's self-identified gender, taking health and safety, and non-binary gender identity concerns into consideration.
3. Neither request documentation of a person's sex, anatomy or medical history in order to determine appropriate placement nor deny access to a single-sex emergency shelter or facility solely because the individual's identity documents indicate a sex different than the gender with which the client or potential client identifies or because ~~his or her~~ their appearance or behavior does not conform to gender stereotypes; nor consider a person ineligible for any facility based on the factors outlined above.
4. Maintain the confidentiality of any individual's disclosure regarding their sexual orientation or gender identity; notify persons who identify as LGBTQ when and to whom that identification may be shared during referrals; and, during

intake, inquire about a client's preference regarding the disclosure or non-disclosure to some or all staff of their stated orientation and/or gender identity, and then abide by that preference.

5. Neither isolate nor segregate a client based on gender identity unless by that client's request or for that client's safety. HUD assumes that a provider will not make an assignment or re-assignment based on complaints of another person when the sole stated basis of the complaint is a client or potential client's non-conformance with gender stereotypes.
6. Take reasonable steps to address any concerns expressed by a client or observed by a provider regarding safety or privacy. Whenever physically possible, providers will ensure that toilet stalls have doors and locks and that separate shower stalls are available. When these physical amenities are not available, providers will work with individuals (to the extent possible within the physical layout of their facility) to provide accommodations such as: addition of a privacy partition or curtain; use of a nearby private restroom or office; or a separate changing schedule.
7. Ensure that all recipient and subrecipient staff members and contractors who interact directly with potential and current clients are aware of these rules and guidelines through at least annual training, and take prompt corrective action to address noncompliance as reported through www.tpch.net and "Contact TPCH".

Housing First

These Written Standards establish that all Permanent Supportive Housing (PSH) and Rapid Rehousing (RRH) Projects adopt the Housing First model.

Housing First is an approach to quickly and successfully connect families and individuals to permanent housing. Housing First programs do not create barriers to entry such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness.

Housing First considers all participants as "housing ready" vs only those participants that have completed treatment or achieved sobriety. There are no programmatic prerequisites to program entry such as minimum income, sobriety or treatment requirements. Programs fill their vacancies with households selected through the Coordinated Entry process.

All attempts are made to streamline the move-in process by aiding households with the eligibility process and by obtaining documents per the HUD regulations, which provide a grace period for obtaining chronic homeless documentation when it cannot be obtained at the time of housing offer of move-in. (See Timelines for Obtaining Documentation of Chronic Homelessness) This community's Housing First programs do not require chronic homeless documentation prior to program entry.

Housing First programs recognize tenant rights, responsibilities, and legal protections. Programs educate participants on these topics such as lease terms and Fair Housing. Program managers abide by these laws; projects respect tenant rights while providing services.

Housing First programs seek to maintain housing for participants through practices that provide services to build skills and seek leniency whenever possible. For example, the program will offer budgeting classes and seek a payment plan instead of seeking eviction for a participant failing to pay ~~his or her~~their rent.

Supportive services support recovery while respecting client choice. Participants are not forced into treatment but are continually offered a wide array of services and supports understanding that participants may decline them. There are no penalties for declining services within Housing first programs.

PERFORMANCE STANDARDS

TPCH requires that CoC Grant Recipients meet the following benchmarks for grants and financial management that communities must reach to meet this Standard of Recipient Performance. (Per 24 CFR 578 and the FY2015 NOFA). TPCH requires that all projects:

1. Partner with established integrated health care relationships to ensure coverage for all participants.
2. Partner with employment resources to ensure participants have access to job training and development resources as needed.
3. Work closely with participants to access all mainstream benefits for which they are eligible.
4. Submit Annual Performance Reports by the deadline.
5. Avoid or resolve HUD monitoring findings, or OIG Audits, if applicable.
6. Maintain quarterly drawdowns.
7. Fully expend awarded funds.
8. Maintain full and high-quality participation in the TPCH HMIS.
9. Maintain full and high-quality participation in the TPCH Coordinated Entry system.

TPCH further requires that all CoC Grant Recipients meet the following standards according to the type of project being administered.

PERFORMANCE STANDARDS FOR TH, TH-RRH, AND RRH PROJECTS

Measure	High-Performing	Performing	Low-Performing
Housing First Approach	100%	100%	< 100%
Accepted Referrals from Coordinated Entry	100%	90-99%	≤ 89%
Grant Expenditure	100%	≥ 90%	≤ 89%
Bed Utilization Rate	100%	≥ 90%	≤ 89%
Leavers with Income	≥ 75%	51-74%	≤ 50%
Leavers who Increased Income	≥ 50%	21-49%	≤ 20%
Exits to PH	≥ 96%	91-95%	≤ 90%
Data Quality	≥ 96%	95-90%	≤ 89%

PERFORMANCE STANDARDS FOR PSH PROJECTS

Measure	High-Performing	Performing	Low-Performing
Housing First Approach	100%	100%	< 100%
Coordinated Entry Participation	100%	99-90%	≤ 89%
Grant Expenditure	100%	99-90%	≤ 89%
Bed Utilization Rate	≥ 95%	94 - 79%	≤ 78%
Meeting contract goals	100%	99-95%	≤ 94%
Stayers with income	≥ 50%	49 – 41%	≤ 40%
Stayers who Increased Income	≥ 50%	49 – 41%	≤ 40%
Stayers with non-cash benefits	≥ 75%	74% - 51%	≤ 50%
Leavers with Income	≥ 40%	39 - 21%	≤ 20%
Leavers who Increased Income	≥ 40%	39 - 21%	≤ 20%
Leavers with non-cash benefits	≥ 50%	49 - 41%	≤ 40%
Exits to PH	≥ 96%	95 - 91%	≤ 90%

PRIORITIZATION FOR HUD-VASH HOUSING

1. Chronically homeless Veterans will be given the highest priority for admission.
2. Admission decisions are to be prioritized by highest need for HUD-VASH, BASED ON Veteran's acuity per clinical judgment and resources availability.
3. Where there are no chronically homeless Veterans, admissions to HUD-VASH will use the HUD Notice CPD-16-11, *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing*, in the following order of priority:
 - a) **First Priority.** Homeless persons with a disability with long periods of episodic homelessness and severe service needs.
 - b) **Second Priority.** Homeless persons with a disability with severe service needs.
 - c) **Third Priority.** Homeless persons with a disability coming from places not meant for human habitation, safe havens, or emergency shelters without severe service needs.
 - d) **Fourth Priority.** Homeless persons with a disability coming from transitional housing.
 - e) **VA Priority Populations.** Homeless Veterans who do not meet criteria for chronic homelessness or the priority groups above may be prioritized for VA-funded Permanent Supportive Housing (PSH) if they demonstrate a need for ongoing case management based on clinical assessment. Additional priority populations include, but are not limited, to the following Veterans: women, those with children, those who served in Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND), aging Veterans, those with a debilitating clinical condition that does not meet formal disability criteria, and those with an extensive homeless history that does meet other criteria above.
4. If there are no available case management openings or vouchers, the Veteran will be placed on a HUD-VASH Interest List. The Veteran will be provided with information about HUD-VASH, and when appropriate, the HUD-VASH case management team will invite the Veteran to participate in any existing HUD-VASH pre-admission groups, as available. However, Veterans in this category must be referred to other VA and community resources to address their current needs. HUD-VASH staff must document the referral, in CPRS, and note that the reason for denial was a lack of an available voucher or case management openings. Denials for lack of an available voucher should be recorded as such in HUD-VASH Homeless Operations Management and Evaluation System (HOMES) as well.
 - a) Veterans who are placed on a HUD-VASH Interest List must be reassessed, by HUD-VASH program Coordinator, ~~or his/her~~ or their designee, when a voucher becomes available so that the Veteran most in need is admitted to the program.
 - b) Veterans on the HUD-VASH Interest List must have a warm handoff to other VA and/or community programs that can assist with ongoing clinical and housing needs

PERMANENT SUPPORTIVE HOUSING

Community Priorities

Priorities for those who will receive assistance with Permanent Supportive Housing programs.

- Beds dedicated and prioritized to serve families and individuals facing chronic homelessness
- Beds that are not dedicated or prioritized to serve families and individuals facing chronic homelessness

Documentation and Move-In Requirements

- Timelines for obtaining documentation of Chronic Homelessness
- Timelines for accessing housing

Community Priorities

When housing members of the community, this community prioritizes families and individuals with severe service needs who have experienced two or more years of homelessness. This community follows guidelines set forth in (Notice: CPD-16-11). Case conferencing will be used to further ensure appropriate matching, client choice, and navigation into housing and associated support services offerings.

Due diligence should be exercised when conducting outreach and assessment to ensure that persons are served in the order of priority in these standards, and as adopted by the CoC. HUD recognizes that some persons – particularly those living on the streets or in places not meant for human habitation – might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant where there are persons who meet a higher priority within the CoC and who have not yet accepted the PSH opportunities offered to them. Street outreach providers should continue to make attempts with those persons using a Housing First approach to place as few conditions on a person's housing as possible.

Service needs, defined in detail in the key terms section of this document, are categorized as Severe, High, Moderate, and Low as measured by use of the tools in the SPDAT portfolio.

Beds Classified as Dedicated or Prioritized for Chronically Homeless (CH)

See the key terms section for the definition of Chronic Homelessness.

TPCH seeks to end chronic homelessness. Certain CoC-funded beds have been dedicated or prioritized to serve families and individuals experiencing chronic homelessness. Only persons experiencing chronic homelessness (CH) will be served in CH-dedicated or CH-prioritized beds until all people facing chronic homelessness within our geographic boundaries have been offered housing. TPCH recognizes those with severe service needs who have been homeless for two years or more over the course of their lives as prioritized for housing. We give first opportunity to those who are unsheltered. Families and individuals with moderate and low service needs are not currently served with these beds.

TPCH prioritizes these beds as follows:

- 1) Severe Service Needs & 2+ years homeless & unsheltered
- 2) Severe Service Needs & 2+ years homeless & sheltered

When priority populations are housed, TPCH will offer housing to the remaining families and individuals facing CH as follows:

- 3) Severe Service Needs & Less than 2 years homeless & unsheltered
- 4) Severe Service Needs & Less than 2 years homeless & sheltered
- 5) High Service Needs & 2+ years homeless & unsheltered
- 6) High Service Needs & 2+ years homeless & sheltered
- 7) High Service Needs & Less than 2 years homeless & unsheltered

8) High Service Needs & Less than 2 years homeless & sheltered

DRAFT

Beds Classified as Not Dedicated or Prioritized for CH

This community will follow the above prioritization levels for these beds until the community has determined that we have housed families and individuals who meet the definition of chronic homelessness within our geographic boundaries. When that has been achieved, these beds will be prioritized to those with high service needs, a disability, and have experienced at least 2 years of cumulative lifetime homelessness. Families and individuals with moderate and low service needs are not currently served with these beds.

1. Severe Service Needs, with a disability, with 2 or more years homeless
2. Severe Service Needs with a disability

After everyone in the above groups has been offered housing, TPCP prioritizes the remaining households as follows:

3. Severe Service Needs, 2 or more years homeless
4. Severe Service Needs
5. High Service Needs, with a disability, with 2 or more years homeless
6. High Service Needs, with a disability
7. High Service Needs, 2 or more years homeless
8. High Service Needs

Timelines for Obtaining Documentation of Chronic Homelessness

Verification of homeless status and disability are required per HUD. Details on what types of homeless verification are provided in this document under Evaluating and Documenting Eligibility (Categories of Homelessness & Required Types of Verification).

Obtaining verification of disability and chronic homeless status shall not be a barrier to entering housing. When projects are verifying chronic homeless status, TPCP allows projects to require no more than the minimum HUD-required documentation prior to move-in. This includes a review of homelessness with the household to ascertain whether the household qualifies and a primary or secondary source of disability verification. Once the program has enough information from the participant to believe the participant qualifies, ~~s/he~~ the participant should be allowed to move forward with program entry.

The secondary source of disability documentation (social security award letter, handicap parking placard, or written intake worker's notation of a visible disability) allows the program to take up to 45 days to obtain direct third-party disability verification.

Projects are given up to 180 days to obtain written verification of chronic homeless status.

Timelines for Accessing Housing

Programs must make every effort to house participants quickly. Additional barriers may not be imposed, and client-centered assistance must be provided to enable participants a quick turnaround from eligibility determination to move-in.

RAPID REHOUSING PROGRAMS

Introduction

Rapid rehousing assistance helps families and individuals who are experiencing homelessness to move as quickly as possible into permanent housing and achieve stability in that housing through a combination of rental assistance and supportive services. Rapid rehousing rental assistance is available for a maximum of 24 months within a three-year period, which may not be consecutive. Participants may maintain their housing units once the rental assistance has ended by paying full rent to the property. Rapid rehousing uses Fair Market Rates (FMR) established annually by HUD <http://www.huduser.org/portal/datasets/fmr.html> which includes utility allowances.

Average length of Rapid Rehousing assistance

While each RRH participant is encouraged to reach rent independence as soon as practical, TPCB recognizes that RRH participants may require time for completing education and/or job training, job search, and other endeavors that contribute to housing stability. Clients are generally expected to assume 100% of their rent after 8 months of assistance.

Priorities for which families and individuals will receive Rapid Rehousing assistance

Rapid Rehousing programs will use SPDAT tools (through the HMIS per Coordinated Entry) to determine and prioritize who will receive RRH assistance. Households with moderate service needs will be offered rapid rehousing assistance, with priority going to unsheltered households. Families and individuals with low service needs are not currently served with these beds.

Participants must meet the HUD definition of homelessness for Categories 1, 2, or 4. Households must lack sufficient resources and support networks to sustain stability in permanent housing. Rapid Rehousing will be offered on a Housing First basis and re-house households in less than 30 days. Rapid Rehousing utilizes the Transition-In-Place model which allows program participants to retain the unit when the rental assistance and supportive services end.

Standards for determining what percentage or amount of rent each program participant must pay while receiving Rapid Rehousing assistance

The percentage of income each household will pay will increase over time. (NOTE: participants without income will not pay rent; x% of 0 = 0). The rent the participant pays shall not exceed the rental costs on the unit; programs will not profit from participant contributions. Annual earnings are divided by 12 months to calculate a monthly earning amount.

The rent schedule is as follows:

Participants in short-term rental assistance (1-3 months in duration) may pay up to 10% of their income for rent and utilities.

Participants in medium-term rental assistance (4-8 months) may pay up to 25% of their income for rent and utilities.

Participants in long term rental assistance (months 9-24) may pay up to 50% of their income for rent and utilities.

At no point shall the rent collected from the household exceed the lease rent on the property.

Standards regarding utility assistance

If utilities are not included in a project participant's rent, the agency administering the project grant will pay the utilities up to the amount of the participant's utility allowance, which shall not exceed FMR. If the cost of such utilities exceeds the amount of the utility allowance, the project or project participant must pay the excess amount from other sources.

Standards for case management with Rapid Rehousing Assistance.

All agencies are expected to assist their RRH project participants in accessing or increasing income and want to obtain or maintain mainstream benefits (e.g. health insurance, nutritional assistance, child care) to which they may be entitled. All agencies also are expected to progressively engage their clients in case management and all other services (e.g. education, job training, job development, budgeting) that they may need to attain and maintain housing stability. Agencies may neither require participation in services either to obtain or maintain housing nor may they exit a project participant from housing for non-participation in services.

Projects are expected to identify clients among their participants who may be Chronically Homeless and to verify length of time homeless and disabling conditions to facilitate potential transfers.

TRANSITIONAL HOUSING

Introduction

Transitional Housing (TH) facilitates the movement of homeless families and individuals to permanent housing within 24 months of entering Transitional Housing.

Community Priorities

Transitional Housing programs will use SPDAT tools (through the HMIS per Coordinated Entry) to determine and prioritize who will receive assistance. Households with moderate service needs will be offered assistance; priority going to unsheltered households who are less likely to be able to secure a lease in their own name. Families and individuals with low service needs are not served with these CoC-funded beds.

Eligibility

Participants must meet the HUD definition of homelessness Categories 1, 2 and 4.

Documentation Protocol

Documentation to verify homeless status must be obtained per the Evaluating and Documenting Eligibility (Categories of Homelessness & Required Types of Verification) section of this document.

EVALUATING & DOCUMENTING ELIGIBILITY

HUD further defines homelessness into various categories. This section contains the category definitions and documentation requirements for each level of homelessness. Procedures for evaluating and documenting eligibility are unique to each category of homelessness. HUD has two levels of documentation; Level 2 is only acceptable if level 1 documentation cannot be obtained.

Literally Homeless (also referred to as Category 1)

An individual or family sleeping in an emergency shelter or a Safe Haven (Sonora House), sleeping in a place not meant for human habitation, (staying in someone else's residence does **not** meet the requirements for literal homeless), or exiting an institution where ~~s/he has~~ they have resided for 90 days or less and was at one of the above places immediately before entering the institution.

Level 1 Options:

- Written observation by the outreach worker
- Written referral by another housing or service provider

Level 2 Options (to be obtained when none of the above are available)

- Certification by the individual or head of household seeking assistance stating that s(he) was living on the streets or in shelter PLUS documentation outlining efforts to obtain both level 1 forms of documentation.

For individuals exiting an institution obtain one of the forms of evidence above for where the person slept prior to entering the institution and one of the following regarding the institution stay:

- Discharge paperwork or written/oral referral
- Written record of intake worker's due diligence to obtain the evidence and certification by individual that they exited institution

At Imminent Risk of Homelessness (also referred to as Category 2)

An individual or family who will imminently lose their primary nighttime residence is considered to be imminently homeless if the residence will be lost within 14 days of the application for homeless assistance, no subsequent residence has been identified and the individual or family lacks the resources or support networks needed to obtain other permanent housing.

Level 1 Options:

- If in housing, a court order resulting from an eviction action notifying the individual or family that they must leave.
- If in a motel; evidence showing they lack the financial resources to stay.

Level 2 Options consist of three components, **all** of which must be obtained:

- A documented and verified oral statement with certification that no subsequent residence has been identified
- Self-certification or other written documentation that the individual lacks the financial resources and support necessary to obtain permanent housing.
- Documentation outlining efforts to obtain the level 1 documentation.

Homeless under other Federal Statutes (Category 3) This category is available for RHY and ESG programs; Category 3 households are not eligible for COC programs

Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- i) Are defined as homeless under the other listed federal statutes;
- ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
- iii) Have experienced persistent instability as measured by two moves or more during the preceding 60 days; and
- iv) Can be expected to continue in such status for an extended period due to special needs or barriers.

There are no level 2 sources of documentation for this category, all of the following must be obtained:

- v) Certification by the nonprofit, state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute
- vi) Certification of no permanent housing in the last 60 days
- vii) Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days
- viii) Documentation of special needs or two (2) or more barriers

Fleeing/Attempting to flee domestic violence (Category 4)

An individual or family is considered to be fleeing domestic violence when fleeing, or attempting to flee, domestic violence, has no other residence and lacks the resources or support networks to obtain other permanent housing. There are no level 2 sources of documentation for this category.

For victim service providers:

- An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.

For non-victim service providers **all** of the below must be gathered:

- Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker.
- Certification that no subsequent residence has been identified
- Self-certification or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.

Chronically Homelessness

See the key terms section for the definition of Chronic Homelessness.

Projects must document households meeting the HUD criteria for chronic homelessness. This documentation includes three things

- i) Documentation of the current household status as Category 1; Literally Homeless.
- ii) Documentation of disability
- iii) Documentation of the homeless history required to qualify as chronically homeless.

These documents may be obtained after the household has moved in. These documents have levels of documentation as prescribed by HUD. Time spent homeless must be verified; breaks in homelessness do not require third-party verification.

Level 1: Third-Party documentation. This includes written observation by an outreach worker, a written referral by another housing or service provider, or documentation from institutions such as hospitals, correctional facilities, etc. when they include length of stay and are signed by the institution staff. HMIS data may be used in when it contains the information required of all third-party documentation.

Level 2: Self-Certification. This is a signed certification by the individual seeking assistance describing how they meet the definition accompanied with the intake worker's documentation of the living situation and the steps taken to obtain evidence to support this. (A minimum of 5 must be made, and documented, to entities that could provide third-party verification).

Projects are capped at the number of households that can self-certify. A household's documentation packet is considered complete when it verifies disability and third-party verification for at least 9 months of the household's time homeless. 75% of the project's households must have complete documentation packets on file. 25% of the project's households may self-certify all of their time homeless.

REFERENCES

24 CFR 578 HEARTH Act (amending McKinney-Vento Act) and all subsequent amendments

U.S. Department of Housing and Urban Development Notice CPD 16-11: Prioritizing Persons Experiencing Chronic Homeless and Other Vulnerable Homeless Persons in Permanent Supportive Housing.

U.S. Department of Housing and Urban Development Notice CPD 17-01: Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System

TPCH GENERAL COUNCIL SIGN IN SHEET

2.9.2023

Community Foundation for Southern Arizona

For those who registered ahead of time, names are listed alphabetically by first name. If you did NOT register, add your information to the bottom of the page.

SIGN IN HERE	Name:	Agency (if applicable). Write N/A if	Are you a member of TPCH?
	Adriana Vidal	Our Family Services	I'm not sure
	Andrea Bedoy	SAAF	Organizational member
<i>[Signature]</i>	Bernadette Unterbrink	Community Bridges	Organizational member
<i>Betty Bitgood</i>	Betty Bitgood	Hope of Glory Ministries	Organizational member
	Bill Davidson	Salvation Army	Organizational member
	Bill Davidson	Salvation Army	Organizational member
<i>Brandi Champion</i>	Brandi Champion	City of Tucson	Organizational member
<i>[Signature]</i>	Byron Briley	Pima County/SJEC	Organizational member
	Carrie Stephenson	N/A	I'm not sure
<i>[Signature]</i>	Cat Polston	City of Tucson	Organizational member
	Catherine Moran	N/A	Individual member
<i>Chaelee Chavez</i>	Chaelee Chavez	Our Family Services	Organizational member
	Charles Sullivan	ABC Housing	I'm not sure
	Cliff Wade	COT	Organizational member
	Colleen McDonald	Our Family Services	Organizational member
REMOTE ATTENDEE	Dave Gamrath	Hope Factory Production	Individual member
	David Shropshire	Our Family Services	Organizational member
	David Shropshire	Our Family Services	Organizational member
	Dedra Clark-McGee	Pima County Health Department	I'm not sure
<i>[Signature]</i>	Dia Nonaka	HOM, Inc.	Organizational member
<i>Diego Coronado</i>	Diego Coronado	Youth on Their Own	Organizational member
<i>Doreen Peters</i>	Doreen Peters	MHC	Organizational member
<i>[Signature]</i>	Ed Sakwa	Emerge Center Against Domestic At	Organizational member
	Elaine Yee	English Class Works	Organizational member
<i>[Signature]</i>	Elizabeth Livingston	n/a	Organizational member
	Ellen Mercer	Poverello House	Organizational member
	ellie hutchison	Arizona Faith Network	Not a member
	Erik Michaud	Our Family Services	Organizational member
<i>Jan Muzzin</i>	Jocelyn Muzzin	SAVAHCS	Organizational member
	John Roldan	N/A	Individual member
<i>Karen Caldwell</i>	Karen Caldwell	Primavera Foundation	Organizational member
REMOTE ATTENDEE	Kayla McGhee	Banner University Health Plans	Organizational member
	Kayla McGhee	Banner University Health Plans	Organizational member
	Kayla McGhee - Onlin	Banner University Health Plans	Organizational member
<i>[Signature]</i>	Kimberley Graham	The Salvation Army	Organizational member
<i>[Signature]</i>	Kimberly Noble	City of Tucson	Organizational member
	Kristina Abril	Primavera Foundation	Not a member
<i>Laurie Bernard</i>	Laurie Bernard	New Spirit Lutheran Church	Organizational member
	Marcellina (Marci) Roj	Goodwill METRO/REC	Organizational member
<i>[Signature]</i>	Marcos Crespo	Catholic Community Services- Pio D	Organizational member
	Mary Cuevas	Esperanza En Escalante	Organizational member
	Maxine Campbell	N/A	Individual member
<i>[Signature]</i>	Megan Sanes	Our Family Services	Organizational member
<i>[Signature]</i>	Pam Moseley	Arizona Dept of Economic Security	Organizational member

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