

**ORANGE COUNTY CONTINUUM OF CARE
POLICIES, PROCEDURES AND STANDARDS COMMITTEE
MEETING**

Tuesday, June 9, 2026
3:30 p.m. – 5:00 p.m.

Location:
**County Administration South (CAS)
Multipurpose Room
601 N. Ross St., Rooms 103/105
Santa Ana, CA 92701-4599
[Click Here](#) for parking information.**

Virtual Meeting Option*:
**Zoom Meeting Link: [Click here for meeting link](#)
Join by phone: +1 669 444 9171
Meeting ID: 953 0688 4695**

Committee Chair: Nishtha Mohendra, Friendship Shelter

Committee Members:

Judson Brown, City of Santa Ana
Nichole Gideon, Individual
Shakoya Green-Long, Individual
Marisol Johnson, Dayle McIntosh Center
Melanie McQueen, PATH
Dr. Tiffany Mitchell, Orangewood Foundation
Robert “Santa Bob” Morse, Individual

AGENDA

In compliance with the Americans with Disabilities Act, and County Language Access Policy, those requiring accommodation and/or interpreter services for this meeting should notify the Office of Care Coordination 72 hours prior to the meeting at (714) 834-5000 or email CareCoordination@ceo.oc.gov. Requests received less than 72 hours prior to the meeting will still receive every effort to reasonably fulfill within the time provided.

Welcome and Introductions – Nishtha Mohendra, Chair

Public Comments – Members of the public may address the Policies, Procedures and Standards (PPS) Committee on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the PPS Committee. Public comments will be limited to three

minutes. If there are more than five public speakers, this time will be reduced to two minutes. Members of the public utilizing interpreter services will be given double the amount of time to provide public comment.

To address the PPS Committee during the Public Comment period, members of the public are to complete a Request to Address the Committee form prior to the beginning of each agenda item and submit it to Continuum of Care (CoC) staff. Staff will call your name in the order received.

Members of the public may also submit public comment by emailing CareCoordination@ceo.oc.gov. All comments submitted via email at least 24 hours before the start of the meeting will be distributed to the PPS Committee members and all comments will be added to the administrative records of the meeting. Please include "PPS Committee Meeting Comment" in the email subject line.

CONSENT CALENDAR

1. Approve the PPS Committee Meeting minutes from April 14, 2026.
2. Approve the PPS Committee Meeting minutes from May 12, 2026.

BUSINESS CALENDAR

1. **CoC Grievance Policy and Procedure** – Felicia Boehringer, CoC Administrator, Office of Care Coordination
 - a. Discuss the drafted CoC Grievance Policy and Procedure.
2. **Fiscal Year (FY) 2026 CoC Program Notice of Funding Opportunity (NOFO) Planning** – Timothy Kirkconnell, CoC Manager, Office of Care Coordination
 - a. Discuss proposed strategy for involving additional representation within CoC governance, based on the rating criteria outlined in the FY2026 CoC Program NOFO.

Adjournment to: *Regular meeting on July 14, 2026, from 3:30 p.m. – 5:00 p.m., at CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701*

**ORANGE COUNTY CONTINUUM OF CARE
POLICIES, PROCEDURES AND STANDARDS COMMITTEE
MEETING**

Tuesday, May 12, 2026
3:30 p.m. – 5:00 p.m.

Location:
County Administration South (CAS)
Multipurpose Room
601 N. Ross St., Rooms 103/105
Santa Ana, CA 92701-4599
[Click Here](#) for parking information.

Virtual Meeting Option*:
Zoom Meeting Link: [Click here for meeting link](#)
Join by phone: +1 669 444 9171
Meeting ID: 953 0688 4695

Committee Chair: Nishtha Mohendra, Friendship Shelter

Committee Members:

- Judson Brown, City of Santa Ana
- Andrew Crowe, Scholarship Prep
- Nichole Gideon, Individual
- Shakoya Green-Long, Thomas House Family Shelter
- Marisol Johnson, Dayle McIntosh Center
- Melanie McQueen, PATH
- Dr. Tiffany Mitchell, Orangewood Foundation
- Robert “Santa Bob” Morse, Individual

MINUTES

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Welcome and Introductions – Nishtha Mohendra, Chair

Melanie McQueen chaired the meeting and called the meeting to order at 3:30 p.m.

Present: Melanie McQueen, Dr. Tiffany Mitchell, Robert “Santa Bob” Morse.

Absent Excused: Judson Brown, Andrew Crowe, Nichole Gideon, Shakoya Green Long, Marisol Johnson, Nishtha Mohendra.

Public Comments – Members of the public may address the Policies, Procedures and Standards (PPS) Committee on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the PPS Committee. Public comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes. Members of the public utilizing interpreter services will be given double the amount of time to provide public comment.

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CONSENT CALENDAR

1. Approve the PPS Committee Meeting minutes from April 14, 2026.

Due to lack of quorum, the committee did not take action on Consent Calendar Item 1.

BUSINESS CALENDAR

1. **Continuum of Care (CoC) Grievance Policy and Procedure** – Felicia Boehringer, CoC Administrator, Office of Care Coordination

Felicia Boehringer presented a proposed framework for a formal CoC Grievance Policy and Procedure. In anticipation of the Fiscal Year (FY) 2026 CoC Program Notice of Funding Opportunity (NOFO) and potential funding uncertainties, a CoC Grievance Policy and Procedure can support with providing program participants with a grievance process, specifically for CoC-funded projects needing to reduce capacity or close. Felicia Boehringer led discussion to receive feedback on the proposed policy and procedure, noting a plan to return to the June 9, 2026, PPS Committee meeting with incorporated feedback.

Committee Discussion:

- Dr. Tiffany Mitchell suggested reviewing existing grievance policies from CoC-funded agencies for reference.
- Robert “Santa Bob” Morse inquired on HUD requirements for grievance policies.
- Melanie McQueen noted that HUD’s grievance policy for CoC-funded agencies has been an ongoing requirement and asked when this grievance policy would take effect in relation to the agency’s grievance policy. Melanie McQueen emphasized specifically writing into the CoC Grievance Policy and Procedure that an agency’s grievance policy should be exhausted before a

grievance is submitted to the CoC and including language on grounds for appeals and when the final decision is unable to be appealed further.

2. Fiscal Year (FY) 2026 CoC Program Notice of Funding Opportunity (NOFO) Planning – Felicia Boehringer, CoC Administrator, Office of Care Coordination

Felicia Boehringer led a discussion to receive feedback on the proposed framework, target population and priorities for Supportive Services Only (SSO)- Standalone, Street Outreach and Transitional Housing project types for the CoC NOFO Ad Hoc to consider in anticipation for the FY 2026 CoC Program NOFO. Felicia Boehringer highlighted a diverse list of SSO and Transitional Housing eligible activities for the committee to consider.

Committee Discussion:

- Robert “Santa Bob” Morse stated preferring to wait for the release of Point In Time (PIT) Count results, to better gauge needs of the community.
- Dr. Tiffany Mitchell asked what Service Planning Areas (SPAs) already have projects slated to continue operating, and whether those projects have enough resources or if they need additional support. Dr. Tiffany Mitchell advocated for additional funding for Transitional Age Youth (TAY), especially within transitional housing, and noted a potential need for housing and SSO opportunities in South SPA. Dr. Tiffany Mitchell encouraged the CoC to develop universal guidelines or best practices for each project type to ensure consistent care.
- Melanie McQueen suggested the CoC NOFO Ad Hoc should review what services or programs are already available, where there may be gaps in the system, and possibly look back at Tier 2 projects that were not funded during the previous CoC Program NOFO competition. Melanie McQueen emphasized the importance of rental assistance and shared an interest in reviewing community needs based on the PIT results. Melanie McQueen asked whether prevention is an eligible activity under the CoC Program NOFO.

3. CoC Updates – Timothy Kirkconnell, CoC Manager, Office of Care Coordination

Timothy Kirkconnell provided an update on the 2-for-1 Match Policy pilot and shared information on a survey to gather feedback. Timothy Kirkconnell shared the Coordinated Entry System (CES) Evaluation survey and encouraged members to share the survey with those at their agencies.

Committee Discussion:

- Robert “Santa Bob” Morse asked whether those already participating in the CES evaluation can submit the CES Survey.
- Dr. Tiffany Mitchell asked whether there is a recommendation for how many people per organization complete the CES Survey.
- Melanie McQueen highlighted that Element Consulting will join the Service Provider Forum on May 21, 2026, to provide an update on the CES Evaluation.

Melanie McQueen adjourned the meeting at 4:20 p.m.

Adjournment to: *Regular meeting on June 9, 2026, from 3:30 p.m. – 5:00 p.m., at CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701*

Date: June 9, 2026

Subject: Continuum of Care (CoC) Grievance Policy and Procedure

Background and Analysis

The U.S. Department of Housing and Urban Development (HUD) requires formal grievance policies for CoC Program-funded projects, including the Homeless Management Information System (HMIS) and the Coordinated Entry System (CES). While each CoC Program-funded project has individual grievance policies and procedures, the Office of Care Coordination raised a recommendation to draft a formal Orange County CoC Grievance Policy and a Program Termination Procedure, especially given the anticipated changes to current operating projects due to the uncertainty of CoC Program funding. This idea was presented to the Policies, Procedures and Standards (PPS) Committee at the April 14, 2026, meeting. The PPS Committee discussed looking at existing grievance policies as examples to revise and adopt for the Orange County CoC.

Following the April 2026 meeting, the Office of Care Coordination (OCC) reviewed internal County grievance policies and reached out to other CoCs to inquire about established grievance policies. Utilizing existing grievance policies and existing resources, such as [Homebase's Grievance Policy Frequently Asked Questions](#), as a starting point, the OCC initially asked the PPS Committee to provide feedback on the drafted CoC Grievance Policy during the May 12, 2026. Further, the OCC has included considerations for how a grievance policy and process can work in tandem with a termination process due to program closure, to ensure our system is prepared for any changes that may come as a result of reduced CoC Program funding.

During the May 12, 2026, PPS Committee meeting, members discussed the importance of reviewing existing grievance policies from CoC-funded agencies and requested clarification on HUD's specific requirements for grievance policies and procedures. The committee emphasized that the CoC Grievance Policy should clearly state that an agency's internal grievance process must be fully exhausted before a complaint is elevated to the CoC. Members also noted the need to outline grounds for appeal and to specify when decisions are considered final and no longer subject to further appeal. During the committee meeting, the OCC noted that additional feedback from PPS Committee members could be submitted after the meeting and provided an email to invite feedback from members who could not be in attendance. OCC agreed to bring the revised draft to the June 9, 2026, PPS Committee meeting to allow adequate time for review and additional input before moving it forward for recommended action.

Feedback Received

The feedback received constitutes substantive revision of the draft document. While the structural framework of the original draft is preserved, the suggested changes introduce new sections, expand procedural language, and reorient the document's primary perspective toward participant rights and protections. The overall effect is a more comprehensive and legally protective document, though one that is longer and more prescriptive in nature. The revised CoC Governance Policy and Procedure can be referenced in **Attachment A**.

The most significant structural addition is a new opening section establishing the intent of the grievance process, framing it around principles of constructive problem-solving, objectivity, and resolution at the lowest level possible. Throughout the feedback document, the term "household" used in the original is replaced with "participant". Two entirely new sections were introduced that do not appear in the original. The first establishes confidentiality and non-retaliation protections, stating explicitly that participants cannot face retaliation, intimidation, discrimination, or denial of services as a result of filing a grievance. The second introduces an agency-level resolution requirement, providing that participants must exhaust the agency's internal grievance process before the CoC will step in with a carve-out for allegations involving discrimination, retaliation, or health and safety concerns.

Within the existing procedural sections, the suggested revisions trend toward increased specificity and participant protection. The policy availability section is expanded to enumerate what a compliant agency procedure must contain, including timelines, appeal rights, and process descriptions. The CoC review steps are broadened: additional documentation types are listed, the ten-business-day decision window gains an extenuating circumstances provision with a corresponding written notification requirement, and the scope of the post-resolution debrief is expanded to include staff training. The Board notification step is revised to include an explicit confidentiality caveat. The feedback also adds an Appeals Rights section with a placeholder for funding entity contact information, and expands the denial provisions to encompass reduction, suspension, and termination of assistance in addition to outright denial. Two additional grounds for adverse action are identified: failure to meet program requirements and exhaustion or unavailability of funding.

The feedback received is substantive and several of the proposed additions represent sound policy, particularly the confidentiality and non-retaliation language, the agency-level exhaustion requirement, and the expanded denial categories. These elements reflect lived experience perspectives that strengthen participant protections and reduce ambiguity in the grievance process. However, the revised document as a whole is longer, more prescriptive, and more legalistic in tone than the original draft intended. Given that the goal of the policy is to serve as guidance for partner agencies rather than a verbatim compliance template, a final version should selectively incorporate the strongest structural improvements from this feedback while preserving the accessibility and brevity of the original.

The OCC is bringing a seeking further feedback on the current draft CoC Grievance Policy and Procedure and will plan to release a draft policy for wider review, specifically by CoC-funded agencies, prior to returning to the PPS Committee for recommended action. Additionally, the OCC is planning to work with the PPS Committee Chair and Committee to review Program Termination Procedures in future meetings.

Attachments

Attachment A – CoC Grievance Policy and Procedure Draft

Item 1. Attachment A

Continuum of Care (CoC) Grievance Policy and Procedure – Draft

Intent

The Continuum of Care (CoC) Policy and Procedure is intended to support constructive problem-solving and ensure fair access to services. The purpose of the process is to Provide guidance on grievance resolution at the lowest level possible, identify procedural direction on next steps for escalation, and identify opportunities for improvement in policy, procedure, and service coordination.

Grievance Policy and Procedure

Agencies must have written grievance and appeal policies and/or procedures. The policies and/or procedures should be readily available to participants either in written format or by posting the policy in a public place. It is important to effectively communicate these policies and/or procedures to participants at program intake and ensure that they are fully understood. If policies and/or procedures are being updated, agencies must notify program participants of relevant updates and provide a copy.

Established procedures should describe:

- The circumstances under which a participant may be denied, have services reduced, suspended, or terminated from assistance
- Written notification of the decision, including the specific reason for the action
- A participant's right to appeal or request review of the agency's decision
- Applicable timelines for submitting a grievance or appeal
- The process by which the grievance or appeal will be reviewed and resolved.

Confidentiality and Non-Retaliation

All grievances shall be handled in a confidential manner, and the privacy of the participant shall be maintained to the greatest degree reasonably possible given the nature of the review process, to the extent permitted by law. Participants submitting grievances shall not be subject to retaliation, intimidation, discrimination, or denial of services because of filing a grievance.

Agency-Level Resolution

Participants receiving services through a partner agency of the Continuum of Care are required to first utilize the grievance and appeal procedures established by the agency providing direct services prior to submitting a grievance to the CoC. The CoC will review grievances only after the participant has made a reasonable attempt to resolve the matter directly with the agency and has completed the agency's internal grievance process.

The CoC reserves the right to refer grievances back to the appropriate agency when the agency's grievance procedures have not yet been exhausted, unless there is an allegation of discrimination, health and safety concerns, retaliation, or other circumstances requiring CoC review.

CoC Grievance Process

Should a participant submit a grievance to the Orange County Continuum of Care (CoC), the following grievance procedure will be followed:

Item 1. Attachment A

- A written acknowledgement from the CoC Collaborative Applicant that the grievance has been received and is under review within three (3) business days of receipt.
- CoC Collaborative Applicant will reach out to the agency overseeing the participant's program and conduct an extensive review of the participant's client files, the agency's policies and procedures, program eligibility documentation, case notes and service records, and any relevant communication between the participant and the agency associated with the grievance.
 - The review process may require disclosure of the participant's identifying information to the agency to properly examine the relevant case records and documentation. Participants will be informed of this possibility at the time the grievance is received.
- Written notice of final decision by the CoC Collaborative Applicant will be provided to the participant within ten (10) business days of receipt of grievance. If additional time is necessary, the participant will be notified in writing of the delay and anticipated resolution timeframe.
- CoC Collaborative Applicant and Agency will debrief to discuss any recommended improvements to program operations, staff training, policies and procedures, and service delivery practices.
- CoC Collaborative Applicant will notify the CoC Board of grievance and outcome at the next scheduled Board meeting, consistent with participant confidentiality requirements.
- Should a participant not be satisfied with the decision, the participant will be provided the opportunity to submit a grievance with the appropriate funding body.

Denial of Assistance and Grievance Rights

Causes of denial, reduction, suspension, or termination of assistance include, but are not limited to, the participant's ineligibility or failure to provide verifiable evidence of eligibility, failure to meet program requirements, or exhaustion or unavailability of funding. Established procedures should describe:

- Circumstances in which a participant may not qualify or would be denied, have services reduced, suspended, or terminated;
- Written notification of denial, including the reason for the action; and
- A participant's right to review the agency's decision.