

CONTINUUM OF CARE PLANNING

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Administering Agency: HUD's Office of Special Needs Assistance Programs within the Office of Community Planning and Development

Year Started: 1994

Population Targeted: People experiencing homelessness

See Also: For related information, refer to the *McKinney-Vento Homeless Assistance Programs, Ten-Year Plans to End Homelessness*, and the *Federal Surplus Property to Address Homelessness* sections of this guide.

The Continuum of Care (CoC) planning process is used by communities to apply for funding from HUD's CoC program. Through the CoC planning process, government agencies, service providers, advocates, and other stakeholders evaluate the needs of homeless people in the community, assess the performance of existing activities, and prioritize activities going forward. The CoC process was introduced by HUD in the mid-1990s. It was codified into law by Congress through the "Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009."

As of this writing, HUD is proposing major changes to the Continuum of Care program, that are being challenged by the author and others, in Congress and in the courts.

History and Purpose

The CoC process was developed by HUD in 1994 to coordinate the distribution of several competitive homeless assistance programs. Before the CoC process, organizations applied individually for funding from several homeless assistance programs. As a result, there was little coordination between these programs or between different organizations receiving funding in the same community. The CoC process was established to promote coordination within communities and between programs. It was also designed to bring

together a broader collection of stakeholders such as public agencies, faith and business communities, and mainstream service providers. Guidelines for the CoC planning process were included in annual Notices of Funding Availability (NOFAs), recently changed to Notices of Funding Opportunity (NOFOs) in 2021. HUD regularly modifies the process.

On May 20, 2009, President Barack Obama signed the "HEARTH Act" (Public Law 111-22), providing congressional authorization of the CoC process. The "HEARTH Act" reauthorized the housing title of the "McKinney-Vento Act." HUD began issuing regulations in 2011, with the release of interim regulations on the Emergency Solutions Grant and the Homeless Management Information Systems, along with a final regulation on the definition of homelessness.

Regulations on the CoC program were published in the summer of 2012. Key changes included updated outcome measures, funding incentives, eligibility for assistance, matching requirements, rural assistance, and administrative funding.

Summary

The term Continuum of Care (CoC) is used in many ways and can refer to the planning process, the collection of stakeholders involved in the planning process, the geographic area covered by the CoC, or the actual grant received from HUD.

The CoC planning process is typically led and staffed by either a local government agency or a community-based nonprofit. The geography covered by a CoC can vary, covering an entire city, state, or a collection of counties. The goal of the CoC is to create a system-wide response to ensure that homelessness is rare, brief, and nonrecurring. The CoC is tasked with compiling information about homelessness in the community, including information about homeless populations and performance of homeless service programs and the community in reducing homelessness.

In recent years, HUD has incentivized coordination between CoCs and various entities including Consolidated Plan jurisdictions, public housing authorities, Housing Opportunities for Persons with AIDS, Temporary Assistance for Needy Families, Runaway and Homeless Youth, Head Start programs, health care, and other programs.

Due to the pandemic, there was no fiscal year (FY) 2020 CoC Program Competition. Instead, HUD awarded \$2.5 billion to renew approximately 6,600 existing grants for local homeless assistance programs across the country. The CoC process was picked up again in 2021 through 2024 and awards were made. For FY 2025 HUD has issued and rescinded several NOFOs, some proposing major changes in the program. These have been challenged in Congress and in litigation. As of this writing in mid-December 2025, HUD has rescinded its most recent NOFO and there is no active NOFO for FY 2025 CoC funding. The National Alliance to End Homelessness, the National Low-Income Housing Coalition and others have asked HUD, given the late date, to renew FY 2024 grants with its FY 2025 funding, similarly to how it handled FY 2020 funding. Congress has not yet passed funding measures for FY 2026.

Forecast for 2026

The “HEARTH Act” placed more of the responsibility for measuring outcomes and overseeing performance on the leaders of local CoCs. The FY 2024 NOFO continued to require CoCs to submit data on their system’s performance and to place a strong emphasis on performance measures that ensure homelessness is a rare, brief, and one-time experience.

System performance should include emphasis on racial equity in homelessness and emphasize the roles in planning and service delivery of people with lived experience of homelessness. It should also emphasize using evidence-based practices, including moving people quickly into housing and partnering with housing, health, and services agencies to improve all available resources. Whether the current administration or Congress will emphasize these issues appears unlikely due to past behavior, but localities should do so.

Tips for Local Success

The CoC planning process should focus on the most effective strategies for reducing homelessness. CoCs should monitor grantee performance and assist lower performing providers to improve their performance or shift to more effective strategies. Similarly, accessing mainstream resources, generally available for low-income people, is often difficult for people experiencing homelessness. For example, there are numerous barriers for homeless people to access employment services, housing assistance, cash assistance, and treatment services, and due to historical and ongoing structural racism, these barriers are magnified for Black, Indigenous, and other people of color (BIPOC) experiencing homelessness.

Advocates play a crucial role in ensuring that the CoC equitably serves people most in need of assistance and expands access to mainstream resources. For CoCs to be effective, it is important that key stakeholders have a seat at the table. In many communities, the needs of children, BIPOC, LGBTQ people, veterans, people with disabilities, youth, and domestic violence survivors are not always adequately represented. Advocates should work to ensure that they are part of the CoC planning process. By joining their local CoC, advocates can inform and shape a community’s priorities in addressing homelessness for current and emerging populations.

Critically, all stakeholders should participate in data collection efforts whenever appropriate and safe and ensure that programs achieve positive and equitable outcomes.

For More Information

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