

City of Phoenix

*Meeting Location:
City Council Chambers
200 W. Jefferson St.
Phoenix, Arizona 85003*



City of Phoenix

Agenda

Tuesday, November 18, 2025

10:00 AM

City Council Chambers

Community Services and Education Subcommittee

*Councilwoman Kesha Hodge Washington, Chair
Vice Mayor Ann O'Brien
Councilwoman Anna Hernandez
Councilwoman Debra Stark*

If viewing this packet electronically in PDF, open and use bookmarks to navigate easily from one item to another.

OPTIONS TO ACCESS THIS MEETING

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- Individuals should arrive early, 1 hour prior to the start of the meeting to submit an in-person request to speak before the item is called. After the item is called, requests to speak for that item will not be accepted.

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CALL TO ORDER

000 CALL TO THE PUBLIC

MINUTES OF MEETINGS

1 Minutes of the Community Services and Education Subcommittee Meeting

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Attachments

[Attachment A - Oct. 22, 2025 CSE Minutes.pdf](#)

CONSENT ACTION (ITEM 2)

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Birth to Five Program Fiscal Year 2024-25 - District 1, 3,
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INFORMATION ONLY (ITEM 3)

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Attachments

[Attachment A - September Fiscal Expenditures.pdf](#)

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INFORMATION AND DISCUSSION (ITEMS 4-6)

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000 CALL TO THE PUBLIC

FUTURE AGENDA ITEMS

ADJOURN

For further information or reasonable accommodations, please call the City Council Meeting Request line at 602-262-6001. 7-1-1 Friendly.

Persons paid to lobby on behalf of persons or organizations other than themselves must register with the City Clerk prior to lobbying or within five business days thereafter, and must register annually to continue lobbying. If you have any questions about registration or whether or not you must register, please contact the City Clerk's Office at 602-534-0490.

Members:

Councilwoman Kesha Hodge Washington, Chair
Vice Mayor Ann O'Brien
Councilwoman Anna Hernandez
Councilwoman Debra Stark



Minutes of the Community Services and Education Subcommittee Meeting

This item transmits the minutes of the Community Services and Education Subcommittee Meeting on October 22, 2025 for review, correction, or approval by the Community Services and Education Subcommittee.

THIS ITEM IS FOR POSSIBLE ACTION.

The minutes are included for review as **Attachment A**.

Responsible Department

This item is submitted by Deputy City Manager Gina Montes and the City Manager's Office.

Attachment A

Phoenix City Council Community Services and Education (CSE) Subcommittee Summary Minutes Wednesday, October 22, 2025

City Council Chambers
200 W. Jefferson St.
Phoenix, Arizona

Subcommittee Members Present
Chairwoman Kesha Hodge Washington
Councilwoman Anna Hernandez
Councilwoman Debra Stark

Subcommittee Members Absent
Vice Mayor Ann O'Brien

CALL TO ORDER

Chairwoman Hodge Washington called the Community Services and Education Subcommittee (CSE) to order at 10:03 a.m. with, Councilwoman Anna Hernandez, and Councilwoman Debra Stark present. Vice Mayor O'Brien was absent.

CALL TO THE PUBLIC

None.

MINUTES OF MEETINGS

1. Minutes of the Public Safety and Justice Subcommittee Meeting

Councilwoman Stark made a motion to approve the minutes of the October 2, 2025 Community Services and Education Subcommittee meeting. Councilwoman Hernandez seconded the motion which passed unanimously, 3-0.

INFORMATION AND DISCUSSION (ITEMS 2-5)

2. Phoenix Public Library Foundation – Raise the Stacks

Phoenix Public Library Deputy Director Karl Kendall and Phoenix Public Library Foundation Executive Director Kelly Bushong presented the item.

Chairwoman Hodge Washington asked if residents must be present in person at the Burton Barr Library for the silent auction event on November 14.

Director Kelly stated that residents can bid from home.

Chairwoman Hodge Washington expressed gratitude for the presentation.

3. Head Start Birth to Five Governing Board Orientation Presentation

Human Services Department Director Jacqueline Edwards and Deputy Director Patti Kirkland presented the item.

Councilwoman Stark expressed support for the Head Start program and shared concern about the potential loss of funding.

Director Edwards shared the City operates its own early childhood education program. She noted that, in addition to the Head Start program, there are other early childhood education programs available throughout the state. Director Edwards emphasized school districts may partner with nonprofit organizations, and in the case of the City's Head Start program, partnerships include school districts, nonprofits, and private childcare facilities.

Councilwoman Stark noted some areas within the City still needed Head Start services. She highlighted Paradise Valley Unified School District's partnership with a nonprofit in the Palomino area and asked whether these organizations coordinate with the City or operate independently.

Director Edwards explained Head Start was required to support families transitioning between districts. She noted state association facilitates ongoing communication among program partners operating both within the City and across the state.

Deputy Director Kirkland confirmed that the Palomino School does have a Head Start program. She noted it was operated by Southwest Human Development and includes at least two classrooms as part of their service area.

Councilwoman Stark emphasized the importance of early childhood education and noted while the City has a robust Head Start program, other providers also serve different areas. Councilwoman Stark stressed the need to raise awareness about these programs, even those not directly operated by the City.

Councilwoman Hernandez asked whether all responsibilities, including legal, fiscal, and programmatic, would be addressed within the CSE meetings or if additional meetings would be required.

Deputy Director Kirkland explained the program's decision-making process begins with the Head Start Policy Council made of parents and community members. Once the Council approves or disapproves an item, it moves to the governing board for final review. Most decisions conclude at the governing board level, with only a few, such as contracts, requiring approval from the full City Council.

Councilwoman Hernandez asked for clarification on who holds the authority to change policy within the program structure.

Director Edwards explained federal Head Start policies must be followed, while local policies were developed by Human Services staff. These were reviewed by the Head Start Policy Council and, if applicable, brought to the CSE Subcommittee for approval.

Councilwoman Hernandez confirmed her understanding that policy or program changes typically begin with staff, move to the Policy Council for review, and then come to the CSE Subcommittee for further review and possible action. She asked if there would

ever be a need to meet outside of the CSE Subcommittee to fulfill governing board responsibilities.

Director Edwards said aside from individualized briefings, no additional meetings were typically required.

Chairwoman Hodge Washington asked how the program handles address verification for families experiencing housing instability or homelessness, given that proof of address was a participation requirement.

Deputy Director Kirkland explained for families experiencing housing instability, the program accepts a utility bill or similar proof of address from the person they were staying with, along with a notarized statement confirming the family resides at that location.

Chairwoman Hodge Washington asked for information about the status of the program's waitlist.

Deputy Director Kirkland reported the program maintains a target waitlist of 20 percent, meaning each classroom typically has two to three children waiting. She explained there were 504 children on the overall waitlist, representing 22 percent of total enrollment. Of these, 121 were for Early Head Start representing 48 percent of its enrollment, and 383 were for Head Start representing 20 percent of enrollment.

Chairwoman Hodge Washington stated the last CSE Subcommittee meeting took place on the first day of the federal government shutdown and asked for an update of its current impact.

Director Edwards reported that operations remain normal, with classrooms open and no programmatic changes. She shared reimbursements that have been received, with only minor delays typical for the current situation. Director Edwards stated she will update the subcommittee if circumstances change.

Chairwoman Hodge Washington reaffirmed her support for the Head Start program, highlighting its role in early childhood development and lifelong learning. Chairwoman Hodge Washington thanked staff for clarifying governance responsibilities and expressed commitment to continued collaboration.

4. Program Annual Evaluation and Substance Use Planning

Public Health Advisor Yanitza Soto, Special Projects Administrator Kelli Kostizak, and Management Assistant II Melanie Durden presented the item.

Councilwoman Hernandez asked whether there has been an increase in the demand for Naloxone kits distributed at City libraries, noting that current need appears to be high compared to previous levels.

Public Health Advisor Soto confirmed the continued high demand for Naloxone kits at City libraries. She explained the current inventory of kits was stable due to the ongoing donations from the Arizona Department of Health Services.

Councilwoman Hernandez proposed exploring community centers as potential distribution sites, suggesting that these locations could serve as accessible points where residents can pick up Naloxone kits to use at home.

Public Health Advisor Soto confirmed that while kits were currently available at co-located resource centers, including senior centers, there were ongoing efforts to make them accessible at recreation centers and potentially community centers as well.

Councilwoman Hernandez asked whether overdose prevention centers have been considered as part of the broader strategy to expand distribution efforts and address the crisis.

Public Health Advisor Soto clarified that while safe use sites exist elsewhere, the City has not established any official overdose prevention centers through its programs.

Councilwoman Hernandez noted that many necessary actions require funding and highlighted that Arizona's opioid settlement funds were managed through the Attorney General's Office.

Public Health Advisor Soto confirmed opioid settlement funds flow from the Attorney General's Office to county health departments, then to local cities and towns.

Councilwoman Hernandez shared her experience during her last year in the legislature, where opioid settlement funds were redirected to cover budget gaps in the corrections department. Councilwoman Hernandez asked for clarification on how diverting these funds impacts cities that depend on them for local solutions.

Public Health Advisor Soto noted at the municipal level, efforts focus on using an interdepartmental, public health-driven approach. She shared the aim was to allocate opioid settlement funds across a range of approved abatement strategies, not just enforcement or corrections, to ensure broader community impact.

Councilwoman Hernandez asked about opportunities for the City to expand access to fentanyl testing strips, noting that while legislation has made distribution legal, funding remains a key barrier.

Public Health Advisor Soto explained while the Arizona Department of Health Services does offer fentanyl test strips to local communities, current distribution was being prioritized for rural areas and regions with higher substance use impacts due to shifting federal funding. She noted the City will continue pursuing partnerships at the state and county levels. Additionally, she highlighted the value of working with local harm reduction organizations that directly support people who use drugs.

Councilwoman Hernandez emphasized the importance of a holistic strategy that includes harm reduction partners, who play a vital role in keeping people alive during the opioid crisis. Councilwoman Hernandez asked whether any studies or data collection efforts have been conducted to understand how people who use drugs perceive the distribution of overdose prevention kits.

Public Health Advisor Soto shared the county conducted a study in 2022 with people who use drugs, but the City hasn't done its own yet.

Councilwoman Hernandez inquired whether, when a 911 call is made to report an overdose, the dispatch system can identify which specific personnel or units are assigned to respond to that type of emergency.

Public Health Advisor Soto responded that Emergency Medical Services (EMS), specifically the fire department's EMS units, are currently dispatched to overdose related 911 calls.

Councilwoman Hernandez expressed the opioid crisis should be addressed as a public health issue, not through criminalization. Councilwoman Hernandez advocated for harm reduction, education, and City partnerships to prevent overdose deaths and build lasting, effective solutions.

Dr. Michelle Shiota shared her support of the City's Naloxone program, commending its impact and the Office of Public Health's efforts. She emphasized the need for continued investment in prevention, harm reduction, and treatment strategies, especially those targeting youth. Dr. Shiota also addressed Councilwoman Hernandez's concerns about opioid settlement funds being redirected to the corrections system, noting that while City and county allocations remain unchanged, the shift limits opportunities for state-local partnerships that could enhance public health initiatives.

Councilwoman Hernandez asked Dr. Shiota to briefly share one additional measure, beyond Naloxone distribution, that could help prevent overdoses from occurring in the first place.

Ms. Shiota suggested using mobile outreach units to distribute Naloxone and provide motivational interviewing, helping connect people who use drugs with resources and support for recovery.

Councilwoman Hodge Washington asked whether the City collects demographic information on individuals who received Naloxone before emergency medical personnel arrived.

Ms. Durden confirmed demographic information was collected when EMS arrives on site and available through both the public and internal dashboards used for strategic planning.

Councilwoman Hodge Washington inquired whether there was an increase or decrease in youth receiving Naloxone prior to EMS arrival and asked if any benchmarks exist to track this trend alongside the overall rise in pre-EMS Naloxone administration.

Public Health Advisor Soto shared demographic data was available for individuals who have experienced a suspected overdose, specifically those who have received Naloxone. She noted this data could be shared with the Subcommittee at a later time.

Chairwoman Hodge Washington asked if Naloxone kits were reaching the age group most likely to use substances and requested data to help assess targeting efforts. Chairwoman Hodge Washington also asked for more details on the initiatives to better explain the broader community strategy.

Public Health Advisor Soto highlighted partnerships supporting provider education and peer navigation. Arizona State University's nursing program was training more medical providers to prescribe medications for opioid use disorders, addressing a local shortage. Additionally, a grant-funded program with Phoenix Police aims to send peer navigators, people with lived experience, to overdose calls, helping connect individuals to care immediately.

Chairwoman Hodge Washington emphasized the importance of follow-up after a suspected overdose and asked whether the follow-up was a one-time contact or involves multiple check-ins. Chairwoman Hodge Washington requested more background on how the follow-up process works.

Public Health Advisor Soto shared how Tempe's fire department includes peer navigators on overdose calls. Due to Phoenix's higher call volume, a similar program would need to start as a pilot. Currently, Phoenix is piloting a peer navigation program with the Police Department and has expanded it to other roles like library security and park rangers. She also highlighted Phoenix's eight youth coalitions working on local substance use prevention. She shared these groups partner with schools and communities and can support citywide public health efforts. She also discussed using opioid settlement funds through community proposals, allowing groups like youth coalitions to apply for funding. Lastly, she emphasized strong internal collaboration across City departments, including Fire, Police, Homeless Solutions, and others, to expand harm reduction efforts.

Chairwoman Hodge Washington asked for clarification about the corresponding distribution of Naloxone kits distribution throughout each Council District, asking if the bars should be above the trend line.

Public Health Advisor Soto confirmed the bars should indeed be above the trend line.

Chairwoman Hodge Washington noted the kit distribution in Council Districts Two and Four was noticeably low. Chairwoman Hodge Washington commented this likely does not reflect a lower number of overdoses in those areas and identified it as an area needing improvement, emphasizing that distribution levels should ideally be above the trend line.

Public Health Advisor Soto explained that kit distribution was lower in Districts Two and Four due to fewer City facilities like libraries and senior centers. She shared efforts will focus on expanding distribution locations in those districts and citywide.

Chairwoman Hodge Washington thanked City staff and partners for their work expanding Naloxone access and raising awareness. Chairwoman Hodge Washington noted progress in reducing overdoses and emphasized the importance of continued efforts.

5. City of Phoenix Strategies to Address Homelessness Plan Refresh

Office of Homeless Solutions (OHS) Director Rachel Milne, Deputy Director Scott Hall, and Special Projects Administrator Margaret Adams presented the item.

Chairwoman Hodge Washington asked for confirmation that the subcommittee will receive a follow-up before the item goes to City Council in January 2026.

Director Milne clarified that a revised draft plan will be shared with the subcommittee before it goes to the January Policy session.

Councilwoman Hernandez asked further information about the community court mentioned in the presentation, specifically regarding and potential for expansion.

Director Milne shared additional details about the community court program and noted it has served over 600 individuals with misdemeanor offenses since starting in January 2024.

Deputy Director Hall shared how the community court addresses the overrepresentation of unhoused individuals in the justice system by offering supportive services instead of punishment. He noted it connects participants to housing, treatment, and employment, and has shown strong success in its first year.

Councilwoman Hernandez expressed support for Phoenix's community court and asked about the various partner groups like the Phoenix Community Alliance and the Lived Experience Work Group. Specifically, who was involved and how members were selected.

Director Milne stated the Maricopa Association of Governments (MAG) leads the regional Continuum of Care and organizes various workgroups, including the Lived Experience Work Group.

Councilwoman Hernandez inquired whether MAG would be the appropriate entity to explain how individuals were selected for the Lived Experience Work Group.

Director Milne shared MAG selects workgroup members by connecting with individuals involved in the homelessness system, including service providers and those within the Lived Experience Work Group.

Councilwoman Hernandez asked Director Milne to be connected with the appropriate contact at MAG who can provide more information about how members of the Lived Experience Work Group were identified.

Director Milne stated she would help connect Councilwoman Hernandez.

Councilwoman Hernandez asked how the City was ensuring a service-first approach to homelessness, rather than relying on policing or criminalization.

Director Milne shared how OHS was created to lead with services, not enforcement, and noted the City focuses on daily outreach to connect individuals with support and resources.

Deputy Director Hall shared the City's commitment to a service-first approach and spoke about key strategies including equipping law enforcement with access to services, responding alongside police when needed, prioritizing early outreach, and focusing on sustainable housing to prevent justice system involvement.

Director Milne added how the "no wrong door" policy was recently implemented, allowing public service agencies to bring individuals to key support sites even when at capacity.

Councilwoman Hernandez asked what type of training the Police Department receives to ensure officers understand and implement a service-first approach.

Deputy Director Hall shared a new training video that has been produced for law enforcement.

Councilwoman Hernandez asked for clarifications on police protocols when responding to homeless encampment complaints.

Deputy Director Hall explained the Phoenix Community Action Response Engagement Services (Phoenix CARES) process. He also shared how Police officers were trained to enter cases into the system, which then dispatches outreach teams. Officers also have direct contact with homelessness liaisons assigned to their precincts.

Councilwoman Hernandez shared her support of housing choice vouchers and asked what can be done to continue advocating for it.

Director Milne emphasized the need for additional housing resources, particularly housing vouchers, was a citywide issue.

Councilwoman Hernandez stated her continuous support and advocacy for this initiative. She asked how OHS was engaging with community-led mutual aid groups that support the unsheltered population in Phoenix.

Director Milne confirmed ongoing collaboration with mutual aid groups, including resource support and expanding partnerships at the Safe Outdoor Space and Phoenix Navigation Center.

Councilwoman Hernandez thanked staff for their presentation and work on this important issue.

Councilwoman Stark shared the positive engagement from the Black Mountain Precinct, highlighting the inclusion of OHS liaisons at “Coffee with a Cop” events. She also requested clarification on the improvements mentioned to the Phoenix CARES system.

Deputy Director Hall shared the current efforts aim to make the system more user-friendly and improve communication with residents and across departments.

Councilwoman Stark emphasized the importance of making housing a priority. She also asked how OHS cultivates private partnerships and what role the Council can play in supporting those efforts.

Director Milne welcomed Council support in building private partnerships, noting past success with groups like United Way and Vitalyst, which raised two million dollars to help shelter residents transition into housing. She encouraged identifying scalable projects for future philanthropic support.

Chairwoman Hodge Washington expressed appreciation for the City's efforts to address homelessness and shared personal insights from a ride along with outreach staff. She emphasized the urgent need for more housing resources like City funded subsidies and encouraged greater community involvement and actionable short-term goals.

Director Milne clarified that homelessness was already rising citywide before the dismantling of the encampment near the Human Services Campus. She emphasized that over 800 individuals were offered shelter during the closure, with 85 percent accepting services and many now housed or in safer indoor settings.

Chairwoman Hodge Washington highlighted the importance of community feedback and requested clarification on how the plan aims to improve shelter quality and measure success.

Director Milne explained after focusing on expanding shelter capacity over the past three years, the current priority was improving shelter quality. This includes ensuring all shelters provide consistent case management and individualized exit plans to help residents transition into stable housing.

Deputy Director Hall emphasized improving shelter quality means ensuring safe, welcoming environments with consistent, high-standard services and strong outcomes.

Chairwoman Hodge Washington supported improving coordination with behavioral health and employment services to better serve individuals with higher needs, such as those experiencing chronic homelessness or mental health challenges.

Deputy Director Hall added the importance of connecting individuals to appropriate services, such as behavioral health, substance use treatment, and physical healthcare, before or alongside shelter. He stated the aim was to better train staff in Medicaid eligible services and take a holistic, needs-based approach to care.

Chairwoman Hodge Washington reminded staff of her earlier challenge to develop a top five wish list and asked if they were ready to share.

Director Milne shared their top five priorities. These included expanding rapid rehousing for individuals needing minimal support, increasing permanent supportive housing for those requiring long-term assistance, reinstating youth-specific rapid rehousing programs, enhancing diversion programs to help individuals reconnect with family or secure short-term subsidies, and continuing the Phoenix Works program, which provides daily wages and job opportunities through City beautification projects.

Jeff Spellman expressed his support for the homelessness plan, praising its bold vision, transparency, and improved responsiveness. However, he urged the City to include more specific strategies to address criminal activity associated with homelessness, such as drug use, prostitution, and trespassing, that continue to impact neighborhood safety.

Chairwoman Hodge Washington asked Mr. Betman if he had a specific suggestion for how the department could reduce the negative impacts of homelessness on neighborhoods

Mr. Spellman advocated for separating individuals involved in crime from harmful networks first, then offering support and rehabilitation through back-end services like community courts and jail-based programs.

Deputy Director Hall highlighted the importance of collaboration between communities and City departments, noting that unsheltered homelessness was only a portion of the broader issue, and ongoing efforts like police training aim to connect individuals to services rather than defaulting to arrest.

Chairwoman Hodge Washington thanked the presenters and urged a focus on short term, actionable steps while continuing to build toward long term solutions.

DISCUSSION AND POSSIBLE ACTION

6. 2026-27 Housing and Urban Development Annual Action Plan Process

Neighborhood Services Director Spencer Self, Deputy Director Kim Dickerson, Project Manager Alicia Springs, and Management Fellow Dayana Rosas presented the item.

Councilwoman Hernandez acknowledged the ongoing federal shutdown and asked for updates on potential funding risks, particularly to Community Development Block Grants.

Director Self shared there has been no specific indications of funding reductions in the current plan, but future impacts could change that.

Councilwoman Hernandez asked whether the survey questions had already been developed and what types of questions will be included in the upcoming survey.

Director Self stated the survey aims to identify community priorities and gather demographic data, with consideration given to question placement to improve response.

Councilwoman Hernandez asked what additional outreach efforts were planned to boost survey participation, beyond the in-person and virtual options.

Director Self emphasized that direct outreach, such as presenting at community meetings or working through trusted partners, was most effective in encouraging survey participation.

Councilwoman Hernandez asked which community organizations were being partnered with and how neighborhood leaders were being engaged to ensure they had the opportunity to participate in the survey.

Director Self noted outreach through neighborhood specialists, newsletters, City departments, schools, and partners to engage community leaders and organizations.

Chairwoman Hodge Washington asked how equitable outreach was being ensured for residents without internet access and whether there were alternative ways to complete the survey beyond the online option.

Director Self confirmed printed copies of the survey were made available in both English and Spanish, and staff would input the responses manually to ensure accessibility for those without internet access.

Councilwoman Stark made a motion to approve the item. Councilwoman Hernandez seconded the motion which passed unanimously, 3-0.

CALL TO THE PUBLIC

None.

FUTURE AGENDA ITEMS

None.

ADJOURNMENT

Chairwoman Hodge Washington adjourned the meeting at 11:48 a.m.

Respectfully submitted,

Dayana Rosas
Management Fellow



Authorization to Request a Carryover of Head Start Birth to Five Program Fiscal Year 2024-25 - District 1, 3, 4, 5, 7 & 8

This report requests the Community Services and Education Subcommittee, which serves as the Head Start Birth to Five Program Governing Board, authorize the Human Services Department to submit a carryover request of up to \$2 million from the United States Department of Health and Human Services for the Head Start Birth to Five program. This carryover would move funds from Fiscal Year (FY) 2024-25 into FY 2025-26. Additionally, the report seeks approval to amend contracts and move one-time monies to the Education Service Providers for necessary health and safety items.

THIS ITEM IS FOR CONSENT ACTION.

Summary

The Head Start Birth to Five Program has unspent funds from FY 2024-25 and is requesting permission to carry over up to \$2 million. Specific projects have been identified, and their completion will take place in FY 2025-26 upon approval.

The projects include security system upgrades, repairs and enhancements to buildings and classrooms, fence installation around playgrounds, updating and installing new playground equipment, social and emotional resources for classrooms, and staff development. All projects are allowable under Head Start funding guidelines.

Contract Term

The remaining four years of the five-year contract term are from July 1, 2025, to June 30, 2029.

Financial Impact

The grant funding comes from the United States Department of Health and Human Services. There is no impact to the General Fund.

Concurrence/Previous Council Action

The Head Start Birth to Five Policy Council approved the carryover request of up to \$2 million from FY 2024-25 to FY 2025-26 on June 9, 2025.

Responsible Department

This item is submitted by Deputy City Manager Gina Montes and the Human Services Department.



Head Start Birth to Five Monthly Report - September - Districts 1, 3, 4, 5, 7 & 8

This report provides the Community Services and Education Subcommittee, which serves as the City of Phoenix Head Start Birth to Five Governing Board, with an updated summary of the Head Start Birth to Five Program's financial and programmatic status.

THIS ITEM IS FOR INFORMATION ONLY.

Summary

The Improving Head Start for School Readiness Act of 2007 requires each Head Start Grantee to share monthly information with the Governing Board and Policy Council on program planning, policies, and operations. In compliance with the Act, the Head Start program provides a monthly report on the following areas:

- Fiscal expenditures.
- Enrollment reports.
- School attendance.
- Medical/dental exams.
- Program information summaries.
- Nutrition.
- Child Incident Reports.
- Program Instructions or Information Memorandums.

Fiscal Expenditures

Attachment A shows year-to-date expenditures for the Fiscal Year (FY) 2025-26. The report includes a breakdown of each Education Service Provider, Child Care Partnership, Policy Council, and the administrative support budget.

Enrollment Reports

The Office of Head Start requires programs to report the total number of children enrolled on the last day of each month. At the end of September, the total program enrollment was 2,142 out of 2,209 available slots, which is 97 percent.

For the Head Start Preschool program, all Education Service Providers have now begun the school year. At the end of September, 1,898 out of 1,957 slots were filled, which is 97 percent.

The Early Head Start program, which includes home-based and center-based year-round programming, ended the month with 244 slots filled out of 252, representing 97 percent capacity. The home-based program ended the month with 44 slots filled out of 44 available slots, equating to 100 percent. The center-based program filled 200 out of 208 slots, which is 96 percent. Greater Phoenix Urban League opened two classrooms at Byron Barry Preschool in September. The two classrooms at Cartwright Early Childhood Center are still under construction. The Booker T. Washington Early Child Development Center opened one classroom on their campus in September, and the second classroom is scheduled to open by the end of October. Both Education Service Providers are conducting home visits for children enrolled in unopened classrooms.

Federal Impact on Head Start

Congress extended Federal FY 2024-25 funding levels through FY 2025-26. However, this extension will not include a cost-of-living adjustment.

On July 10, 2025, the Department of Health and Human Services issued a statement designating Head Start as a "federal public benefit" under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. This new interpretation, published in the Federal Register on July 14, 2025, went into effect immediately, but the enforcement has been delayed due to legal actions taken in certain states.

On October 1, 2025, the United States federal government went into a shutdown. Head Start programs have been assured that reimbursements will continue to be paid through the Payment Management System during the shutdown. The Head Start Birth to Five Program requests monthly draws on the 10th of each month.

Full Enrollment Initiative

Early Head Start continues to participate in the initiative due to enrollment below 97 percent in previous months. In September, Early Head Start met the minimum enrollment requirement of 97 percent. This percentage or higher will need to be maintained through February 2026 for Early Head Start to be released from the initiative.

School Attendance

The Office of Head Start sets an annual target for attendance of 85 percent.

Attachment B indicates the year-to-date average attendance through the end of

September. Head Start Preschool was 82 percent, and the Early Head Start Center-Based program was 68 percent.

Medical/Dental Exams

Head Start regulations require all children to have medical and dental exams annually. At the end of September, 1,895 medical and 1,740 dental exams were completed, totaling 3,635 exams. This is illustrated in **Attachment C**. The low numbers are due to the fact that preschool programs were not in session during the month of July. The target goals have been updated to reflect the new enrollment number.

Program Information Summaries

Please see **Attachment D**.

Child Incident Reports

The Head Start Program Performance Standards require programs to submit reports related to any significant incidents affecting program participant health and safety. This includes injuries requiring hospitalization, emergency room treatment, or a doctor's visit. Additionally, significant incidents include inappropriate discipline, potential child abuse or maltreatment, lack of supervision, or unauthorized release of a child. No Child Incident Reports were submitted to the Office of Head Start in September.

Department of Child Safety Reports

All Head Start and Early Head Start staff are required to report suspected child abuse and neglect to protect children and help children and families connect to services. During the month of September, there were no reports made to the Department of Child Safety.

Program Instructions or Information Memorandums

Periodically, the Office of Head Start needs to provide information or programmatic updates to all Head Start Grantees. This is done through Program Instructions (PIs) and Information Memorandums (IMs). PIs provide information or recommendations from the United States Department of Health and Human Services Administration for Children and Families to States, Tribes, grantees, and others. This includes various issues of child welfare that usually result in guidance or policy changes. IMs provide up-to-date information but do not establish requirements or supersede existing laws or official guidance. In September, no PIs were released. However, an IM was issued on September 26, clarifying policy guidance regarding vacant slots in Head Start programs, particularly focusing on vacant slots due to chronic absenteeism. Please refer to **Attachment E** for more details.

Locations

Alhambra Elementary School District, 4510 N. 37th Avenue
Black Canyon KinderCare, 10653 N. 25th Avenue
Cartwright Elementary School District, 5220 W. Indian School Road
Deer Valley Unified School District, 20402 N. 15th Avenue
Fowler Elementary School District, 1617 S. 67th Avenue
Isaac School District, 3348 W. McDowell Road
Laveen Elementary School District, 5601 W. Dobbins Road
Laveen KinderCare, 755 S. 51st Avenue
Murphy Elementary School District, 3140 W. Buckeye Road
Pendergast Elementary School District, 3802 N. 91st Avenue
Phoenix Elementary School District, 1817 N. 7th Street
Riverside Elementary School District, 1414 S. 51st Avenue
Roosevelt Elementary School District, 6000 S. 7th Street
Washington Elementary School District, 4650 W. Sweetwater Avenue
Wilson Elementary School District, 3025 E. Fillmore Street
Council Districts: 1, 3, 4, 5, 7 and 8

Responsible Department

This item is submitted by Deputy City Manager Gina Montes and the Human Services Department.

ATTACHMENT A

Fiscal Expenditures Yr 2 FY25 Head Start Financial Summary Grant 890246 Planned level of Expenditures

Fund Center	Program	FTE	Revised Budget 2025-2026	FY25 YEAR-TO-DATE Expenditures	FY25 Remaining Balance	FY25 YEAR-TO-DATE % Spent
8940050001	HS Administration	12	\$ 3,945,266	\$ 886,914	\$ 3,058,352	22%
8940050004	HS T&TA	-	\$ 325,611	\$ -	\$ 325,611	0%
8940050012	HS Policy Council	-	\$ 45,450	\$ 3,801	\$ 41,649	8%
8940050015	HS Mental Health	4	\$ 549,830	\$ 143,483	\$ 406,347	26%
8940050016	HS Casework Support	67	\$ 6,516,345	\$ 1,741,410	\$ 4,774,935	27%
8940050017	HS Classroom Support	16	\$ 1,976,964	\$ 556,316	\$ 1,420,648	28%
Total City of Phoenix		99	\$ 13,359,467	\$ 3,331,924	\$ 10,027,542	25%
8940051001	Alhambra	-	\$ 4,232,086	\$ 342,896	\$ 3,889,190	8%
8940051003	Booker T Washington	-	\$ 4,331,452	\$ 942,999	\$ 3,388,453	22%
8940051005	Washington	-	\$ 3,719,399	\$ 301,487	\$ 3,417,912	8%
8940051006	Deer Valley	-	\$ 1,913,945	\$ 96,708	\$ 1,817,237	5%
8940051010	Greater Phoenix Urban League	-	\$ 7,415,258	\$ 1,364,182	\$ 6,051,075	18%
8940051116	Fowler	-	\$ 1,340,478	\$ 76,415	\$ 1,264,063	6%
Total Education Service Providers		-	\$ 22,952,617	\$ 3,124,688	\$ 19,827,929	14%
8940505021	Early Head Start Operations Support	52	\$ 5,536,416	\$ 1,685,401	\$ 3,851,015	30%
8940505024	Early Head Start T&TA	-	\$ 161,858		\$ 161,858	0%
8940505025	EHS Deer Valley	-	\$ 1,048,064	\$ 108,133	\$ 939,931	10%
8940505026	EHS Fowler	-	\$ 816,548	\$ 80,524	\$ 736,024	10%
8940505027	EHS Booker T Washington	-	\$ 296,000	\$ 49,964	\$ 246,036	17%
8940505028	EHS Greater Phoenix Urban League	-	\$ 740,000	\$ 67,118	\$ 672,882	9%
Total Early Head Start		52	\$ 8,598,886	\$ 1,991,140	\$ 6,607,746	23%
Subtotal			\$ 44,910,969	\$ 8,447,752	\$ 36,463,217	19%
Grand Total		151	44,910,969	8,447,752	36,463,217	19%
Revenues - PMS			44,910,969	3,785,783	41,125,186	8%

ATTACHMENT B

Percentage of Preschool Attendance		
Target: 85%	YTD Percent:	82%

Goal:

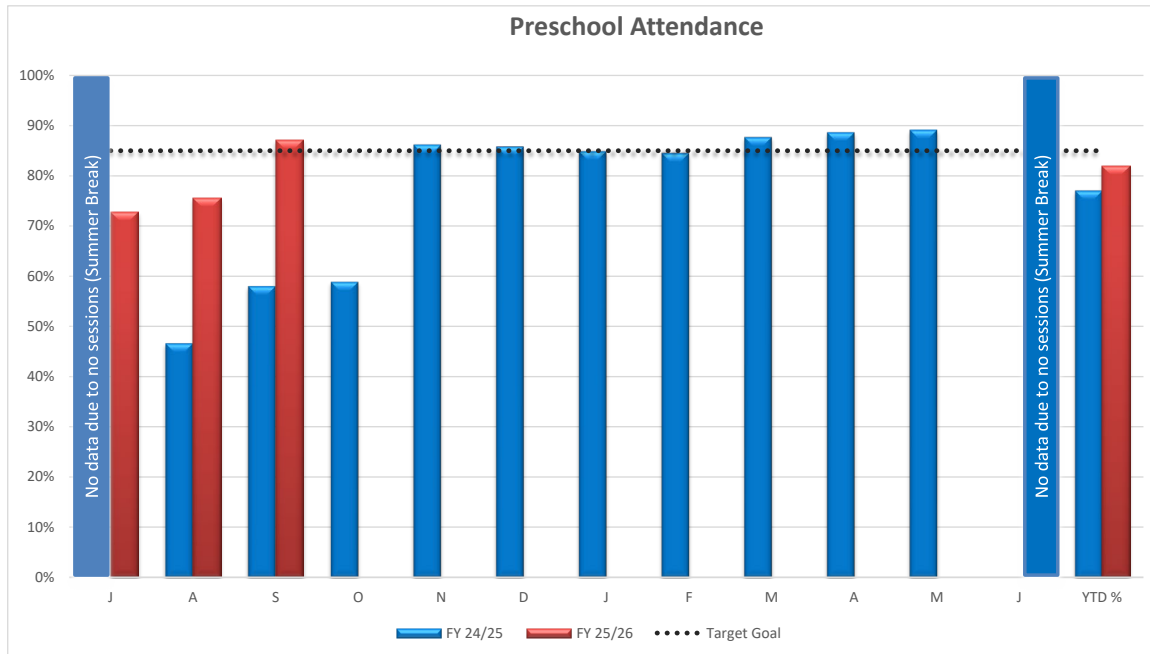
Increase attendance of Head Start Birth to Five children.

Target:

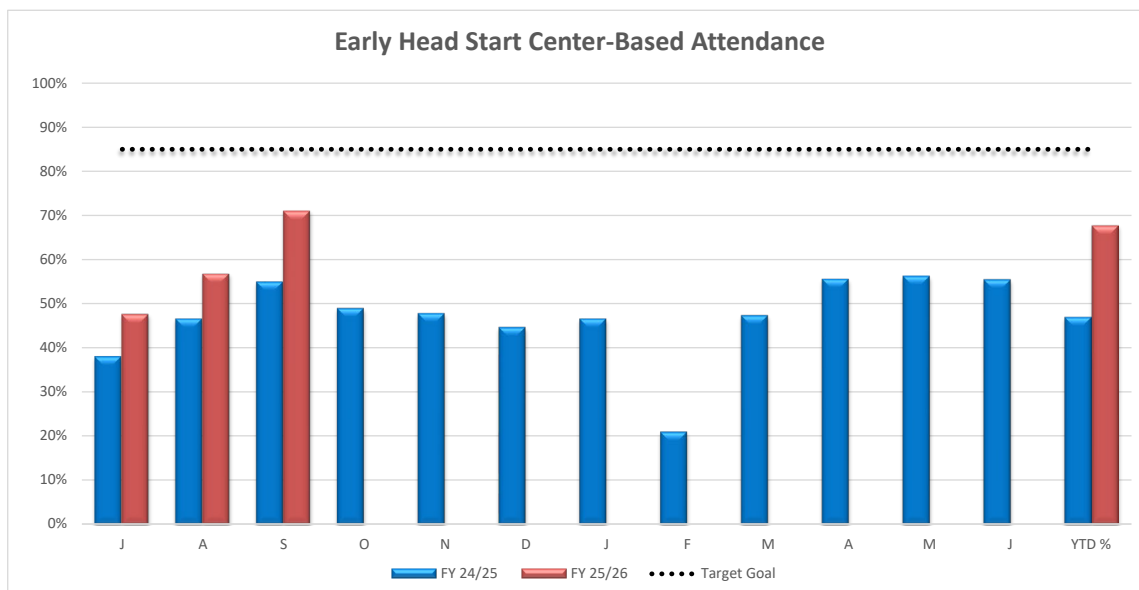
85% of children will attend each day.

Significance:

Attendance is a key factor in being able to get children ready to attend kindergarten.



Percentage of Child Care Partnership Attendance		
Target: 85%	YTD Percent:	68%



ATTACHMENT C

Head Start Birth to Five Medical Exams Completed

Target: 2,209 exams

FY 25-26 Medical Exams:

1,895

Goal:

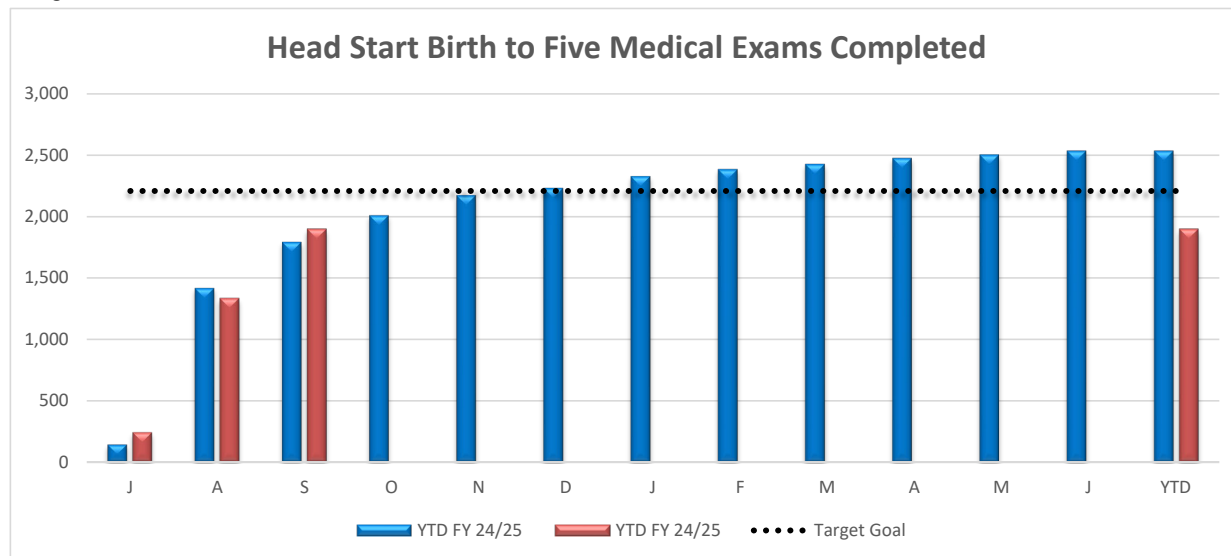
Ensure Head Start Birth to Five children receive necessary medical and dental exams.

Target:

2,209 Medical Exams and 2,209 Dental Exams

Significance:

Head Start Birth to Five children are required to have medical and dental exams as part of the Head Start regulations.

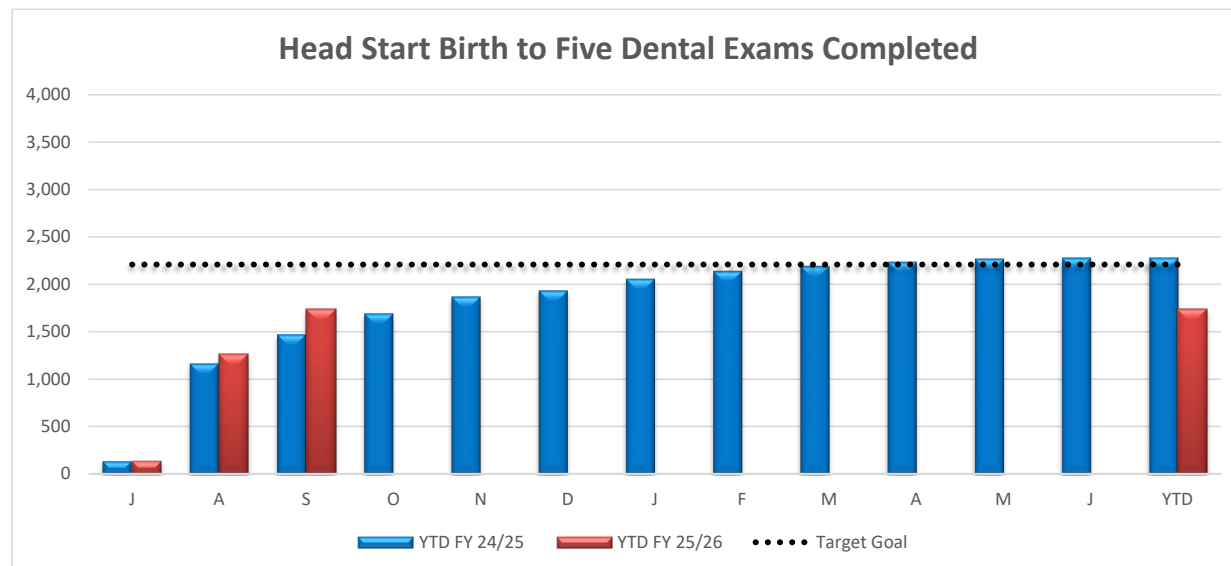


Head Start Birth to Five Dental Exams Completed

Target: 2,209 exams

FY 25-26 Dental Exams:

1,740



ATTACHMENT D

Program Information Summaries

Parent Education

On September 11, fourteen Head Start Birth to Five parents attended a parent education session on guidance and discipline at Maryland Elementary in the Washington Elementary School District. The discussion covered building strong connections with children, using Conscious Discipline strategies, the importance of sleep, viewing behavior as communication, supporting children by naming and validating their feelings, and offering choices to meet their developmental needs. The parents received handouts on establishing healthy sleep routines in both English and Spanish.

Nutrition Grant Award

On September 23, the Head Start Birth to Five Program was notified that their grant application for additional one-time funding to support nutrition and healthy eating was approved. The proposal aims to promote healthy eating through classroom food activities, children's cookbooks for home use, countertop dishwashers for sanitizing bottles and utensils, and parent education on nutrition. The award amount is \$389,263.



Addressing Vacant Slots Due to Chronic Absenteeism in Head Start Programs

 headstart.gov/policy/im/acf-ohs-im-25-06

Addressing Vacant Slots Due to Chronic Absenteeism in Head Start Programs ACF-OHS-IM-25-06

U.S. Department
of Health and Human Services

ACF
Administration for Children and Families

1. **Log Number:** ACF-OHS-IM-25-06
2. **Issuance Date:** 09/26/2025
3. **Originating Office:** Office of Head Start
4. **Key Words:** Vacant Slots; Absenteeism; Enrollment Reporting; Attendance

Information Memorandum

To: All Head Start recipients, including Head Start Preschool, Early Head Start, Early Head Start-Child Care Partnerships, Collaboration Offices, and National Centers

Subject: Addressing Vacant Slots Due to Chronic Absenteeism in Head Start Programs

Information:

This Information Memorandum (IM) clarifies policy guidance on vacant slots in Head Start programs, with a focus on vacant slots due to chronic absenteeism.

Vacancies occur when a child who is enrolled in the program (and has attended previously) no longer attends for an extended period of time. This empty slot constitutes a missed opportunity for the child who is not attending a program and a missed opportunity for an eligible child who is waiting for Head Start services. Programs should work with the family to reinstate attendance or consider the slot vacant and fill it so the maximum number of eligible children can receive Head Start services.

This IM clarifies when Head Start programs should consider a child's slot vacant after long-term absences, underscores the importance of regular attendance, and offers strategies programs can use to enhance access and participation for children and families.

Clarifying Vacant Slot Requirements

The Head Start Program Performance Standards (Performance Standards), specify that a Head Start program must maintain its funded enrollment level and fill any open slots as soon as possible and within 30 days ([45 CFR §1302.15\(a\)](#)). This does not supersede any requirements set by a state on the timely enrollment of children in state funded programs.

The Office of Head Start (OHS) requires a program to report a slot as vacant as soon as the family or guardian communicates that the child is not returning to the program. The program must consider a slot vacant after a child has not attended for a **maximum** of 30 days (which should be counted as 30 consecutive calendar days) and a minimum of three attempts have been made to re-engage the family. Considering the slot vacant means the child will be unenrolled. This action is not considered expulsion as described in [§1302.17](#).

If a program has reserved one or more enrollment slots for children and pregnant women experiencing homelessness or children in foster care, it can hold that slot for 30 days (§1302.15(c)). If a reserved slot is not filled after 30 days, it becomes vacant and must be filled within 30 days. When filling vacant slots, programs are expected to refer to their waiting list, which ranks children according to the program's selection criteria as outlined in [§1302.14\(c\)](#).

The Performance Standards are also clear that programs must implement strategies to promote attendance, including using individual child attendance data to identify children with patterns of absence that put them at risk of missing 10 percent of program days per year. If a child ceases to attend, the program must make appropriate efforts to reengage the family to resume attendance ([§1302.16\(a\)\(3\)](#)). Efforts to reengage the family, at a minimum, include either directly contacting the parent or guardian or conducting a home visit. Each contact or attempted contact with the family must be documented in the child's file or in the program's record keeping system.

Considerations for Exceptions

The Performance Standards outline an expectation of filling any vacancies as soon as possible and within 30 days (§1302.15(a)), and OHS generally considers a slot to be vacant as soon as a family has confirmed the child is not returning to the program (or when a child has not attended for a maximum of 30 days), as described above. However, Head Start programs may develop policies and procedures that allow for limited exceptions to when a slot is considered to be vacant, as there are some unique circumstances that may factor into a child's attendance. Some examples may include: extenuating family circumstances that require a family to travel out of the service area for more than 30 days, a child with an extended illness or requiring hospitalization, a family recovering from a disaster, or a family emergency that might hinder a family's ability to ensure their child is able to get to the program. Programs must document the rationale for allowing the exception either in the child's file or in their record keeping systems.

In extraordinary circumstances, a child may be temporarily suspended from a Head Start program (§1302.17(a)). A temporary suspension may be used only as a last resort when there is a serious safety threat that has not been reduced or eliminated by the provision of interventions and supports recommended by the mental health consultant, and the program needs time to put appropriate services in place. In these instances, a temporary suspension would not count toward the maximum of 30 days before a slot is considered vacant. If a temporary suspension is deemed necessary, a program must help the child return to full participation in all program activities as quickly as possible while ensuring child safety. A program must explore and document all steps taken to address the behavior(s) and supports needed to facilitate the child's safe reentry and continued participation in the program as outlined in §1302.17(a)(4).

If a program unenrolls a child due to chronic absenteeism, OHS encourages programs to allow the family to re-enroll upon return if there is a vacancy to accommodate them. If a program can no longer accommodate the family, it should place the child to the waitlist and help them identify an alternative care arrangement.

Enrollment Reporting Reminders

All Head Start programs must report their monthly enrollment in the Head Start Enterprise System (HSES) by Head Start Preschool and/or Early Head Start program within each grant ([641A\(h\)\(2\)](#)). Together, the following categories make up the total enrolled slots for the month: filled slots, reserved slots, and slots vacant for less than 30 days. Programs can make edits to reported monthly enrollment until a new reporting period opens.

For the purposes of enrollment reporting, a slot that is vacant for less than 30 days is counted toward a program's enrolled slots. Programs may report any slots that were vacant for less than 30 days as enrolled for the month. This allows the programs an opportunity to enroll another family. After 30 days, the slots can no longer be counted as enrolled slots (§1302.15(a)). At the beginning of the program year, all unfilled slots are considered vacant, unless they are reserved, and must be filled as soon as possible.

Importance of Attendance and Preventing Chronic Absenteeism

In Head Start programs, chronic absenteeism means missing 10 percent of program days per year. Chronic absenteeism, even among children in preschool and kindergarten, has been shown to be related to future chronic absenteeism, grade retention, and poor academic achievement.¹

Children living in poverty are two to three times more likely to be chronically absent from school. Chronic absenteeism can have disproportionately negative impacts on children living in poverty because their families often lack access to resources needed to make up for the lost learning.² Establishing a pattern of consistent attendance enhances children's cognitive development, social skills, and long-term educational success.

Strategies to Enhance Program Access and Participation for Children and Families

Head Start programs are required to implement strategies to promote attendance (§1302.16(a)(2)). Here are a few strategies programs can use to address chronic absenteeism and boost regular attendance:

- Building relationships with families to improve communication.
 - Program leadership should promote regular attendance by consistently sending the message that regular attendance is important for children's success. Child and family services staff should reinforce this message by highlighting attendance during parent-teacher conferences and other engagement opportunities, and discussing the benefits of regular attendance with families.
 - Programs should ensure that all staff can build trusting relationships with families. These relationships are the foundation for understanding any challenges a family and child may be facing. As part of these ongoing relationships, staff can have regular conversations with families about the value and benefits of attendance as well as problem solve about specific family circumstances that may be adversely affecting child attendance.
- Programs can engage in community partnerships that support child and family wellbeing and promote child attendance. Health and mental health providers, family support services, housing

organizations, and child care providers with extended days supports can all help programs to promote family and child wellness, stability, and child attendance.

- Programs must track attendance for every child. Programs must also examine barriers to regular attendance, such as access to safe and reliable transportation, and where possible, provide or facilitate transportation for the child if needed (§1302.16(a)(2)(v)).
- Programs must regularly review and analyze individual child-attendance data to identify trends and patterns in absences and develop targeted supports for families. If a program's monthly average daily attendance rate falls below 85 percent, the program must analyze the causes of absenteeism to identify any systematic issues that contribute to the program's absentee rate (§1302.16(b)).
- Programs should use health data to identify trends in children's absences that are related to health and implement strategies that improve attendance. They can help improve attendance using policies and procedures that promote health, reduce the spread of illness, and prevent injury. Programs should individualize supports for each family when absences are related to health, and provide education and resources for family members to prevent illness and injury and identify when a child is sick and needs treatment.
- Programs must use a multidisciplinary approach that facilitates coordination and collaboration between mental health and other relevant program services, including as education, disability, family engagement, and health services. A multidisciplinary approach, including mental health consultants, can help programs identify why there may be chronic absenteeism and support children and families to attain regular attendance.

Thank you for the work you do on behalf of children and families.

Sincerely,

/ Tala Q. Hooban /

Tala Q. Hooban
CAPT, U.S. Public Health Service
Acting Director
Office of Head Start
Resources:

- [ERSEA \[Eligibility, Recruitment, Selection, Enrollment and Attendance\] Insights](#)
- [Addressing Barriers that Limit Attendance](#)
- [Health Services to Promote Attendance](#)
- [Eligibility Resources](#)
- [Enrollment: Creating Systems for Filling Every Seat](#)
- [Making Enrollment Accessible to Families](#)

¹ <https://www.aap.org/en/patient-care/school-health/school-attendance>

² <https://www.attendanceworks.org/chronic-absence/the-problem/>



Federal Programs Update - Citywide

This report provides information regarding the potential impacts to federal funding on City of Phoenix social service programs administered by City departments as well as those administered by outside agencies. The Human Services, Housing, and Neighborhood Services departments collectively deliver critical services that rely heavily on federal resources to support vulnerable residents, affordable housing initiatives, and neighborhood revitalization efforts. Although other programs are administered by agencies outside of City of Phoenix departments, the federal funding of these social service programs may impact operations and affect Phoenix residents. The report will also address the impacts to Phoenix residents.

There is no immediate financial impact associated with this report; however, changes to federal allocations could result in future budget adjustments, service reductions, or reallocation of local resources.

THIS ITEM IS INFORMATION AND DISCUSSION.

Summary

The City of Phoenix receives significant federal funding annually to support programs that address housing stability, community development, and social services for low-income residents. Primary sources include the U.S. Department of Housing and Urban Development (HUD) and the U.S. Department of Health and Human Services (HHS).

Recent or anticipated federal budget adjustments may affect local allocations under these programs. The Human Services, Housing, and Neighborhood Services departments are assessing potential funding impacts to ensure continuity of essential services and compliance with federal and local requirements.

The other social service programs that impact vulnerable residents in Phoenix are Women, Infant, and Children (WIC) program administered by the Maricopa County Department of Public Health and the Supplemental Nutrition Assistance Program (SNAP) administered by the Arizona Department of Economic Security. Recent or anticipated federal budget adjustments may affect local allocations under these programs.

As a result of the suspension of SNAP benefits the following actions have been implemented to support residents:

- City Food Resource & Information Website - Human Services Department (HSD) launched a website with information regarding SNAP, emergency food assistance, and city resources such as senior meal program and housing instability services.
- Social Media Campaign - A social media campaign launched October 30 to connect residents with available food resources.
- Citywide Food Drive - In partnership with St. Mary's Food Bank, a citywide food drive began November 7, inviting both staff and residents to contribute through monetary or food donations at seven City sites and local pantries. Volunteer opportunities are also available.
- Food Education Material Distribution - Food education materials (e.g. healthy meals on a budget) were created and distributed to current City department clients who have been identified as SNAP participants, such as but not limited to Head Start families and HSD Community Service Program clients.
- Senior Center Member Food Box Distribution - Additional food boxes have been requested for distribution at the HSD Senior Centers to support the senior center members who are current SNAP recipients.

Financial Impact

No direct fiscal impact at this time. Future impacts will depend on federal budget allocations and program-specific funding decisions. The departments will provide updates to City Council as federal funding levels are finalized and as program budgets are adjusted accordingly.

Location

Citywide

Responsible Department

This item is submitted by Deputy City Manager Gina Montes and the Human Services, Housing, and Neighborhood Services Departments.



Housing Repair Programs Update - Citywide

This report provides the Community Services and Education Subcommittee an overview of the City of Phoenix Neighborhood Services Department's Housing Repair Programs.

THIS ITEM IS FOR INFORMATION AND DISCUSSION.

Summary

The Neighborhood Services Department (NSD) manages Housing Repair Programs that provide financial assistance to eligible homeowners citywide to preserve naturally occurring affordable housing occupied by low- and moderate-income individuals and families.

These programs provide a benefit by removing health and/or safety hazards, stabilizing critical home systems, and increasing energy efficiency.

Services offered through the Housing Repair Programs and are funded through federal, state, and local grant funds, as described below.

- Owner-Occupied Housing Rehab Program (OOHR) - Stabilizes or replaces critical home systems such as electrical, mechanical, plumbing and roofing. Funding comes from Community Development Block Grant (CDBG) and HOME Investment Partnership entitlement grants from the Department of Housing and Urban Development (HUD).
- Hardship Assistance Program - Brings single family properties into compliance with City codes by fixing exterior violations such as dead trees, broken fences, and façade deterioration. This is a sub-program of OOHR and is also funded by CDBG.
- Weatherization Assistance Program - Assesses a home's energy efficiency for opportunities to reduce the energy consumption and cost of heating and cooling homes and operating appliances. This program is funded by Department of Health and Human Services, Department of Energy, State of Arizona, Salt River Project (SRP), Arizona Public Service (APS), and SW (Southwest) Gas.

- **Lead Safe Phoenix Program** - Remediates and/or abates lead-based paint hazards in homes built before 1978 and are occupied by children under the age of six and/or pregnant women. During Fiscal Year 2024-25, this program was funded by Lead Hazard Control and Healthy Homes funds from HUD.
- **Rental Rehab Program** - Provides funds to improve multi-family residential properties primarily serving tenants with low- and moderate-income in strategic target areas across the City. This program is administered as part of the Housing Phoenix Plan and funded by CDBG program income, when available.

Interested residents are encouraged to learn more and complete a household assessment online at phoenix.gov/NSD or by contacting NSD at (602) 534-4444, option #3.

Responsible Department

This item is submitted by Deputy City Manager Alan Stephenson and the Neighborhood Services Department.



City of Phoenix Housing Department Homeownership Programs and Initiatives Overview - Citywide

This report provides the Community Services and Education Subcommittee an overview of the City of Phoenix Housing Department's and local partners' homeownership programs. These programs prioritize affordability, education, and stability.

THIS ITEM IS FOR INFORMATION AND DISCUSSION.

Summary

A 2024 Phoenix Housing Needs Assessment found that homeownership is out of reach for most Phoenix households. As of July 31, 2025, the median sales price in Phoenix is \$417,633. More than half of Phoenix owner households earn above 120 percent of the Area Median Income (AMI). The City of Phoenix is committed to helping increase homeownership, particularly for households earning less than 80 percent AMI, as homeownership can provide housing stability and a pathway to build generational wealth.

The presentation will include an overview of the City of Phoenix Housing Department's homeownership programs including: Open Doors Down Payment Assistance (DPA) Program, Section 32 Homeownership Program, Section 18 Program, Family Self-Sufficiency program, and the Community Land Trust program.

Collaborating with various partners and learning about similar local programs is essential as it enables staff to share resources such as the Home in Five Advantage, Home in Five Platinum, and AZ is HOME down payment assistance programs administered by the Maricopa and Phoenix Industrial Development Authorities. These programs offer prospective homebuyers the opportunity to purchase homes across Maricopa County, provided they meet eligibility criteria comparable to those of the Housing Department's first-time buyer requirements.

The Housing Department remains dedicated to identifying solutions that enhance affordable homeownership opportunities, partnering with stakeholders to reduce the housing affordability gap, and ensure everyone has a place to call home.

Location

Citywide

Responsible Department

This item is submitted by Deputy City Manager Gina Montes and the Housing Department.