

INTERIM FINDINGS REPORT

Development of
5-Year Strategic System Improvement Plan to
Prevent and End Homelessness in the City of Detroit

Barbara Poppe and associates

The collective for impact

October 2023

Acknowledgements

The City of Detroit Housing and Revitalization Department (HRD), the Homeless Action Network of Detroit (HAND), the Detroit Continuum of Care, and the Barbara Poppe and Associates (BPA) Consulting Team wish to thank all of the people who have participated in this planning process to date and whose expertise and wisdom have informed the information summarized within this Interim Findings Report and the next steps to be implemented, including:

- The dozens of people with lived experiences of homelessness in Detroit who have shared their perspectives, guidance, and recommendations throughout this planning process so far.
- The approximately 100 people who participated in listening sessions facilitated in-person by the BPA Consulting Team in Detroit during July 2023.
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- The organizations who have helped to host focus groups, listening sessions, site visits and other activities.
- The people who have served on the Detroit Project Team and helped inform the design and implementation of planning activities to date.
- And everyone who is serving on the Strategic Plan Oversight Commission to help ensure the success and impact of this planning process and the Strategic System Improvement Plan to be developed.

This Interim Findings Report has been developed by the BPA Consulting Team:

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Purpose of this Interim Findings Report

The partners implementing this planning project are committed to providing regular, public communication and information to keep all partners and stakeholders, including people experiencing homelessness in Detroit, aware and up to date on the status of efforts, areas of focus, emerging issues, decisions being reached, and next steps.

This Interim Findings Report:

- Summarizes all of the planning efforts to date, including findings from focus groups, listening sessions, site visits, interviews with public officials and other leaders, reviews of recent and current initiatives and of governance structures, performance, and funding, and other planning activities.
- Describes the planning structures and activities that are being implemented during the Fall of 2023, culminating in the adoption of the Strategic System Improvement Plan.

The next stages of this planning project will provide opportunities to delve more deeply into topics and issues not yet adequately explored through the process to date, ensuring that planning discussions and strategy decisions reflect the needs, concerns, and guidance of people inequitably impacted by homelessness and/or who may be inequitably served within the homelessness response system, including: people of color; transgender and gender non-conforming people; lesbian, gay, and bisexual people and people who identify as queer or questioning; survivors of domestic and intimate partner violence; survivors of human trafficking; people with disabilities; youth and young adults; women; and others.

Table of Contents

Executive Summary	1
Strategic System Improvement Planning Process	4
Detroit's Homelessness Response System	7
Input and Guidance from People with Lived Expertise	13
Initial Review of Recent and Current Initiatives	16
Initial Review of System Governance, Performance, and Funding	19
On-Site Community Visit	27
 Key Themes from Listening Sessions 	23
Priorities for the Strategic System Improvement Plan	
 Critical Improvements and Transformations 	28
 Systemic Operations and Leadership 	20
 Partnerships and Collaborative Efforts 	
Next Steps and Structures for Planning Process	
 Working Groups 	71
 Community Planning Sessions 	31
 Adoption of the Plan 	
For More Information	
 Appendix A: Initial Review of Recent and Current Initiatives Report 	7.0
 Appendix B: Initial Review of Governance, Performance, and 	36
<u>Funding Report</u>	
Contact Information	

Executive Summary

The City of Detroit Housing and Revitalization Department (HRD), the Homeless Action Network of Detroit (HAND), and the Detroit Continuum of Care (CoC) have come together to establish shared goals, priorities, and actions to prevent and end homelessness in Detroit and strongly recover from the COVID-19 pandemic. The City has engaged Barbara Poppe and Associates (BPA) and its team of consultants, including two Community Consultants with lived expertise of homelessness in Detroit, to provide expert guidance and support for the development of a 5-Year Strategic System Improvement Plan. This team of consultants is working in close coordination with local leaders and stakeholders and facilitating other planning structures comprised of Detroit partners, including the Strategic Plan Oversight Commission (SPOC). This Interim Findings Report: summarizes the planning efforts, input received, and findings to date; identifies eight priorities to be addressed through the next stage of planning activities; and describes the planning structures and activities that are being implemented beginning the Fall of 2023, culminating in the adoption of the Strategic System Improvement Plan.

Planning Process

This planning process is being implemented in two phases. Phase 1: Discovery, Research, and Priority Setting is underway now through December 2023 and to date has featured:

- Robust engagement efforts with people experiencing homelessness, who are being compensated for their time, including both virtual and in-person focus groups and 1-on-1 conversations. To date, 10 virtual focus groups and 3 in-person focus groups have been facilitated, and a total of 62 people have participated, including youth and young adults, participants of shelters and programs for families and individuals, participants of domestic violence shelters, and participants currently housed through Rapid Rehousing or Housing Voucher programs.
- Initial review of recent and current initiatives, including the review of key documents and materials for each initiative and interviews with key points of contact identified by the HRD and partners. The focus of this initial review was on: establishing a baseline understanding of recent and current initiatives; understanding how the community identifies efforts and initiatives to be prioritized; exploring the perceived impacts and benefits of each initiative, and what has helped to support success and impact; identifying expected impacts and benefits that have not been realized yet and what has helped to limit their success and impact; and considering the implications for priorities to be addressed within the Strategic System Improvement Plan.
- Initial review of governance, performance, and funding within Detroit's homelessness response system, including reviewing written governance documentation from the Detroit CoC, interviewing stakeholders to understand perspectives on how well governance structures worked to support strategic planning objectives, and assessed how decision-making groups and practices worked to advance community goals. In addition, BPA consultants reviewed CoC system performance over the past ten years with a focus on overall homelessness prevalence, incidence of new homelessness, length of stay in homelessness programs, and exits to and retention of permanent housing. Finally, BPA team members collected funding and investment information to better understand what sources of funding are supporting different system activities.
- On-site community visit during the week of July 24, 2023, for which the entire BPA Consulting Team was on-site in Detroit and facilitated a wide range of listening sessions, focus groups, site visits and program observations, and meetings and planning sessions, to gather perspectives on strengths and challenges related to current system/program, identify opportunities for improvement, and test emerging priorities.

Phase 1 will culminate in the development and adoption of a five-year Strategic System Improvement Plan. Then Phase 2: Implementation Planning and Support will be implemented from January through June 2024 and will focus on: the launch and facilitation of teams and processes to support successful execution of the Strategic System Improvement Plan; providing guidance and support to

implementation leaders; making adjustments to implementation plans and teams based on early implementation and feedback; and development of recommendations for sustaining and strengthening efforts beyond June 2024.

Priorities for the Strategic System Improvement Plan

The BPA Consulting Team and the SPOC have identified the following eight priorities to be addressed through the next stage of planning activities and through the Strategic System Improvement Plan. These priorities have been developed based upon all of the planning and community engagement activities described within this Interim Findings Report, including direct observation of programs and services in Detroit by the Consulting Team.

Critical Improvements and Transformations

- 1. Critical and profound issues with facilities, programs, and practices, resulting in at times traumatizing experiences for people within shelter programs and people who are unsheltered, must be addressed.
- 2. Rehousing strategies and services, and the utilization of rental subsidies, must be dramatically improved and reorganized in order to support people to successfully exit from homelessness into permanent housing more quickly, efficiently, and stably.
- **3.** Housing supply must be strengthened and scaled to create an expanded availability of quality housing affordable to people at the lowest income levels, and for people exiting homelessness.

Systemic Operations and Leadership

- **4.** System leadership roles must be clearly and collaboratively defined, embraced, and played in order to: drive progress on systemic issues; to strengthen system and program quality, performance, and accountability; and to effectively implement the Strategic System Improvement Plan.
- **5.** System leadership roles must be guided by a clear and coherent system vision and values that focus both on driving reductions in homelessness and on driving progress toward racial justice and equity for all people.

Partnerships and Collaborative Efforts

- **6.** Ongoing and meaningful community engagement processes and dialogues across partners must be implemented and must purposefully and transparently acknowledge, and strive to address, significant trust, power, and equity issues throughout the homelessness response system; most importantly the partnership between the City of Detroit and HAND must be strengthened and become more effective in supporting the community transformation that will be required.
- 7. Collaborative partnerships, grounded in best practices and shared accountability, must be strengthened or developed with a broader range of systems, community partners, and organizations to leverage an expanded range of resources and strategies that can help prevent people from becoming homelessness, address unsheltered homelessness, and support rehousing activities.
- **8.** The community's array of recent and current plans, recommendations, and initiatives are assets that provide powerful opportunities to implement new approaches to partnerships and leadership and should serve as the basis for strategies and activities, alongside new strategies that will be developed, to address these priorities for improving the system.

Please see the Priorities for the Strategic System Improvement Plan section of this Interim Findings Report, beginning on page 28, for more information regarding these priorities.

Next Steps and Structures for Planning Process

In order to drive progress on the priorities described in the previous section, and to identify strategies and activities that will be prioritized within the Strategic System Improvement Plan, the SPOC, with the support of the Consulting Team, will implement three Work Groups:

Work Group 1: System Modeling

Work Group 2: Implementation Framework

Work Group 3: Building Momentum

In addition, the SPOC and the Consulting Team will implement Community Planning Sessions to develop strategies and activities that will drive progress in addressing the following prioritized topics:

Topic 1: Reducing Unsheltered Homelessness

Topic 2: Reimagining Shelter / Interim Housing

Topic 3: Improving Rehousing and Housing Supply

The implementation of these planning structures and processes will delve more deeply into topics and issues not yet adequately explored through the planning efforts to date, ensuring that strategy decisions reflect the needs, concerns, and guidance of people inequitably impacted by homelessness and/or who may be inequitably served within the homelessness response system, including: people of color; transgender and gender non-conforming people; lesbian, gay, and bisexual people and people who identify as queer or questioning; survivors of domestic and intimate partner violence; survivors of human trafficking; people with disabilities; youth and young adults; women; and others.

Please see the Next Steps and Structures for Planning Process section of this Interim Findings Report, beginning on page 31, for more information regarding these Work Groups and Community Planning Sessions.

For More Information

For more information regarding this planning process, please see HRD's <u>Homelessness Strategic Planning Project webpage</u>.

To contact the BPA Consultant Team, please contact the project manager Kourtney Clark at <u>kourtney@poppeassociates.com</u>.

Strategic System Improvement Planning Process

Overview of Planning Project

The City of Detroit Housing and Revitalization Department (HRD), the Homeless Action Network of Detroit (HAND), and the Detroit Continuum of Care (CoC) have come together to establish shared goals, priorities, and actions to prevent and end homelessness in Detroit and strongly recover from the COVID-19 pandemic.

The City has engaged Barbara Poppe and Associates (BPA) and its team of consultants, including two Community Consultants with lived expertise of homelessness in Detroit, to provide expert guidance and support for the development of a 5-Year Strategic System Improvement Plan.

Planning Phases

This planning process is being implemented in two phases.

Phase 1: Discovery, Research, and Priority Setting is underway now through December 2023 and is focused on:

- Facilitation of a Strategic Plan Oversight Commission
- Review and synthesis of prior initiatives
- Review of governance structures, accountability, system performance and system funding and investments
- Onsite engagement, including site visits, listening sessions, focus groups, program observations, and meetings
- Broad community engagement with participants with lived experience, providers, and other stakeholders that may include virtual listening sessions, interviews and/or surveys.
- System modeling to identify and optimize system performance and results
- Development of the Strategic System Improvement Plan
- Design of the initial Implementation Framework
- Communications to support input, transparency, and accountability

Phase 2: Implementation Planning and Support will be implemented from January through June 2024 and will focus on:

- Co-facilitation of launch teams and processes to support successful execution of the Strategic System Improvement Plan
- Provide guidance and support to implementation leaders
- Recommend adjustments to design based on early implementation feedback
- Offer recommendations for sustaining and strengthening efforts
- Communications to support input, transparency, and accountability

Values

The BPA Consulting Team is embracing the following values throughout both phases of the process and within products produced through this consultation, and these values may get adjusted or refined over the course of the planning project:

- Centering equity and justice informed by intersectional analyses, across process.
- Providing multiple pathways for input to ensure all stakeholders, and especially people with current and past experiences of homelessness, feel seen and heard.
- Designing a process that is collaborative, healing, inclusive, and strengthens partnerships and relationships.
- Ensuring the final Plan is centered on people with lived experience, data-driven, actionoriented, built to work and evolve over time, and nimble to respond to the ever-changing dynamics of today's world.
- Establishing metrics and process for program and system improvement that can measure progress over time.
- Identifying and including organizations beyond the defined homelessness assistance system that interact and support people who are at risk of and experience homelessness.

Planning Teams and Structures

Consulting Team

Barbara Poppe and Associates (BPA) has assembled a team of consultants to provide expert guidance, lead community engagement activities, and facilitate the development of the Strategic System Improvement Plan.

This team is comprised of leading national experts and two Community Consultants with lived expertise of homelessness in Detroit and includes:

- Barbara Poppe, serving as the project lead and guiding all elements of the project
- David Dirks, leading equity and justice planning discussions and decisions
- Donna Price and Elijah Earnest, serving as community consultants ensuring the project is guided by local expertise and experiences of the homelessness response system in Detroit.
- Kristy Greenwalt, leading governance and leadership review and implementation planning
- Kourtney Clark, serving as the project manager and supporting equity and justice planning discussions and decisions
- Matt White, leading performance review, funding analyses, and system modeling activities
- Matthew Doherty, leading the development of materials, including the Strategic System Improvement Plan, and other communications activities

This team of consultants is working in close coordination with local leaders and stakeholders and facilitated other planning structures comprised of Detroit partners, including a time-limited Detroit Project Team and the Strategic Plan Oversight Commission.

Detroit Project Team

The Consulting Team facilitated a time-limited Detroit Project Team (DPT) to provide initial guidance, support, and advisory recommendations for the logistics related to the process for development of the 5-Year Strategic Improvement Plan to Prevent and End Homelessness in Detroit. The DPT included representatives from HRD, HAND, the CoC, and housing and services providers active within Detroit's homelessness response system.

The Detroit Project Team provided information and documents, connections to people with lived experience and people working within the homelessness response system, and other guidance and support to help assure the timely implementation of the planning process to meet deadlines. The DPT has concluded its work.

Strategic Plan Oversight Commission

The Consulting Team has also facilitated the Strategic Plan Oversight Commission (SPOC) formed to help guide and make critical decisions for the design of these planning processes. The composition of the 10-member SPOC has been purposefully structured to include:

- 5 participants with lived experience, including representation from families with children, youth/young adults, and single adults/couples, selected by the Advisors Group
- 3 representatives appointed by the Detroit CoC, including expertise on families with children, youth/young adults, and single adults/couples
- 1 representative appointed by HAND
- 1 representative appointed by the City of Detroit

In alignment with this planned representation, the following people are serving on the SPOC:

- DeAndra Matthews, resident with lived experience
- Lydia Adkins, resident with lived experience
- A'Aisha Ahmed, resident with lived experience
- ReGina Hentz, resident with lived experience
- Taura Brown, resident with lived experience (elected SPOC Champion)
- Amy Brown, Detroit CoC representative (elected SPOC Champion)
- Dr. Gerald Curley, Detroit CoC representative
- Julie Schneider, City of Detroit representative
- Sarah Rennie, Detroit CoC representative
- Tasha Gray, HAND representative

The SPOC began meeting in June 2023 and is expected to continue to meet throughout both phases of the planning processes through June 2024 and to play leadership roles within work groups and other activities in support of planning processes to be implemented between September and December 2023.

For More Information

Please see the <u>5-Year Strategic System Improvement Plan Project Description</u> and HRD's <u>Homelessness Strategic Planning Project webpage</u> for more detailed information and to learn about the members of the BPA consulting team.

Please see the <u>Strategic Plan Oversight Commission Charter</u> for more information about the SPOC's roles and processes.

Please see the Next Steps and Structures for Planning Process section of this Interim Findings Report, beginning on page 31, for information regarding Work Groups and community dialogues being implemented in Fall 2023.

Detroit's Homelessness Response System

Sources of this Data and Plans for Future Analyses

The homelessness system and client-served data cited in this section are from existing data and reports submitted to the U.S. Department of Housing and Urban Development, including the FY 2022 (10/1/21 – 9/30/22) Longitudinal System Analysis (LSA) report, the 2023 Point-in-time (PIT) report, and the 2023 Housing Inventory County (HIC).

In the next stage of these planning processes, and especially through the System Modeling activities described below, further analyses of data will be performed, including analyses to identify gaps in existing crisis response and housing and services options, to assess how adequate the supply of existing system resources is for meeting the needs of all people experiencing homelessness, and to project the impact of potential future investments and expansions of the system.

Building upon this System Modeling, the Strategic System Improvement Plan will likely identify further quantitative and qualitative analyses to be prioritized that will continue to strengthen the homelessness response system and to deepen understanding and capacity to meet the diverse needs of people experiencing homelessness, including, people of color; transgender and gender non-conforming people; lesbian, gay, and bisexual people and people who identify as queer or questioning; survivors of domestic and intimate partner violence; survivors of human trafficking; people with disabilities; youth and young adults; women; and others.

People Experiencing Homelessness in Detroit CoC

Homelessness at a Point-in-Time in Detroit

It is estimated that there are more than 1,100 households (more than 1,500 people) experiencing homelessness on any given night in the Detroit Continuum of Care's (CoC's) geographic area, including nearly 950 households (nearly 1,300 people) staying in shelters and transitional housing programs, and more than 200 people counted as experiencing unsheltered homelessness. The Detroit CoC covers the Cities of Detroit, Hamtramck, and Highland Park.

It is important to note that it is widely believed by local partners and stakeholders that these estimates significantly undercount the population experiencing homelessness:

- Due to the challenges of accurately counting people experiencing unsheltered homelessness; and
- Because the estimates do not reflect the unknown number of Detroiters who are staying in abandoned buildings and in other settings for whom accurate counts are not available.

12-Month Prevalence of Homelessness in Detroit

Further, many more people are identified as experiencing homelessness over the course of a year. In FY 2022 an estimated annual total of 5,901 households² (8,537 people):

- Experienced homelessness in Detroit sometime during the course of the year; and
- Were served by a homelessness assistance program, including crisis response programs such as emergency shelter and transitional housing; and/or
- Were served by a housing stabilization services program, such as rapid rehousing or permanent supportive housing programs, during the year.

These households represent about 1.3% of the total general population of 656,867 persons from the U.S. Census 2022 estimates for Detroit, Hamtramck, and Highland Park.

Services Received by Households Experiencing Homelessness

As documented in Table 1 (below), of the nearly 6,000 households who accessed homelessness assistance, some households are served by more than one project type, and:

- Nearly 3,600 households are served in crisis response services such as shelter or transitional housing.
- More than 1,100 households are served by rapid rehousing programs and more than 2,100 were served by permanent supportive housing programs.

While outreach services are a critical part of the Detroit's crisis response, data regarding outreach programs and services are not reported to HUD as part of the LSA report so are not included within the data summarized here.

¹ Estimated number of people in shelters and transitional housing is from January 2023 Point-in-Time (PIT) Count; the count of unsheltered people is from January 2022 PIT Count, the most recent Count of unsheltered homelessness performed.

 $^{^2}$ All homelessness system and client-served data cited in this report are from the FY2022 (10/1/21 - 9/30/22) Longitudinal System Analysis (LSA) report or the 2023 Point-in-time (PIT) report or 2023 Housing Inventory County (HIC). People experiencing unsheltered homelessness who did not receive any homelessness assistance services documented within the Homeless Management Information System (HMIS), or who only received services through outreach programs, would not be included in this estimate.

Table 1: 12-Month Prevalence and Services Received*

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	Households with Children	Single Adult Households	Total Households**	
12-Month Prevalence	1,016	4,863	5,901	
By Program Type				
Crisis Response Programs				
Served in Emergency Shelter and/or Transitional Housing	512	3,057	3,583	
Housing Stabilization Programs				
Served in Rapid Rehousing	305	803	1,140	
Served in Permanent Supportive Housing	302	1,798	2,104	

^{*} From FY22 Longitudinal System Analysis (LSA) report. Note that households may have been served by more than one program type during the FY

Key Demographic Information

A review of demographic data (see Table regarding people experiencing homelessness and being served through the homelessness response system in Detroit reveals the following:

- Black people are overrepresented among the homeless population in Detroit. While Black people make up 78% of the general population, Black people make up 84% of single adults experiencing homelessness and 94% of households with children experiencing homelessness.
- A majority of people experiencing homelessness in Detroit are single adults, and of those adults, 30% are women, 69% are men, and 1% are either transgender, questioning or of no single gender. Future analysis will determine if this representation has been changing..
- Single adults reporting a domestic violence status represent 17% of the adult population, but the rate of reported domestic violence more than doubles for families at 39%.
- Rates of chronic homelessness range between 8% for families and 18% for single adults.
- At least one in five persons experience unsheltered homelessness prior to enrolling in a program.

Table 2: Demographic Characteristics of Persons Served in FY22

Attribute	Single Adults	Households with Children
Female Head of Household	30%	83%
Household members older than 24	88%	28%
Household members older than 55	39%	2%
Head of household is Black/African American	84%	94%
Reporting domestic violence history or currently fleeing	17%	39%
Head of household is chronically homeless ³	18%	8%
Head of household is disabled, but not chronically homeless	55%	41%
Household coming from the streets prior to enrollment	29%	20%

³ Chronically homeless is defined as persons who are disabled and experienced at least 12-months of homelessness.

^{**} Note that Total Households includes some individuals included in both *Households with Children* and *Single Adult Households* and includes some duplication. Also note that Total Households column does not include 12 children-only households or 10 households not clearly defined in the LSA (who are likely Veterans).

Programs within Detroit's Homelessness Response System

Detroit's homelessness response system includes beds and resources designed to meet both the crisis needs of people while they are experiencing homelessness and the longer-term housing and services needed for people to successfully end their homelessness.

Table 3. Housing Inventory Count (HIC), 2023

Inventory Type	Year-Round Beds	Seasonal/ Overflow Beds	Total Beds	Utilization During PIT
Crisis Response				
Emergency Shelter	1,019	179	1,198	89%
Transitional Housing	240	0	240	80%
Safe Haven ⁴	35	0	35	54%
Totals	1,294	179	1,473	
Housing Stabilization				
Rapid Rehousing	726	0	726	100%
Permanent Supportive Housing	2,883	0	2,883	100%
Other Permanent Housing ⁵	257	0	257	100%
Totals	3,866	0	3,866	
GRAND TOTALS	5,160	179	5,339	96%

The Housing Inventory Count (HIC) information in Table 3 above details the number and configuration of *crisis response* resources associated with shelter and transitional housing (but outreach services are not included in the HIC), and *housing stabilization* resources associated with rapid rehousing and permanent supportive housing designated for persons who are experiencing homelessness. Detroit's homelessness response system includes:

- Nearly 1,300 year-round crisis response beds, including more than 1,000 emergency shelter beds.
- **Nearly 3,900 year round permanent housing beds**, including more than more than 700 rapid rehousing beds and nearly 2,900 permanent supportive housing beds.
- At the time of the annual Point-in-Time Count, **utilization rates of beds totaled 96%**, including 54% of Safe Haven beds, 80% of Transitional Housing beds, and 89% of Emergency Shelter beds.

See the call-out box on the next page for information about how the City of Detroit has been expanding affordable and supportive housing opportunities within the community.

⁴ A Safe Haven is a term used to define homelessness assistance programs that provide crisis response services to hard-to-reach persons with severe mental illness who came from streets and have been unwilling or unable to participate in more traditional emergency shelter and support services.

⁵ Other Permanent Housing means housing designated for persons experiencing homelessness but not PSH housing (e.g. EHV)

Progress in Expanding Affordable and Supportive Housing Supply

The City of Detroit has been implementing strategies and resources to expand the supply of affordable and supportive housing options within the community.

In 2018, the City released a multifamily affordable housing strategy to preserve and develop affordable housing, focused on: preserving all atrisk regulated affordable housing; improving naturally occurring affordable housing or converting such housing to lightly regulated affordable housing), and creating new units.

The City has undertaken a number of initiatives in support of these goals and recent accomplishments have included:

Raising private funding for the new Detroit Housing for the Future Fund focused especially on creating housing for households earning between 40% to 60% of Area Median Income (AMI) or less.

Creating the Detroit Preservation Partnership with local and state partners, and developing an expanded pipeline for affordable housing.

Preserving 9,480 affordable units and constructing 2,547 affordable units (complete or under construction) since 2015.

Of the new units completed or under construction, 1,693 are affordable to households with incomes at 60% or less of AMI, including 442 units affordable to households with incomes at or 30% of AMI or below. Those units include 266 units that are or will serve as Permanent Supportive Housing within the homelessness response system.

Homelessness Response System Performance Measures

System Performance Measures (SPMs) are a set of standard metrics applied to all CoC systems funded by U.S. Department of Housing and Urban Development (HUD). The Detroit CoC system submits SPM results on an annual basis to HUD. Detroit's most recently submitted SPMs reveal the following:

- The median length of time households experience homelessness is 69 days.
- Prior to moving into homeless programs, people residing in emergency shelters, safe havens, transitional housing, and other permanent housing experienced a median time of homelessness of 203 days.
- Over a two-year look back period, SPMs reveal that 21% of all households who exited homelessness to permanent housing ultimately returned to homelessness.
- Between 73% to 77% of households who experience homelessness are "first time homeless,"
 meaning that there is no prior record of enrollment in a homeless assistance program for that
 household within the previous 2 years.

Table 4: System Performance Measures Summary, FY22

	System Performance Metric	Result
SPM 1.1a:	Length of Time Homeless in emergency shelter and transitional housing <i>average</i>	109 days
SPM 1.1a:	Length of Time Homeless in emergency shelter and transitional housing <i>median</i>	69 days
SPM 1.1b:	Length of Time Homeless in emergency shelter prior to housing move in average (i.e. of those who achieve a permanent housing exit)	471 days
SPM 1.1b:	Length of Time Homeless in emergency shelter prior to housing move in <i>median (i.e. of those who achieve a permanent housing exit)</i>	192 days
SPM 2:	Rate of return to homelessness for all persons who exited to permanent housing and returned in less than 6 months (0-180 days)	10%
SPM 2:	Rate of return to homelessness for all persons who exited to permanent housing and returned from 6 to 12 months (181-365 days)	5%
SPM 2:	Rate of return to homelessness for all persons who exited to permanent housing and returned from 13 to 24 months (366-730 days)	6%
SPM 2:	Rate of return to homelessness for all persons who exited to permanent housing and returned within 2 years	21%
SPM 5.1:	Number of persons entering emergency shelter, safe haven, and transitional housing with no prior enrollments	3,395
SPM 5.1:	Number of persons entering any program within the CoC with no prior enrollments	3,881

Further Analysis through System Modeling

As described later in this Report, a key element of the next stage of planning processes is System Modeling activities, including a deeper analysis of data regarding the extent and scope of homelessness and regarding system utilization. A time-limited System Modeling Work Group is designing and directing the analysis process and focusing on these key questions:

- What is the best and highest use of each existing system resource (i.e. bed, unit, service slot)?
- How adequate is the supply of existing system resources for meeting current needs of different populations experiencing homelessness?
- What number of additional resources are necessary to optimize the homelessness system and achieve key performance measures? What incremental changes should be prioritized?
- What are the estimated per unit costs needed to address system gaps which, when met/addressed, will contribute to system optimization?

Input and Guidance of People with Lived Expertise

Overview

On behalf of the BPA Consulting Team, David Dirks and Kourtney Clark have led robust engagement efforts with participants experiencing homelessness, who are all being compensated for their time, including both virtual and in-person focus groups and 1-on-1 conversations. To date, 10 virtual focus groups and 3 in-person focus groups have been facilitated, and a total of 62 people have participated in focus groups or 1-on-1 conversations, including youth and young adults, participants of shelters and programs for families and individuals, participants of domestic violence shelters, and participants currently housed through rapid rehousing or housing voucher programs. In addition to the 62 individuals who participated in these forms of engagement, members of the consulting team also interacted with people staying in shelters and receiving other services during the onsite visit in July 2023.

Input and guidance provided through these discussions is summarized below, organized by the following themes: Accessing the Homelessness Response System of Care; Shelter Access, Quality, and Client Experiences; Finding and Securing Housing; and Training for Staff.

Accessing the Homelessness Response System of Care

Themes within Guidance Provided

- Some providers provide high-quality services, but not all providers are able to offer a robust set of services and people needed to seek assistance from multiple programs and organizations.
- Participants reported that word of mouth or calling around to find help was the primary way that people learned about how to access the homelessness response system or found any forms of help.
- Participants report experiencing very long wait times to access Coordinated Access Model (CAM)⁶ or shelters and also that wait times for receiving referrals were very inconsistent, ranging from it taking 5-10 minutes to get a referral and calling a provider, to 5 months being in a shelter before receiving a CAM referral for housing.
- Participants also report being treated rudely when seeking assistance from CAM, shelters, and/or other programs and also expressed frustration with the paperwork involved with CAM.
- Mistrust of some faith-based providers among some community members was reported.

Illustrative Quotes from Participants

"While experiencing unsheltered homelessness, sleeping in my car with my children, and riding the bus, a lady provided me with a number to call CAM coordinated entry. It was hard to get through to CAM – was told to call back in the morning."

"I stayed at three shelters (total of 9 months) before entering Coordinated Entry."

"Called CAM and had to wait 2 – 4 days to get access to a shelter. The CAM Staff was rude over the phone, shelter staff was rude. I had to show up to get assistance."

"When I first called CAM, I had traveled 45minutes to a DV shelter, and it was full. I called CAM back and waited 8 hours for help."

"I asked for services every day but was told by case managers that they didn't have any services."

"When my son got really sick, my provider was extremely helpful by taking me to the doctor, they provided mental health resources, transportation, therapy, and legal help to name a few."

⁶ The <u>Coordinated Assessment Model (CAM)</u> is the Coordinated Entry System for Detroit, Hamtramck and Highland Park connecting people experiencing homelessness with access to shelter and housing resources as they are available.

Shelter Access, Quality, and Client Experiences

Themes within Guidance Provided

- Participants reported that it is often difficult to access shelter, that the response to people calling for help is inconsistent, that there is a lack of clarity about the availability of beds and resources, and that it is especially hard to find shelter for someone under 18 years old.
- Participants had many concerns and complaints regarding the physical environments and facilities in shelters, noting that:
 - Some family shelter participants reported staying in basements with bugs and vermin, and some shelters have mold and leaking water.
 - Some participants reported that shelters have 10 families in one room, some shelters do not have beds for people to sleep in, and adults and children sometimes have to sleep in chairs.
 - Some also reported that shelters are not fully accessible for people with disabilities and that requests for reasonable accommodations are not handled consistently.
- Participants expressed concerns with the professionalism of staff, inequitable treatment of clients, and inappropriate relationships among staff and between staff and clients.
- Participants also expressed concerns regarding selective application of rules and policies, as well as inconsistent policies across programs, such as:
 - Some reported that shelters require participation in prayer regardless of clients' wishes or preferences.
 - Participants with jobs reported that they were sometimes treated unfairly if they didn't meet curfew or attend some required meetings.
- People reported significant levels of violence in the shelter system and that staff are not trained in providing help when participants have mental health crises.
- Participants also reported that most shelters are not friendly or welcoming – and can be dangerous – for LGBTQ+ individuals.
- People also expressed desire for shorter shelter stays and for quicker access to permanent housing and also noted that some shelters are too far away from jobs and essential services.

Illustrative Quotes from Participants

"Had to physically show up for shelters to get help."

"If not present by time provided, then shelter space or bed was given away, even if late by 5 minutes."

"I am in a wheelchair and have a disabled child, we have to leave the shelter every day and wait in the neighborhood regardless of the weather until it re-opens in evening. The shelter doesn't have transportation that is wheelchair accessible so I am on my own with my child."

"We are staying in the emergency shelter overflow in chairs or cots in the basement."

"I was racially profiled, however there was a good case manager that stayed and stuck with me through finding housing."

"I walk with a cane and was placed on the 2nd floor, there is no elevator in the building and I had to walk up and down for food."

"Gay and Trans people are getting beat up in shelters. I want to build a new shelter for gay and Trans people."

"We need better wait times to get into housing – no one should stay in shelter for more than 6 months. We need more housing support for folks."

"There wasn't always bus tokens or transportation available, so I had to quit my job because it was difficult for me to get to work within the curfew limitations."

"I called CAM and was directed to a shelter immediately. I was asked some questions, and was told there was a bed for me, I was picked up with my belongings and was taken to a shelter. Within my 4th week, I was provided with RRH voucher through my program, and from March to June I was able to find a place and now I have a section 8 voucher."

Finding and Securing Housing

Themes within Guidance Provided

- Market forces are making finding housing difficult for many low- or no-income participants.
- Many participants indicated that they did not receive any help with locating housing or that housing resource information they were provided (lists, pamphlets, numbers of landlords) were outdated.
- Some participants stated that they received helpful assistance from providers in finding, locating, and securing housing, experiences that seemed to be connected to a special funding program.
- Others expressed that the only services that are provided is assistance getting on the voucher list, but there are not any mental health, employment and transportation resources.
- Overall, people believe their success in finding and securing housing is driven by their personal efforts. Some people reported it took them 1 – 2 years to find housing, while others found housing within 3 months.
- Participants indicated that there is a need for better landlords and for strategies to encourage landlords to work with rapid rehousing participants and housing voucher holders.
- People also expressed that many people who move into housing do not receive assistance with the basic necessities to make it a livable home, such as furniture, mattresses, linens, basic kitchen item, supplies needed for infants and children, and other essentials.

Illustrative Quotes from Participants

"When I received my RRH voucher I got no help from [program], I was given a housing resource from 2019 in 2022."

"They buy bulk public records, and the information is not accurate."

"I got wind of my shelter closing so I started looking for housing myself, no one at the shelter was working to re-shelter or rehouse me."

"I am still searching for housing after 6 months with my voucher."

"There are no housing navigation resources."

"No one talked to me about deposits required for water, power or the responsibility to pay those bills. I am scared of losing my housing or not being able to maintain."

"I've been here for 2 years, and have been waiting for a voucher for 2 years."

Training for Staff

Themes within Guidance Provided

- Overwhelmingly participants have noted the need for staff to be trained more, including customer service training.
- Other staff training topics prioritized include training that will support:
 - Implementation of trauma informed care.
 - Shifting of programs' cultures.
 - Shifting away from abusive behavior, including mental and verbal abuse.
- Participants also noted that more staff should be hired.

Illustrative Quotes from Participants

"There are some good programs, but terrible execution; they need better training and customer service."

"Staff need more empathy towards participants."

"The staff here, put clients to work such as cleaning, but there is no compensation."

Initial Review of Recent and Current Initiatives

Overview of Review Process

On behalf of the BPA Consulting Team, Matthew Doherty led an initial review of recent and current initiatives, including the review of key document and materials for each initiative and interviews with key points of contact identified by the Housing and Revitalization Department (HRD) and partners.

This initial review of these initiatives did not represent an evaluation or assessment of these initiatives; and the focus of the review was not on determining the "correctness" of decisions or choices made in their design and implementation.

Rather, the focus of this initial review was on: establishing a baseline understanding of recent and current initiatives; understanding how the community identifies efforts and initiatives to be prioritized; exploring the perceived impacts and benefits of each initiative, and what has helped to support success and impact; identifying expected impacts and benefits that have not been realized yet and what has helped to limit their success and impact; and considering the implications for potential priorities to be addressed within the Strategic System Improvement Plan.

Initiatives Included within Review

Eleven recent and current initiatives were included within this initial review:

- Coordinated Access Model (CAM) Transition (Transition completed, implementation ongoing)
- Youth Homelessness Demonstration Program (YHDP) (Implementation ongoing)
- Built for Zero (BFZ)
 (Implementation ongoing)
- Detroit's Housing Justice Roadmap (Report completed, no active implementation)
- C4 Racial Equity Initiative (Implementation ongoing)

- 2020 Gaps Analysis (Report completed, no active implementation)
- City/CoC PSH Standards and Capacity Building (Implementation ongoing)
- Community Standards for Shelter (Implementation ongoing)
- Sheltered Housing Placements (Implementation ongoing)
- Mental Health Co-Response Partnerships (Implementation ongoing)
- Landlord Engagement (No active implementation)

The summary report provided as <u>Appendix A</u> provides the following information for each initiative included within this initial review:

- The relevant documents reviewed
- A summary of key findings from the review of the initiative
- A summary of the initiative's key strategies or recommendations
- The identification of potential implications for the Strategic System Improvement Plan
- The identification of questions and issues that may merit further exploration

Consultants' Key Findings

In addition to identifying potential implications for the planning process for each initiative included with this review, the BPA Consulting Team's key findings and assessments included:

- Despite intentions to focus on racial equity, design and implementation of most initiatives do not seem to be deeply focused on issues of equity and justice.
- Further, initiatives specifically focused on racial equity have stalled or struggled. The Housing Justice Roadmap's Vision has been adopted by the CoC and is perceived as still having relevancy and currency in the community and this planning process should consider how that Vision is reflected within, or helps structure, the Strategic System Improvement Plan. The Roadmap's conceptualization of Phase 2 of Housing Justice Roadmap has not been implemented to date and the C4 Racial Equity Initiative has not taken hold in the community as of yet.
- Some stakeholders also indicate that other equity issues and concerns, such as for people with disabilities, LGBTQ+ populations, women, families with children, survivors of domestic and intimate partner violence, survivors of human trafficking, and others are not being adequately addressed through current activities and initiatives.
- People interviewed indicate that system leaders and decision-makers are more aware of need to listen to and be guided by people with lived expertise than previously true, but improvements still needed for truly living the value of centering and being led by people with lived expertise.
- Several initiatives or planning processes have struggled at the implementation stage. System leaders may need to strengthen their partnerships with one another and the collaborative prioritization of efforts, and can look for opportunities to purposefully apply practices from "bright spot" efforts that are widely seen as successful and impactful (e.g., YHDP, Built for Zero) to other efforts.
- Implementation of some efforts has been impacted by lack of clarity regarding roles, leadership and implementation responsibilities, and accountability. Further, the capacity of, and staffing support currently provided to, existing structures (e.g., CoC Committees or Work Groups) may not be adequate for such structures to truly lead implementation activities
- Review of initiatives indicates that community needs to strengthen all elements of homelessness response system, including but not limited to:
 - Improving approaches to outreach and engagement to people experiencing homelessness, including people with mental health challenges, and re-examining the roles and partnerships within those efforts;
 - Improving the quality of shelters and how people are treated when seeking or participating in shelters;
 - Ensuring the effective transition of Coordinated Assessment Model (CAM), which brings opportunities to address concerns with system, but can expect that there will be bumps as implementation of new structures and partnerships continues;
 - Strengthening landlord engagement strategies, housing navigation and housing lease-up strategies;
 - Expanding supply of deeply affordable permanent housing units and rental subsidies; and
 - Strengthening partnerships with mainstream agencies and systems who need to play roles within the homelessness response system.
- Quality and consistency of programs, and of how people are treated within programs, is a significant issue. Work to identify and communicate standards for shelter and permanent supportive housing have been initiated, but accountability for achieving and supporting quality across the entire system not clearly defined or embraced. Quality of programs, and capacity to

- serve people with more complex needs, are significantly impacted by funding levels, including services funding in permanent supportive housing.
- Past planning efforts have produced many recommended strategies and activities, many of which have not been acted upon yet. These recommended strategies and activities should be cross-walked to find common elements, identify gaps in recommendations or in how subpopulations' needs are addressed, and should be used as source of ideas and recommendations for Strategic System Improvement Plan.
- The 2020 Gaps Analysis, and required "System Mapping" for the C4 Racial Equity Initiative should be further considered and understood for the system modeling activities to be implemented for this planning project and there may be opportunities to align efforts and information.

For More Information

Please see <u>Appendix A for BPA's Initial Review of Recent and Current Initiatives Report</u> for more detailed information regarding the review process, the initiatives included, and findings.

Initial Review of Governance, Performance, and Funding

Overview of Review Process

On behalf of the Consulting Team, Matt White and Kristy Greenwalt led an initial review of governance, performance, and funding within Detroit's homelessness response system.

- BPA Consulting Team members reviewed written governance documentation from the Detroit CoC, interviewed stakeholders to understand perspectives on how well governance structures worked to support strategic planning objectives, and assessed how decision-making groups and practices worked to advance community goals.
- In addition, BPA Consulting Team members reviewed Continuum of Care (CoC) system performance over the past ten years with a focus on overall homelessness prevalence, incidence of new homelessness, length of stay in homelessness programs, and exits to and retention of permanent housing.
- Finally, BPA Consulting Team members collected funding and investment information to better understand what sources of funding are supporting different system activities.

Across all reviewed elements, BPA Consulting Team members identified a lack of equitable representation or leadership structures that contribute to greater inclusion and centering of people with lived experience. Further, Detroit is one of the largest US cities with a majority Black/African American population (77%), and homelessness disproportionately impacts Detroit citizens who are Black; 85% of the homeless population is Black. However, because Black Detroiters make up most of both the general population and the homeless population, additional and more granular analysis will be needed to assess where racial disparities exist.

Consultants' Key Findings Regarding Governance

Detroit's homelessness system leadership, strategic decision making, oversight and management responsibilities are distributed among a partnership of four key entities: general CoC membership, the CoC Board and Executive Committee, City of Detroit Housing and Revitalization Department (HRD), and the Homeless Action Network of Detroit (HAND). Roles of each were not clear, sometimes to the entities themselves, but also to other partners. While HRD and HAND oversee ESG and CoC duties adequately, it was found that some important system oversight and management functions are not expressly assigned to any one entity, and governance partners are not working in concert or alignment towards a shared set of common community goals and objectives. Stakeholders report a lack of defined or effective system leadership across the homelessness system.

The BPA Consulting Team's other key findings and assessments included:

- Compliance with HUD funding requirements seems to be the driving force behind how the CoC is structured and functions, versus thinking more expansively about the range of resources and partnerships needed to impact homelessness in Detroit and using the Board as a cross-sector alliance of partners to drive system transformation.
- There is little tangible evidence that a priority focus on equity and inclusion of people with lived experience of homelessness are driving system decision-making and protocols to support accountability.
- Among stakeholders interviewed, there was a lack of clarity on the community's or CoC's vision and priorities for the homelessness response system, or who holds responsibility for advancing the vision.
- The CoC Charter does not provide sufficient clarity as to what decisions and actions are the responsibility of each major membership partner – CoC General Membership, CoC Board, CoC

Executive Committee; and roles related to CoC management – HAND, City of Detroit/HRD. In particular, many stakeholders expressed confusion about the role of the Board versus General Membership, indicating that they didn't understand which decisions could be made by the Board and which had to go to General Membership.

- Major partners active in some aspect of CoC governance and staffing (CoC Membership, CoC Board and Executive Committee, HAND, and City of Detroit HRD) seem to often work in siloes without coordination, alignment, or collaboration with other system partners.
- Lack of fully executed MOUs among CoC Board and entities designated to fulfill staffing functions for the CoC has resulted in role confusion and the lack of accountability mechanisms.
- The CoC has established numerous CoC committees, ad hoc work groups and other planning bodies. These groups do not always have sufficient clarity about their purpose/charge within the larger scope of system objectives and priorities, nor clarity about their ability to make independent decisions or advance strategic actions of the CoC. Further, the lack of dedicated backbone staffing across committees and work groups has inhibited progress, with work often stalling and failing to move out of committee.
- HAND may not have all the resources needed to effectively support backbone functions for the CoC and the community's efforts to prevent and end homelessness.
- A number of providers and clients signaled a lack awareness of or adherence to system grievance procedures, suggesting that additional training, messaging, and monitoring may be needed to ensure grievance procedures are followed by providers and serve as an effective vehicle to remedy challenges and problems experienced by clients.
- HAND conducts CoC management tasks with a focus on information collection and dissemination, public input, and other administrative tasks. The community has not explicitly empowered HAND to act as a system leader in identifying strategic opportunities for the system, analyzing options, and facilitating decision-making toward execution of those options. When HAND has tried to step into this role in the past, some stakeholders report that HAND has experienced backlash.
- City of Detroit HRD is perceived as managing projects without transparency or clear communication about long-term goals, contributing to lack of awareness and distrust of the City's long-term strategy or planning objectives.
- Various departments within the City of Detroit are engaged in addressing homelessness but there doesn't appear to be a clear process to coordinate these activities within the Detroit homelessness response system.
- System partners report that the Detroit homelessness system via HAND has relatively accurate, timely and complete system data, but data are not always immediately available or regularly used for system oversight, management, and monitoring activities.
- HRD and HAND's apparent inability to work through disagreements and differing perspectives consistently at the leadership level has had ripple effects throughout the community, leading to a larger environment of divisiveness and distrust. Some stakeholders identified that racial inequities throughout the system and the larger community, and elements of white dominant culture (which can be defined by characteristics or norms that include power hoarding, fear of open conflict, lack of transparency, transactional goals and relationships, defensiveness, and expressions of white fragility, among other characteristics and norms),⁷ have historically undermined collaboration and that intentional work to heal divides is needed.
- The Michigan State Housing Development Authority (MSHDA), the Michigan Department of Health and Human Services (MDHHS), and the Detroit Housing Commission (DHC) are critical partners who seem to be missing from the planning table.

⁷ See <u>White Dominant Culture & Something Different</u> worksheet for one description of some of the norms of white dominant culture.

Consultants' Key Findings Regarding Performance

With the exception of median length of time homeless, the BPA Consultant Team's assessment is that performance on key system-level indicators appears to have trended in a positive direction over recent years:

- Point-in-Time homelessness has declined from 2,473 persons in 2014 to 1,280 in 2023, but local stakeholders do not have high levels of confidence in this data and also indicate that there are many people who are not included within this data, such as significant numbers of people living in abandoned homes.
- 12-month prevalence of sheltered homelessness has declined 48% from FY15 to FY22, but more analysis is needed to understand the reasons for this trend, for example if a reduction in inventory or HUD's encouragement of converting transitional housing programs to other models are contributing factors.
- The percentage of first-time homeless among all people experience homelessness has remained relatively constant at 71% throughout the 8-year period from FY15 to FY22.
- During the period FY15 to FY22 exits from the homelessness system to permanent housing have improved from 45% to 55%.
- During the 5-year period (FY18 to FY 22) returns to homelessness from a successful permanent housing exit have held constant at about 20%. This comports with national averages from similar size communities during the same period.
- The median length of time people experienced homelessness in shelters and/or safe haven programs essentially doubled from 35 days to 69 days from FY15 to FY22.

It is important to note that system data can sometimes mask trends happening at the population or program level, and information gained during the Consultant Team's site visit revealed some potential discrepancies that will require further exploration through the next activities of the planning project.

Consultants' Key Findings Regarding Funding

Based on information provided by HRD and HAND, the majority of public resources supporting Detroit's homeless response system comes from federal sources, with less than 5% of public funding coming from state or local revenue. HRD and HAND identified nearly \$98M in funding appropriated/allocated in 2023, however, more than half of this is one-time money, meaning that ongoing funding for the system is closer to \$50M.

The BPA Consulting Team's other key findings and assessments included:

- Neither HRD nor HAND were able to provide estimates on funding available for tenant-based subsidies flowing through the Detroit Housing Commission (DHC) or the Michigan State Housing Development Authority (MSHDA). During BPA Consulting Team's on site visit, stakeholders reported that significant resources were available, particularly through MSDHA. This discrepancy raised questions about who within the homeless response system is coordinating with these partners and actively planning for efficient use of these resources.
- While improvements to system coordination, performance, and efficiency can drive reductions to overall levels of homelessness in Detroit, the community will likely need to identify additional resources to continue driving change over time. Communities of any size, but especially large urban areas, plateau quickly without state/local investments, given how much of Federal funding goes towards renewals of existing programs rather than toward expansion of capacity.
- Neither HRD nor HAND were able to provide information on total program budgets (vs. award amounts) as part of this analysis. As a result, it was not possible to identify the amount of

private/philanthropic resources supporting the system. It was also not possible to gain a clear understanding of average cost/bed or cost/unit across individual programs to assess the level of uniformity across programs within the continuum.

For More Information

Please see <u>Appendix B for BPA's Initial Review of System Governance, Performance, and Funding Report</u> for more detailed information regarding the review process, the initiatives included, and findings.

On-Site Community Visit (July 2023)

Summary of Activities During Community Visit

During the week of July 24, 2023, the entire BPA Consulting Team was on-site in Detroit and facilitated a wide range of listening sessions, focus groups, site visits and program observations, and meetings and planning sessions, to gather perspectives on strengths and challenges related to current system/program, identify opportunities for improvement, and test emerging priorities.

Listening Sessions

- The Consulting Team facilitated seven listening sessions, with a total of approximately 100 participants, for people working within the homelessness response system, and people with lived experience of that system, including sessions focused on:
 - Single adults and unsheltered people
 - Youth and young adults
 - Families with children
 - Front line staff
 - Prevention and diversion
 - Racial justice
 - Continuum of Care (CoC) members
- See below for more information regarding these Listening Sessions.

Focus Groups

- Supplementing virtual focus groups that had already been held, the Consulting Team facilitated three in-person focus groups with people with lived experience, including groups focused on; men experiencing homelessness; women experiencing homelessness; and Veterans experiencing homelessness.
- A total of 35 people participated in these in-person focus groups.
- Input and recommendations from these focus groups has been incorporated into the Input from People with Lived Experience section earlier in this report.

Site Visits & Program Observations

 The Consulting Team participated in seven site visits and program operations, including programs focused on outreach activities, shelter for families, shelter for adults, and shelter for youth.

Meetings & Planning Sessions

- The Consulting Team facilitated more than fifteen meetings and planning sessions with representatives from a diverse range of organizations, departments, collaboratives, and elected officials, including:
- Mayor's Office
- Strategic Plan Oversight Commission (SPOC)
- City Councilmembers
- Housing and Revitalization Department (HRD)
- Homeless Action Network of Detroit (HAND)
- Department of Transportation
- Department of Neighborhoods
- Health Department
- Veterans Leadership Committee
- Detroit Housing Commission
- Detroit Wayne Integrated Health Network
- General Services Department

Key Findings from Listening Sessions

Design of the Listening Sessions

For most of these Listening Sessions, the participants were divided into small groups twice and were asked to focus on assigned discussion questions. One representative from each group assumed the role of facilitator and another person assumed the role of reporter and was asked to record key themes that emerged through the discussions on Harvest Sheets that were then provided to the BPA Consulting Team.

The first discussions were focused on identifying the strengths, weaknesses, and areas of opportunities for improvement within the homelessness response system, and participants were asked to discuss some of all of the following questions:

- What is working well about the community response to homelessness? What do you think are the most significant accomplishments over past four years?
- How did the COVID-19 pandemic impact the community response to homelessness? What changes were made that should be considered for continuation or expansion?
- What are the biggest community challenges to addressing homelessness in Detroit?
- What new strategies should the community explore for adoption or adaptation for local replication? What promising partnerships that should be scaled up?
- What bold goals and priorities should be considered for strategic investment of community resources?
- What are the most important changes in how the community addresses homelessness that should be considered?

The first discussions were focused on consideration of the emerging priorities that had been developed by the BPA Consulting Team and previously discussed with the Strategic Plan Oversight Commission, with discussions structured to help the BPA Consulting Team understand: whether the priorities resonated with Detroit stakeholders; how they reflect the experience of system partners and people with lived experience of homelessness; and how they might inform the community's ongoing strategic planning work. The eight (8) emerging priorities shared with participants were:

- Detroit's homelessness response system includes many people people with lived experience, public and private sector leaders and staff - with expertise and strong intentions for advancing progress and change.
- 2. People with lived expertise of Detroit's homelessness response system report that they experience the system and many of its programs and services as not helpful, not responsive to their needs or concerns, and even abusive and traumatizing.
- 3. Focus on racial equity and the leadership of people with lived expertise are not truly centered or fully embraced across all elements of the work.
- 4. Most elements of homelessness response system (e.g., outreach, shelter, coordinated entry, PSH) need strengthening, and while organizations are tackling many of these issues, the impact of those efforts are not clear yet.
- 5. There is a pattern of lack of follow-up and efficient implementation activities across a variety of initiatives and efforts.
- 6. The community lacks a clear and coherent system vision that drives and structures priorities and efforts within its response to homelessness.
- 7. System leadership roles are not being played by anyone, either independently or collaboratively, contributing to ineffective system management and other issues.

⁸ The discussion with Continuum of Care members was facilitated by the BPA team as a full group discussion, but focused on the same kinds of issues and questions.

8. There are significant trust and partnership issues across and throughout the system that limit progress and impact of efforts – and that have major implications for development and implementation of Strategic System Improvement Plan.

Key Themes from Listening Sessions

The BPA Consulting Team reviewed and discussed the information provided through the Harvest Sheets from the Listening Sessions and identified several key themes that cut across many of the group discussions. Overall, the eight (8) emerging priorities (see above) shared with participants resonated with participants and were largely confirmed by participants, including many participants identifying the lack of a clear vision for the system as being a significant issue.

Recent Progress, Accomplishments, & Improvements

- Several positive elements within the homelessness response system were identified, including the coordination and partnerships that are underpinning the Youth Homelessness Demonstration Program initiative and the efforts to address and end Veteran homelessness.
- Some participants identified the infusion of funding in response to the COVID-19 pandemic as a positive development in recent years, providing people with greater access to services and housing.
- Some participants also identified that the response to the COVID-19 pandemic featured collaboration, communication, flexibilities, and innovations that were strengths that could be built upon, and that the COVID-19 response also helped demonstrate how fast some efforts could be accomplished.
- Some participants also identified more authentic engagement with people with lived experiences of homelessness as a significant area of progress in recent years as an area of recent progress; but other participants identified these efforts as needing significant enhancement within the homelessness response system.
- Some participants also identified the strengthening of the Homeless Management Information System (HMIS) and the quality and use of data to drive decisions within the system, as particular areas of improvement in recent years.

System Leadership, Partnerships, & Coordination

- Many participants expressed concerns regarding trust, collaboration, and accountability across partnerships and throughout the system, and some participants indicated that system leaders need to seek and better understand the perspectives and recommendations of people working within programs and need to do more to ensure that staff and clients have access to the information that they need.
- There were differing perspectives on the roles and capacity of HAND as the Lead Agency for the CoC, but many participants identified that greater capacity and stronger collaborative system leadership was needed in order for the CoC and partners to be able to drive highly-prioritized progress and change within the homelessness response system.
- Participants also noted that the CoC needs more guidance and support to strengthen its operations and more firmly establish its role within the homelessness response system and that there is a lack of knowledge and awareness regarding

- what the CoC is, what it is working on, and what it has accomplished.
- Participants also indicated that provider capacity and staffing issues, including staff pay and compensation, were major challenges for quality of housing and services programs and for ability of organizations to be able to partner, collaborate, and share information.
- Some participants expressed interest in more regular networking opportunities and regularly scheduled opportunities for people working within programs to be able to both learn and gather information and to provide input on strategic priorities and directions.
- Although the discussions did identify several areas of strength and recent improvements and accomplishments, the general consensus among participants seemed to be that the current coordinated system is not working well and does not effectively address the crises that people are experiencing.
- Participants discussed challenges with emergency shelter options, including:
 - Poor conditions within shelter facilities, including overcrowded and inappropriate shelter environments;
 - Training needs for shelter staff;
 - Lack of adequate services to address people's crisis needs; and
 - Need for more services and supports to help people exit shelters to permanent housing.
- While the Coordinated Assessment Model (CAM) was seen by some participants as a valuable and positive development the ability of the community to respond systemically and consistently to people and their needs, there were many concerns expressed by participants about the current design and operation of the CAM, and many different perspectives on what the roles of CAM within the system were supposed to be, but some of these concerns may be addressed through the transition of CAM operations, which is being done with awareness of these kinds of concerns.
- Participants identified many service needs they feel are not being effectively addressed, including:
 - Homelessness prevention strategies and resources;
 - Access to behavioral health care services for people with mental health and substance use service needs;
 - **Transportation supports** necessary to help people access services and employment;
 - Lack of furniture and household items for people moving into permanent housing; and
 - Need for flexible funding to address individualized needs
- Participants identified major challenges in identifying and securing housing for people exiting homelessness, impacted by many factors, including:

Quality of Programs & Services

- Lack of adequate and consistent housing navigation services:
- Challenges with identifying and partnering with landlords willing to rent to people experiencing homelessness:
- Systemic barriers due to lack of documents, histories of evictions, poor credit histories, income requirements, and other barriers;
- Lack of an adequate supply of affordable, high-quality units within the market; and
- Need for **strengthening housing first approaches** across the system.
- Participants reported uneven experiences with, and inconsistent perceptions about, housing programs and resources available within the system; for example, some participants indicated that use of Housing Choice Vouchers for people experiencing homelessness was very effective and efficient while others described extremely long waiting times for vouchers and major challenges in securing housing with vouchers.

The BPA Consulting Team and the SPOC have used the findings from these community visit activities, and findings from focus groups, the review of recent and current initiatives, and the initial review of system governance, performance, and funding, to identify the emerging priorities for the Strategic System Improvement Plan that are described within the next section of this Interim Findings Report.

Priorities for the Strategic System Improvement Plan

Based upon all of the planning and community engagement activities described within this Interim Findings Report, the BPA Consulting Team and the Strategic Plan Oversight Commission (SPOC) have identified the following eight priorities to be addressed through the next stage of planning activities, and through the Strategic System Improvement Plan, organized into the following themes:

- Critical Improvements and Transformations
- Systemic Operations and Leadership
- Partnerships and Collaborative Efforts

Critical Improvements and Transformations

While all elements of the homelessness response system in Detroit need strengthening, and the impact of current improvement efforts are not clear yet, three elements of the system must be prioritized for not just improvement, but transformation.

- 1. Critical and profound issues with facilities, programs, and practices, resulting in at times traumatizing experiences for people within shelter programs and people who are unsheltered, must be addressed.
 - People with lived expertise of the homelessness response system report that they experience the system, and many of its programs and services, as not helpful, as not responsive to their needs or concerns, and even as traumatizing, and this is most especially true of shelter programs and services. While there are efforts underway to develop community standards for shelter programs, there is a need for more urgent, immediate strategies to improve shelter facilities and programs, greatly improve the treatment of people in shelters, and ultimately reimagine and transform the community's approach to sheltering people. Some of the interactions with people who are unsheltered are related to law enforcement responses and "sweeping" activities, which can make it more difficult to connect people to services and housing options through which they can receive assistance and end their homelessness.
- 2. Rehousing strategies and services, and the utilization of rental subsidies, must be dramatically improved and reorganized in order to support people to successfully exit from homelessness into permanent housing more quickly, efficiently, and stably. The community lacks core elements of a coordinated, purposeful system for rehousing people, including: there is no comprehensive landlord engagement system; housing navigation services are poorly defined and implemented at nowhere near the scale of need; and services aligned with rapid rehousing and permanent supportive housing programming are inadequate for the needs of many participants, including for people with behavioral health care needs and other people with disabilities. While housing vouchers were reported to be widely available, the ability for these vouchers to be used was hampered by a lack of affordable, quality units and landlords willing to accept the vouchers which was compounded by a lack of housing navigation supports. Further, while the transition of the Coordinated Access Model (CAM) system brings opportunities to address concerns with coordinated entry and rehousing strategies, it can be expected that there will be challenges created by that transition.
- 3. Housing supply must be strengthened and scaled to create an expanded availability of quality housing affordable to people at the lowest income levels, and for people exiting homelessness.

Rehousing strategies cannot succeed without an adequate supply of units that are affordable to people exiting homelessness. All sectors reported that while there are many rental units that could be used for re-housing, the units owned by landlords with smaller portfolios often do not

meet basic housing quality standards and the owners don't have the funds to make the repairs that are needed. In recent years, affordable housing financing programs offered by the City of Detroit have been increasing the supply of deeply affordable and supportive housing units, but the supply of such units will need to be significantly increased, both to prevent homelessness and to create the options needed for people who are exiting homelessness. Some reinvestment and development activities are perceived as removing naturally affordable units from the local market or displacing people who are using "abandoned" buildings for their shelter. It will also be necessary to ensure that adequate and appropriate services are aligned with new housing options, including permanent supportive housing options, and that permanent supportive housing units are effectively targeted to people who most need those services and opportunities.

Systemic Operations and Leadership

The response to homelessness in Detroit is conceptualized and described as a "homelessness response system," and there are many people, including people with lived experience, public and private sector leaders and staff, with expertise and strong intentions for advancing progress and change. The community must, however, make progress in key areas in order to truly operate as a system, with strong leadership, that can continuously strengthen and scale efforts to prevent and end homelessness.

- 4. System leadership roles must be clearly and collaboratively defined, embraced, and played in order to: drive progress on systemic issues; to strengthen system and program quality, performance, and accountability; and to effectively implement the Strategic System Improvement Plan.
 - Currently, governance expectations and U.S. Department of Housing and Urban Development (HUD) requirements may be being met, but no one is truly leading the system, either independently or collaboratively. HAND's roles are primarily focused on managing processes, but does not seem to be tasked with the system leadership role or to be charged with playing true "backbone organization" roles with a collaborative system. The CoC's Committee structures are compliant with HUD requirements, but do not play system leadership roles and do not seem to be able to consistently drive initiatives or progress. HRD is expanding its roles, but the department is not leading the entire system either and its approaches to partnerships have been perceived as not truly collaborative.
- 5. System leadership roles must be guided by a clear and coherent system vision and values that focus both on driving reductions in homelessness and on driving progress toward racial justice and equity for all people.
 - The community lacks a clear and coherent system vision that drives and structures priorities and efforts within its response to homelessness. Despite intentions to focus on racial justice and equity for all people, and to support the leadership of people with lived expertise, processes and actions do not appear to truly center or embrace those intentions across all elements of the work, some racial equity-focused efforts have stalled or struggled, racial justice and redressing other inequities (such as for people with disabilities, LGBTQ+ populations, women, families with children, survivors or domestic and intimate partner violence, and others) do not seem to be a leading or centered focus within other initiatives or efforts. Leaders could begin by working collaboratively with partners and stakeholders to revisit, and, if necessary, revise the community Vision that was developed through Detroit's Housing Justice Roadmap, and ensure that specific strategies and activities are identified to realize that Vision: Detroit's response to homelessness is led by people with lived experiences who reflect the community; Members of the community experience homelessness rarely, and when they do, it's for a short time and only once; Housing security will be achieved by keeping people in their homes, developing affordable options, and helping to recover generational wealth; Housing and services are rooted in dignity.

Partnerships and Collaborative Efforts

Developing and operationalizing such systemic leadership, and becoming more effective at implementing initiatives and change efforts, will not be possible without addressing issues that are impeding the formation and implementation of healthy, effective, and truly collaborative partnerships.

- 6. Ongoing and meaningful community engagement processes and dialogues across partners must be implemented and must purposefully and transparently acknowledge, and strive to address, significant trust, power, equity, and accountability issues throughout the homelessness response system; most importantly the partnership between the City of Detroit and HAND must be strengthened and become more effective in supporting the community transformation that will be required.

 Mistrust, lack of role clarity, imbalances and inequities in power and influence, and lack of shared accountability are experienced and reported throughout the community's entire homelessness response system by people experiencing homelessness, by front line staff, by program managers and directors, and by people with leadership roles. Failing to address such issues will undermine efforts to strengthen system leadership, improve the implementation of initiatives and change efforts, and implement the Strategic System Improvement Plan. The next phase of this planning process can serve as a starting place for such ongoing engagement, including with further with people with lived expertise and with people working across programs and services.
- 7. Collaborative partnerships, grounded in best practices and shared accountability, must be strengthened or developed with a broader range of systems, community partners, and organizations to leverage an expanded range of resources and strategies that can help prevent people from becoming homeless, address unsheltered homelessness, and support rehousing activities.
 - Truly collaborative partnerships must be developed with important systems and organizations involved in responding to homelessness in Detroit, and existing partnerships must be strengthened. Such partnerships must be focused on best practices, on developing clear measures of success, and implementing shared accountability practices. For example: collaborations with behavioral health and public health systems are underdeveloped and are failing to address the needs of people with disabilities; partnerships implementing outreach activities are sometimes too focused on law enforcement and "sweeping" activities, rather than on creating pathways out of homelessness for people who are unsheltered; and many other systems and organizations do not see themselves as having meaningful roles within the community's efforts to prevent and end homelessness. There are bright spots within the community's partnership efforts, including the Built for Zero effort addressing Veteran homelessness and the Youth Homelessness Demonstration Program partnerships, but even those initiatives have struggled to bring all of the right partners and leaders into their efforts.
- 8. The community's array of recent and current plans, recommendations, and initiatives are assets that provide powerful opportunities to implement new approaches to partnerships and leadership and should serve as the basis for strategies and activities, alongside new strategies that will be developed, to address these priorities for improving the system.
 - In recent years, community partners and stakeholders have invested significant time, efforts, and expertise into many different planning processes and initiatives, and many people are still highly invested in those efforts. Implementation efforts have often stalled, due to lack of clarity on roles and responsibilities, lack of leadership and accountability, lack of concrete implementation strategies and structures, difficulties with prioritization, lack of capacity to execute recommendations and activities, and many other factors. The range of efforts, the wisdom of plans and recommendations, and people's commitment to trying to drive progress despite the challenges, however, are extremely valuable assets that the Strategic System Improvement Plan should reflect, build upon, and empower.

Next Steps and Structures for Planning Process

In order to drive progress on the priorities described in the previous section, and to identify strategies and activities that will be prioritized within the Strategic System Improvement Plan, the Strategic Plan Oversight Commission (SPOC), with the support of the BPA Consulting Team, is implementing three Work Groups:

Work Group 1: System Modeling

Work Group 2: Implementation Framework

Work Group 3: Building Momentum

In addition, the SPOC and the BPA Consulting Team are implementing three Community Planning Sessions to develop strategies and activities that will drive progress in addressing the following prioritized topics:

Topic 1: Reducing Unsheltered Homelessness

Topic 2: Reimagining Shelter / Interim Housing

Topic 3: Improving Rehousing and Housing Supply

The implementation of these planning structures and processes will delve more deeply into topics and issues not yet adequately explored through the planning efforts to date, ensuring that strategy decisions reflect the needs, concerns, and guidance of people inequitably impacted by homelessness and/or who may be inequitably served within the homelessness response system, including: people of color; transgender and gender non-conforming people; lesbian, gay, and bisexual people and people who identify as queer or questioning; survivors or domestic and intimate partner violence; survivors of human trafficking; people with disabilities; youth and young adults; women; and others.

Key information regarding each of these Work Groups and Community Planning Sessions is provided on the following pages.

WG1: System Modeling

Will inform work of other Work Groups, and will especially help address Priorities #1, #2, and #3

Purpose & Intent

System Modeling is an analytical process that assesses data about the extent and scope of homelessness and system utilization, applies a set of planning assumptions regarding the highest and best use of resources, and develops various models of system reorganization which projects optimized system performance where all persons resolve their housing crisis in the most efficient and effective manner possible. System Modeling will enable the CoC and the community's homelessness response system to anticipate future demand for housing and services, configure different options for services and housing resources, model the impacts of various policy considerations, and enable intentional and thoughtful design of the homelessness response system based on a set of data-informed execution strategies.

Scope

The System Modeling Work Group is designing and directing the analysis process necessary to undertake such System Modeling activities, and supporting the process of gathering data, organizing data to enable analysis, and providing expert opinion and guidance to prioritize and direct uses of key homelessness system resources, including but not limited to Coordinated Access Model (CAM), Outreach, Homelessness Prevention (HP), Emergency Shelter (ES), Diversion/Rapid Resolution, Transitional Housing (TH), Rapid Rehousing (RRH), Permanent Supportive Housing (PSH), Housing Choice Vouchers (HCVs), and Other Permanent Housing (OPH). The System Modeling Work Group is focusing on these key questions:

- What is the best and highest use of each existing system resource (e.g., bed, unit, service slot)?
- How adequate is the supply of existing system resources for meeting current needs of different populations experiencing homelessness?
- What number of additional resources are necessary to optimize the homelessness system and achieve key performance measures? What incremental changes should be prioritized?
- What are the estimated per unit costs needed to address system gaps which, when met/addressed, will contribute to system optimization?

Composition

This Work Group is comprised of two Co-Chairs drawn from the Strategic Plan Oversight Commission (including at least one person with lived experience of homelessness), two staff people from HAND, two staff people from HRD, and two people with lived experiences of homelessness, and Matt White and Kristy Greenwalt from the Consulting Team. Additional members with relevant expertise may be added at the discretion of the Co-Chairs.

WG2: Implementation Framework

Will especially address Priorities #4, #5, #6, and #7 & will impact implementation of all of Plan

Purpose & Intent

To prepare for plan launch in January, this workgroup is charged with determining how to address gaps, challenges, and weaknesses identified in the community's existing leadership, governance, and decision-making protocols to pave the way for plan implementation and more active, coordinated system management.

The Implementation Framework Work Group is focused on the following sets of questions:

• Implementation Structure. What is the best structure to support Plan implementation? Are there structures beyond the CoC that could be created to oversee implementation of the plan? What agencies/partners critical to implementation are missing from the table? What is needed to grant the steering body (whether existing or new) the needed authority to advance plan implementation? What committees and work groups are needed to support plan implementation? How will decisions be made within this framework?

Scope

- System Leadership and Backbone Staffing. Which organization (or interagency team) will assume responsibility for strategic leadership and active system management? What does this mean (and what does it not mean)? What documentation or agreements are needed to ensure the team has the needed authority? What additional staff positions/resources will be needed to support this work? What mechanisms will be used to support accountability for organizations in designated roles?
- **Funding Alignment.** How will funders of various program models/interventions coordinate to ensure funding is aligned to support key system priorities? How will funders support the backbone functions that are needed to implement the Plan?

Composition

This workgroup is to be comprised of seven or nine people overall, including: two Co-Chairs drawn from the SPOC (including one person with lived experience of homelessness); HRD senior leadership; HAND senior leadership; the current CoC Board Chair or Vice Chair, and three or four other current or recent CoC Board members (Lived Experience Advisors, provider representatives, philanthropic/funder representatives), as needed to ensure an odd number of work group members. Kristy Greenwalt, David Dirks, and Elijah Wright from the BPA Consulting Team is supporting this work. Additional members with relevant expertise may be added at the discretion of the Co-Chairs.

WG3: Building Momentum

Will identify strategies relevant for ALL other Priorities and directly address Priority #8

Purpose & Intent

In recent years, community partners and stakeholders have invested significant time, efforts, and expertise into many different planning processes and initiatives and many people are still highly invested in those efforts. This Work Group is valuing this range of efforts, the wisdom of plans and recommendations, and people's commitment to trying to drive progress as valuable assets that will be reflected and built upon within the Strategic System Improvement Plan, especially strategies and activities that will build momentum for addressing the priorities described within this Interim Findings Report.

Scope

The Building Momentum Work Group is reviewing strategies, recommendations, progress, and challenges from recent and current initiatives, plans, and reports and will identify and prioritize strategies and activities that should be sustained or strengthened and that will build momentum for the implementation of the Strategic System Improvement Plan. Key elements of the Work Group's activities include:

- Reviewing the Initial Review of Recent and Current Initiatives Report prepared previously by the BPA Consulting Team (see <u>Appendix A</u>)
- Determining which recent and current initiatives are included within the Work Group's efforts
- Reviewing and discussing strategies and activities identified within prioritized recent and current initiatives for possible inclusion in Strategic System Improvement Plan
- Finalizing list of strategies and activities for recommended inclusion in Strategic System Improvement Plan

Composition

This Work Group is comprised of two Co-Chairs drawn from the Strategic Plan Oversight Commission (including at least one person with lived experience of homelessness) and will engage people directly involved in recent and current initiatives, including staff from HRD, HAND, and people with lived experiences of homelessness, and is being supported by Matthew Doherty and Donna Price from the BPA Consulting Team. Additional members with relevant expertise may be added at the discretion of the Co-Chairs.

Community Planning Sessions

The Consulting Team is supporting SPOC to implement Community Planning Sessions addressing the following topic areas and strategy questions. Each Planning Session is expected to be led by two representatives of the SPOC and will engage staff from HRD and HAND, other interested participants, and people with lived expertise.

Reducing Unsheltered Homelessness

Will directly address
Priorities #1 and #6 and will
likely identify strategies
relevant for Priorities #2, #3
and other Priorities

Key strategy questions:

- What strategies should be refined or undertaken to reduce unsheltered homelessness?
- How should these be prioritized?
- What types of goals and metrics should be developed?
- What community partners and resources should be engaged?

Reimagining Emergency Shelter / Interim Housing

Will directly address
Priorities #1 and #6 and will
likely identify strategies
relevant for Priorities #2, #3
and other Priorities

Key strategy questions:

- How can the community implement recommendations from the <u>Reimagining Interim Housing Project</u> to transform approaches to sheltering people?
- What strategies should be undertaken to transform approaches to sheltering people experiencing homelessness?
- How should these be prioritized?
- What types of goals and metrics should be developed?
- What community partners and resources should be engaged?

Improving Re-Housing and Housing Supply

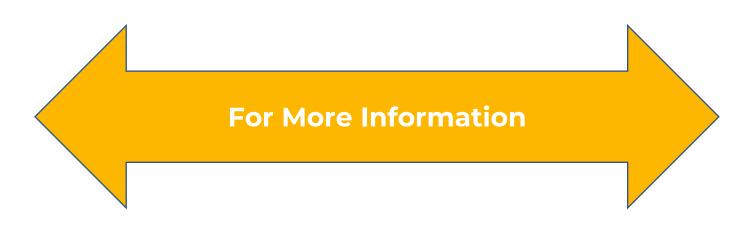
Will address Priorities #2, #3 and #6 and will likely identify strategies relevant for other Priorities

Key strategy questions:

- What strategies should be undertaken to increase rehousing and improve housing navigation?
- What strategies should be undertaken to increase access to and the supply of affordable and permanent supportive housing?
- How should these be prioritized?
- What types of goals and metrics should be developed?
- What community partners and resources should be engaged?

Adoption of the Plan

The planning activities performed by the Work Groups and through the Community Planning Sessions will culminate in the development of a five-year Strategic System Improvement Plan. That Plan is expected to be reviewed, approved, and adopted by the Strategic Plan Oversight Commission.



Please see additional information in the following BPA Consulting Team reports provided as Appendices and available at the following links:

Appendix A:

Initial Review of Recent and Current Initiatives Report

Appendix B:

Initial Review of Governance, Performance, and Funding Report

Contact Information

To contact the BPA Consulting Team, please contact the project manager Kourtney Clark at kourtney@poppeassociates.com.

Please also see HRD's Homelessness Strategic Planning Project webpage.