# Strategic System Improvement Plan for Detroit's Homelessness Response System
## 2024 - 2028

**Issued August 2024**
by the City of Detroit, the Homeless Action Network of Detroit, and the Detroit Continuum of Care

CITY OF DETROIT

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# Introduction

# Mission of this Plan

On any given night, more than 1,100 households experience homelessness in the Detroit Continuum of Care's (CoC's) geographic area.[1] In FY 2022, more than 5,900 households (8,535 people) experienced homelessness and were served by the homelessness response system. More than 1,000 of these households were families with children and nearly 4,900 were single adult households.

The short- and long-term impacts of homelessness are profound and far-reaching. People who become homeless are more likely to experience chronic health conditions and reduced life expectancies. Children who endure homelessness face disruptions to their education, resulting in long-term impacts to educational achievement and economic mobility. More broadly, the costs of homelessness are also linked to increased costs in other social systems, such as hospitals, emergency health care services, and child welfare agencies.

To ensure homelessness is rare, brief, and non-recurring in Detroit, it is critical that Detroit's homelessness system is effective in quickly connecting households to stable, quality housing and the holistic resources they need to rebuild their lives and reach their goals.

Through a year-long planning and community engagement process, the City of Detroit, Homeless Action Network of Detroit (HAND), members of the Detroit Continuum of Care, service providers, people with lived experience of homelessness, and other community members created this strategic system improvement plan for Detroit's homelessness response system.

This Plan outlines a community-created set of priorities and strategies to improve service delivery in Detroit's homelessness system and ultimately enhance life outcomes and housing stability for residents experiencing homelessness.

It will be used as a roadmap by system leaders, partners, and stakeholders over the next five years, guiding decision-making, program design, service delivery, and funding efforts.

In this Plan, you will find:
- The vision and goals that serve as the foundation for this Plan
- Core principles and tools to guide improvement efforts
- Improvement action areas for the homelessness response system in Detroit
- A performance measurement framework to guide implementation
- An overview of the community-driven planning process to create this framework
- A quantitative analysis of the resources needed to achieve an optimal homelessness response system
- Prioritized strategies to improve all aspects of the homelessness response system, from shelter quality and case management to funder collaboration
- A detailed Improvement Work Plan that describes timelines and activity leads for each strategy

The Plan was developed from April 2023 to March 2024. It builds upon existing system efforts to improve the homelessness system in Detroit, including critical initiatives to reduce youth and veteran homelessness across the city.

Achieving this Plan's vision will require a more effective, comprehensive, and collaborative homelessness response system – a system that respects and values each person needing assistance and that uses evidence-based best practices to reduce and resolve homelessness.

At its core, the Plan emphasizes activities that increase equity, justice, and the engagement of people with lived experience in the homelessness response system.

A thorough examination of past initiatives reveals that Detroit, like other communities, faces structural and systemic racism, high poverty rates, segregation, housing quality

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[1] The Detroit CoC covers the Cities of Detroit, Hamtramck, and Highland Park.

issues and housing discrimination, gentrification, and employment discrimination.

These issues directly influence the occurrence of homelessness, and then serve as barriers to ending homelessness by limiting access to housing, education, health care, employment, and other resources in the city.

Gaps in the homelessness response system reflect and exacerbate these disparities. Well-meaning solutions perpetuate discrimination when decision-making, policies, and programs are not directly informed and/or led by people with lived experience or designed through a lens of increasing equity and justice. To establish a more equitable system, it is crucial to share decision-making power more fully, foster shared accountability between all stakeholders, address any lack of diversity among leadership and staff, and rebuild trust that has been impacted by past harms between system stakeholders.

For the creation of this plan, people with lived experience of homelessness contributed to and critically shaped every stage of decision-making and input gathering. Their invaluable insights were essential in shaping effective strategies to improve Detroit's homelessness response system.

Through this Plan's collective vision and strategies, the City of Detroit, HAND, and community partners hope to create a homelessness response system where all Detroit households are provided the services and resources they need to achieve housing stability, grow, and thrive.

**"Hear my voice as an experienced homeless person, don't forget about me, and I'm here for solutions," recommended Roquesha O'Neal, member of the Strategic Plan Oversight Commission (SPOC), a committee of community members that oversaw the development of this Plan.**

O'Neal said people with lived experience can especially come up with solutions to improve homelessness services because they've experienced that pain and don't want anyone else to go through that pain. "You are a survivor to come up with solutions, not just for your family, but for the community as a whole."

# Vision and Goals

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**A Shared Vision**

**Through this Strategic System Improvement Plan, the City of Detroit, HAND, and the Detroit CoC are pursuing their shared vision of an equitable, just future that ensures housing stability for every Detroiter.**

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The pursuit of this Plan's vision requires a more effective and collaborative homelessness response system that uses evidence-based best practices to reduce and resolve homelessness. Partners will focus on the achievement of six Goals through the implementation of this Plan:

*Goal 1:*

**Equity, justice, and the leadership of people with lived experience of homelessness play key roles** in program design, service delivery, funding opportunities, and decision making in Detroit's homelessness response system.

*Goal 2:*

**Every household receiving assistance through the Detroit's homelessness response system receives services based on their household needs** that emphasize stable housing outcomes, foster connections to resources for social and economic mobility, and reduce returns to homelessness.

*Goal 3:*

**Detroit's homelessness response system has enough housing resources,** including housing units equipped with robust supportive services, to stably house all people exiting homelessness.

*Goal 4:*

**People experiencing homelessness are holistically supported through effective, sustainable partnerships** created between the homelessness system and other community systems.

*Goal 5:*

**Funding will be coordinated in Detroit's homelessness response system** by aligning with system needs, community-defined standards and expectations for service quality, and data on people's needs.

*Goal 6:*

**Emergency, rehousing, and prevention services are designed to ultimately reduce overall homelessness and first-time homelessness** in Detroit, reduce the length of time from homelessness to housed, and increase successful exits to housing.

# Improvement Action Areas

The Plan features eight Improvement Action Areas focused on system-wide improvements and on strengthening core elements of the homelessness response system. They are:

1. **Establishing the Structures Necessary for Plan Implementation,** to provide effective governance and project management structures that lead to successful implementation of all plan activities.

2. **Leading the System toward Equity and Justice,** to uplift the perspectives and leadership of people with lived experience of homelessness and to ensure programs and services are designed and implemented with a leading focus on equity and justice.

3. **Enhancing Staffing and Capacity Across the Homelessness Response System,** to provide workplace environments on a system-wide basis where housing and service providers get the support, training, and compensation they need to provide high-quality, individualized services.

4. **Advocating for Resources,** to expand the system and improve the quality of programs to increase federal, state, and local funding to both prevent and resolve experiences of homelessness.

5. **Building Upon Existing Improvement Efforts,** to sustain focus on lessons learned from improvement efforts focused on Detroit's coordinated entry system, youth homelessness, and veteran homelessness.

6. **Strengthening and Reimagining Shelter,** to improve facilities and programs so that residents receive the same level of holistic, trauma-informed services and case management across programs.

7. **Expanding Housing Supply and Building an Effective Rehousing System,** so that people are quickly connected to safe, stable, and affordable housing when they experience homelessness.

8. **Reducing Unsheltered Homelessness,** to reduce the number of people sleeping outside and to connect them to housing and service solutions.

# Guiding Principles

Partners will embrace the following Guiding Principles in implementing this Plan:

## Being guided and led by people with lived experience

The expertise and leadership of people with lived experiences of homelessness will be engaged, fairly and consistently compensated, and actively supported. People with lived experience will have the power to drive decision-making across the system's operations and governance.

## Addressing the systemic causes of homelessness

Planning, program design, and implementation activities will all be grounded in a recognition that homelessness is the result of failed systems and policies, not personal choices or failings, and efforts to assist people experiencing homelessness will be matched by efforts to advocate for changes to systems and policies that create homelessness.

## Supporting staff performance and growth

Staff working in all types of roles within the system will have appropriate and reasonable workloads and will be adequately compensated and supported to develop the skills that they need to perform their current roles and for advancement opportunities.

## Collaborating and sharing knowledge

People across the system will be empowered to collaborate across organizations and sectors. Partners will ensure that all people being served by the system, and all people working within the system, have the information and knowledge they need to succeed and thrive.

## Implementing anti-racist and inclusive practices

Every element of the system will demonstrate anti-racist and inclusive practices that affirm the dignity of each person and that value the intersectionality of people's identities, experiences, and expertise.

## Sharing accountability for outcomes and quality

Policymakers, funders, and provider organizations will share accountability, and hold each other accountable, for outcomes and the quality of the full range of services essential to the success of a homelessness response system.

## Purposefully addressing trauma

Trauma-responsive approaches will be implemented to address the effects of past traumas on people being served by and working within the homelessness response system, and to ensure that people are not traumatized further through their engagement with programs.

## Continuously learning and improving

Partners will foster a culture of change, innovation, and adaptability within the homelessness response system, incorporating abundance model principles through which challenges are treated as opportunities for change. Partners will use data and analyses to support learning and sharpen strategies, and commit to a model of agile, continuous improvement.

# Building Blocks

This Plan features Improvement Activities across eight different Improvement Action Areas. These activities will use the following core, foundational tools ("Building Blocks") during implementation:

## Policy and Planning

Activities aligned with this Building Block include policy analysis and policy development, refinement of procedures and protocols, implementing studies, documenting agreements, and other policy and planning activities.

## Capacity Building

Activities aligned with this Building Block include training activities, information-sharing, skill development, analysis of resource needs, staffing and service enhancements, replication of strong practices, and other capacity-building activities.

## Partnerships

Activities aligned with this Building Block include coordination, communication, and collaboration across organizations, facilitating trust-building and input opportunities, creating new committees and work groups, and other partnership activities.

## Data Analysis

Activities aligned with this Building Block include data quality improvement, outcome and impact analyses, equity analyses, quantitative assessments of performance, and other data analysis activities.

## Resource Investments

Activities aligned with this Building Block include the strategic implementation of funding to improve facilities, fill identified gaps in housing and service programs, and other resource investment activities.

> "I would never want what my child went through to happen to someone's else's children. Their dreams should stay alive."
> SPOC member Roquesha O'Neal

# Performance Measurement Framework

## Commitment to Performance Measurement

In the implementation of this Plan, partners are also committed to regular, ongoing, and transparent performance measurement activities to assess the overall performance of the homelessness response system and to tailor and refine Activities within this Plan to have the greatest impact possible.

System performance monitoring is a necessary component of active system management and will be essential for assessing the impact of Activities implemented under this Plan. The Detroit homelessness response system, under the leadership of HAND, the City of Detroit, and the CoC, already collects and tracks substantial data related to system performance. These existing data and metrics combined with system performance targets included in this Plan are essential for tracking progress toward an improved crisis response and accelerated exits to permanent housing.

Documenting baseline performance in key areas during initial Plan implementation and then monitoring progress toward system goals will enable homelessness response system stakeholders to gauge progress, evaluate impact, and consider opportunities for mid-course corrections and adjustments.

As outlined in Tables 1 and 2 in the pages below, this Plan's Performance Measurement Framework identifies system improvement targets that will support the community's assessment of its progress toward system optimization and programmatic improvements focused on reducing inflow, improving crisis response activities, and accelerating exits to successful housing outcomes. During implementation, one of the first steps HAND and the City should undergo is a baseline assessment of performance compared to these targets. The City and HAND should then update performance targets based on system usage, best practices, and goals for system outcomes.

System improvement targets, under the direction of HAND as the lead entity for HMIS, should be assessed by household type (e.g. single adults, households with children, and unaccompanied youth) and by CoC program component where applicable (e.g. outreach, emergency shelter, diversion/rapid exit, transitional housing, rapid rehousing, and permanent supportive housing).

The targets within this Performance Measurement Framework are organized into two categories:

**Performance Targets for Improved Crisis Response (Table 1)**

**Performance Targets for Accelerated Exits to Permanent Housing (Table 2)**

*Table 1: Performance Targets for Improved Crisis Response*

| | Performance Metrics | Program Types Included | Recommended Target or Standard |
|---|---|---|---|
| 1 | **Project Occupancy**<br><br>Number of days in period x number of **occupied** units/ number of days in period x **contracted** units | Emergency Shelter<br>Transitional Housing<br>Rapid Rehousing<br>Permanent Supportive Housing | **All projects are fully occupied, or at least 90% of full enrollment** |
| 2 | **Length of Time Homeless**<br><br>Average cumulative, unduplicated number of days that households were served in Street Outreach (SO), Emergency Shelter (ES), or Transitional Housing (TH) projects; and days in Rapid Rehousing (RRH) and Permanent Supportive Housing (PSH) prior to move-in | Street Outreach<br>Emergency Shelter<br>Transitional Housing<br>Rapid Rehousing<br>Permanent Supportive Housing | **Not more than:**<br><br>**120 days for Emergency Shelter + Permanent Supportive Housing prior to move in**<br><br>**60 days for Emergency Shelter + Rapid Rehousing prior to move in** |
| 3 | **Length of time from CAM referral date until date housed (By Name List [BNL] Priority List)**<br><br>For all new enrollments during period, average number of days from CAM referral to housing move in by type | *CAM referrals to:*<br>Rapid Rehousing<br>Permanent Supportive Housing (Scattered Site)<br>Permanent Supportive Housing (Single Site)<br>Permanent Supportive Housing (LIHTC Properties)<br>Other Permanent Housing | **Not more than 14 days for Permanent Supportive Housing (Single Site)**<br><br>**Not more than 60 days for Permanent Supportive Housing (Scattered Site and Low-Income Housing Tax Credit Properties)** |
| 4 | **Length of Enrollment Time in Program**<br><br>For all new enrollments during period, average number of days from project enrollment to project exit by type | Street Outreach<br>Emergency Shelter | **Street Outreach:**<br>**90 days average**<br><br>**Emergency Shelter:**<br>**90 days average** |

*Table 2: Performance Targets for Accelerated Exits to Permanent Housing*

| | Performance Metrics | Program Types Included | Recommended Target or Standard |
|---|---|---|---|
| 5 | **Exited to or Remained in Permanent Housing\*** <br><br> Percentage of all participants served during period who move into housing or are still in PH on last day of period <br><br> \*Exclusive of deceased participants and all other non-applicable exits | Street Outreach <br> Emergency Shelter <br> Transitional Housing <br> Rapid Rehousing <br> Permanent Supportive Housing | **Street Outreach: At least 40%** <br><br> **Emergency Shelter: At least 60%** <br><br> **Transitional Housing: At least 70%** <br><br> **Rapid Rehousing: At least 80%** <br><br> **Permanent Supportive Housing: At least 90%** |
| 6 | **Exits to Streets, Shelter and Unknown Location** <br><br> Percentage of all residents who exited to streets, shelter, or unknown location | Street Outreach <br> Emergency Shelter <br> Transitional Housing <br> Rapid Rehousing <br> Permanent Supportive Housing | **Street Outreach and Emergency Shelter: To be monitored with eventual target based on review of baseline data** <br><br> **Transitional Housing, Rapid Rehousing, Permanent Supportive Housing: Less than 10%** |
| 7 | **Return to Homelessness within 0-6 months** <br><br> 7.1) Persons who exited to **any non-homeless destination** and subsequently enrolled after 30 days in a homeless project within 1-6 months of their exit. <br><br> 7.2) Persons who exited any project type **to permanent housing** and subsequently enrolled in a homelessness project within 6 months of their exit. | Emergency Shelter <br> Transitional Housing <br> Rapid Rehousing <br> Permanent Supportive Housing | **7.1) Less than 5%** <br><br> **7.2) Less than 5%** |

| | Performance Metrics | Program Types Included | Recommended Target or Standard |
|---|---|---|---|
| 8 | **Return to Homelessness within 7-12 months**<br><br>8.1) Persons who exited to **any non-homeless destination** and subsequently enrolled after 30 days in a homelessness project between 7 and 12 months after their exit.<br><br>8.2) Persons who exited any project type **to permanent housing** and subsequently enrolled in a homelessness project between 7 and 12 months after their exit. | Emergency Shelter<br>Transitional Housing<br>Rapid Rehousing<br>Permanent Supportive Housing | **8.1) Less than 10%**<br><br>**8.2) Less than 10%** |
| 9 | **Referrals from Priority List (BNL Priority List)**<br><br>Number of persons by acuity group; number of chronic persons by acuity group; number of persons ready for housing by acuity group; number of persons referred by acuity group; disaggregated all by race and other noted characteristics | All persons on active priority list from most recent 90-day period | **No disparate rates of referrals by race, gender, household size, type of disability, LGBTQIA+, age, interpersonal/domestic violence status and other attributes as appropriate** |
| 10 | **Reductions in Chronic Homelessness**<br><br>Number of persons who meet the HUD definition for chronic homelessness | Street Outreach<br>Emergency Shelter | **10% reduction year over year** |

# The Planning Process

The development of this Strategic System Improvement Plan featured the following community engagement and research components:

- Leadership and decision-making roles were shared equitably between system providers and people with lived experiences of homelessness.
- A Strategic Plan Oversight Commission (SPOC), comprised of system leaders and people with lived experience of homelessness, guided and made critical decisions for the planning processes.
- Recent and current initiatives were reviewed to understand what helped to support the initiatives' success and what has limited their impact.

- Detroit's homelessness response system was reviewed along governance, performance, and funding parameters, highlighting resource gaps and opportunities for improved governance.
- Listening sessions with providers, focus groups with residents with lived experience, homelessness service program observations, and meetings with key community leaders surfaced key system challenges and opportunities for improvement.
- Work Groups were used to identify strategies and activities to be prioritized for this Plan.
- Fourteen Community Planning Sessions focused on shelter, rehousing and housing supply, and unsheltered homelessness were hosted to develop strategies for this Plan.
- System Modeling activities were conducted to prioritize uses of key homelessness system resources to optimize the homelessness response system and achieve key performance measures.

*More detailed information is included in Appendix B: Description of Planning Process.*

# II.

# Need for Expansion of Homelessness Response System

# Services Provided by the Homelessness Response System

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.[2]

This estimate includes nearly 950 households (nearly 1,300 people) staying in shelters and transitional housing programs, and more than 200 people counted as experiencing unsheltered homelessness, on any given night.

Many more people are identified as experiencing homelessness over the course of a year, estimated at more than 5,900 households (8,535 people), of whom approximately 1,000 are families with children and nearly 4,900 are single adult households.

As documented in Table 1 below, of the more than 5,900 households who accessed homelessness assistance in FY 22:

- Nearly 3,600 households were served in crisis response services such as Emergency Shelter or Transitional Housing, including more than 500 families with children and more than 3,000 single adult households.

- More than 1,100 households were served by Rapid Rehousing programs, including more than 300 families with children and more than 800 single adult households.

- More than 2,100 were served by Permanent Supportive Housing programs, including more than 300 families with children and nearly 1,800 single adult households.

**Table 1: 12-Month Prevalence and Services Received**

| | 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** |

*Notes on Table 1:*
- The data in this Table is from FY22 Longitudinal System Analysis (LSA) report. Households may have been served by more than one program type during the FY.
- Total Households includes some duplication, with some individuals included in both Households with Children and Single Adult Households.
- The Total Households column does not include 12 children-only households or 10 households not clearly defined in the LSA (who are likely Veterans).

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[2] The Detroit CoC covers the Cities of Detroit, Hamtramck, and Highland Park.

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# Expansion of System Needed

System Modeling activities performed in support of the development of this Plan projected the expansions of shelter and housing opportunities that are needed within the homelessness response system to fully meet the needs of the number of people projected to experience homelessness in Detroit.

The System Modeling analysis used the most current information available about the number of households experiencing or at imminent risk of homelessness, the inventory of resources available to meet the needs of households experiencing homelessness, and current program models and pathways through the homelessness response system.

The System Modeling results are summarized in Tables 2 through 5 below and provide estimates of the number of units needed of each the following program types within an "optimal" system that can meet the projected number of households experiencing homelessness every year.

*More detailed information is included in Appendix C: System Modeling Report.*

## Table 2: Expansion of Emergency Shelter Beds Needed

|  | Current Inventory | Needed for Optimal System | Expansion Needed |
|---|---|---|---|
| For Individuals | 520 units | 795 units | 275 units |
| For Families with Children (1 unit holds one family) | 93 units | 113 units | 20 units |
| Total | 613 units | 908 units | 295 units |

## Table 3: Expansion of Rapid Rehousing Needed

|  | Current Inventory | Needed for Optimal System | Expansion Needed |
|---|---|---|---|
| For Individuals | 155 units | 305 units | 150 units |
| For Families with Children | 130 units | 235 units | 105 units |
| Total | 285 units | 540 units | 255 units |

## Table 4: Expansion of Permanent Supportive Housing Needed

|  | Current Inventory | Needed for Optimal System | Expansion Needed |
|---|---|---|---|
| For Individuals | 1,615 units | 2,455 units | 840 units |
| For Families with Children | 305 units | 335 units | 30 units |
| Total | 1,920 units | 2,790 units | 870 units* |

## Table 5: Expansion of Other Permanent Housing Needed

|  | Current Inventory | Needed for Optimal System | Expansion Needed |
|---|---|---|---|
| For Individuals | 50 units | 870 units | 820 units |
| For Families with Children | 50 units | 205 units | 155 units |
| Total | 100 units | 1,075 units | 975 units* |

**System modeling projections do not include units currently in the development pipeline; Other Permanent Housing represents Emergency Housing Vouchers.*

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# III.

# Strategic System Improvement Plan

# Improvement Action Areas

This Plan includes Improvement Objectives and Activities for driving progress within the following eight Action Areas, focused on system-wide improvements and on strengthening specific elements of the homelessness response system. Each improvement action area in the next section of this Plan includes issues to be addressed, improvement objectives, equity considerations, and the core tools that will need to be deployed during implementation. Each area also designates an Action Area Manager, who will be responsible for scoping work, regularly convening core partners, and advancing implementation. To view more detailed information on the activities under each improvement action area, please view the accompanying Improvement Work Plan document.

## SYSTEM-WIDE IMPROVEMENTS

Action Area 1: **Establishing the Structures Necessary for Plan Implementation**

Action Area 2: **Leading the System toward Equity and Justice**

Action Area 3: **Enhancing Staffing/Capacity Across the Homelessness Response System**

Action Area 4: **Advocating for Resources to Expand the System and Improve Quality of Programs**

Action Area 5: **Building Upon Existing Improvement Efforts**

## IMPROVING CORE ELEMENTS OF HOMELESSNESS RESPONSE SYSTEM

Action Area 6: **Strengthening and Reimagining Shelter**

Action Area 7: **Expanding Housing Supply and Building an Effective Rehousing System**

Action Area 8: **Reducing Unsheltered Homelessness**

# ESTABLISHING THE STRUCTURES NECESSARY FOR PLAN IMPLEMENTATION

## Action Area Managers: **HRD and HAND**

## FOCUS OF IMPROVEMENT ACTION AREA

**Issues to be Addressed**

In complex, multi-stakeholder systems, creating an environment to support effective strategic plan implementation requires defined roles and responsibilities, clear expectations, transparency, and a system of checks and balances. Successful implementation of this Plan will require translating Improvement Objectives and Activities into actionable steps, identifying and aligning resources, organizing and motivating teams, and continuously monitoring progress to ensure that the Objectives are achieved. Building trust across partners will be foundational, requiring transparent communication, community engagement, and genuine efforts to address concerns.

The framework developed by the Implementation Work Group (described in more detail in Improvement Action Area 1 of the Improvement Work Plan) is designed to provide Detroit's homelessness response system partners and stakeholders with these elements.

**Information on Current and New Structures**

Detroit's Continuum of Care (CoC) structures currently include the CoC General Membership, the CoC Board, the CoC Board Executive Committee, and a range of other Committees, Subcommittees, and Work Groups.

The CoC's work and decision-making is also informed by the Detroit Advisors Group and the Youth Action Board, comprised of people with lived experience of homelessness.

To support the implementation of this Plan, partners will launch a new Funders Council (separate from the CoC), as well as a Racial Equity Committee and other new Committees or Work Groups within the CoC to support plan implementation.

More information regarding existing and new structures and roles is provided in the Improvement Work Plan.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Reconceive Continuum of Care structures and protocols to support Plan implementation.

2. Stand-up an interagency Funders Council to address identified challenges and gaps within the system, and to support leveraging, scaling, and alignment of funding resources to support Plan implementation.

3. Launch priority activities.

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Partnerships

Activities are focused on launching a new Funders Council, a new Racial Equity Committee, and other committees and work groups necessary for Plan implementation.

### Resource Investments

Investments include ensuring adequate staffing and support is provided to guide and lead the implementation of the Plan, the Funders Council, and other Committees and Work Groups.

### Policy and Planning

Activities including the development of bylaws, Memoranda of Understanding, Committee Work Plans, and other necessary changes to policies and procedures.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to achieve:

- Equitable representation of people with lived experience of Detroit's homelessness response system and the provision of adequate information and support to ensure that they can serve as full partners within decision-making processes.
- Equitable representation of BIPOC, LGBTQIA+, and other communities disproportionately impacted by housing instability and homelessness.
- Active engagement of people working in a wide range of staff and leadership roles within the system.

## PERFORMANCE METRICS

Activities within this Action Area are intended to strengthen the leadership and governance of Detroit's Homelessness Response System as a whole.

Improvement
Action Area

# 2

# LEADING THE SYSTEM TOWARD EQUITY AND JUSTICE

## Action Area Manager: **HRD and HAND**

## FOCUS OF IMPROVEMENT ACTION AREA

**Issues to be Addressed**

The homelessness response system must be guided by a clear and consistent commitment to both drive reductions in homelessness and drive progress toward racial justice and equity for all people. Despite strong intentions, current processes are not deeply rooted in equity and justice. Initiatives specifically focused on racial equity have stalled or struggled. Addressing other inequities, such as for people with disabilities, single men, LGBTQIA+ populations, single women, families with children, survivors or domestic and intimate partner violence, and others, also need to be centered within initiatives or efforts.

Further, system leaders and decision-makers understand the need to listen to and be guided by the leadership of people with lived experience, but improvements for truly engaging and supporting the leadership of such people are still needed. Ongoing and meaningful community engagement processes and dialogues across partners will be necessary. More information on these activities can be found in Improvement Action Area 2 of the Improvement Work Plan.

### Key Demographic Data

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.

Most people experiencing homelessness in Detroit are single adults, and of those adults, 69% are men, 30% are women, and 1% are either transgender, questioning or of no single gender.

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%.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Foster and build trust across the homelessness response system to drive progress on accountability and collaboration, to create a more equitable and just system.

2. Establish a shared understanding of equity and justice principles, including anti-Blackness and all forms of oppression within the homelessness response system, to drive progress on dismantling discriminatory practices and achieving equity and inclusivity.

3. Ensure adequate levels of funding are available within the system to remove barriers to the performance of leadership, decision-making, and guidance roles by people with lived experience of homelessness.

4. Support professional growth and development of individuals with lived experience of homelessness and facilitate their transition into paid staff and leadership roles.

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Partnerships

Activities are focused on collaboratively building trust and open communication across partners, engaging and learning from BIPOC-led organizations, and developing shared expectations for the provision of accessible and affirming services.

### Capacity Building

Activities include providing equity- and justice-focused training and education to system leaders, staff, Board and Committee members, volunteers, and community partners, and exploring options for professional growth and development of individuals with lived experience of homelessness.

### Policy and Planning

Activities include analyzing and strengthening alignment of recently-developed policies with equity and justice principles.

### Resource Investments

Investments include striving to expand the budget available to support the performance of leadership, decision-making, and guidance roles by people with lived experience of homelessness.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to:

- Foster open communication and prioritize transparency and accountability among leaders, organizations, partners, and individuals experiencing homelessness.
- Focus on acknowledging and remedying past harms.
- Explore the historical and ongoing impact of anti-Blackness and racism on homelessness in Detroit.
- Explore the impacts of white dominant culture and unconscious bias within Detroit's homelessness response system.
- Analyze the barriers faced by individuals with disabilities in accessing housing and support services and ways to promote disability justice, including accommodations, inclusive policies, and advocacy.
- Address the unique challenges faced by LGBTQIA+ individuals experiencing homelessness in Detroit.
- Emphasize how intersecting identities such as race, gender, and disability can compound the experiences of homelessness and marginalization.
- Promote both cultural competence and cultural humility, two distinct approaches that aim to improve understanding and interactions across cultures.
- Analyze power dynamics, including roles of funders, policymakers, and service providers.
- Deploy self-reflection and self-assessment activities to help stakeholders recognize their own privilege and biases.

## PERFORMANCE METRICS

Activities within this Action Area are intended to reduce inequities across each of this Plan's performance metrics.

# ENHANCING STAFFING AND CAPACITY ACROSS THE HOMELESSNESS RESPONSE SYSTEM

## Action Area Manager: **HAND**

## FOCUS OF IMPROVEMENT ACTION AREA

### Issues to be Addressed

Throughout the development of this Plan, challenges with the quality and consistency of programs within the homelessness response system have been revealed and highlighted.

People with lived experience have raised major concerns regarding how people are treated while being served within programs, including describing traumatizing experiences. Staff working within the system, in direct service and leadership roles, have expressed challenges with the depth, skills, and turnover of staff within programs, resulting in inadequate services and supports for program participants and poorer outcomes across the system.

This Action Area focuses on addressing provider capacity and staffing issues, including staff pay and compensation. More information on these activities can be found in Improvement Action Area 3 of the Improvement Work Plan.

### Prioritized Needs

Participants in focus groups, listening sessions, community planning sessions, and other input processes identified a range of prioritized staffing and capacity needs, including:

- Improving recruitment and retention of skilled staff through enhanced compensation and appropriate workloads.

- Increasing the representation of people with lived experiences of homelessness within paid staff roles.

- Expanding training for staff to improve customer service, enhance skills in working with clients with diverse cultures and experiences, and to ensure that program participants are always treated with respect and dignity.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Enhance the compensation of frontline staff, and the representation of people with lived experience within paid staff roles, across the homelessness response system.

2. Enhance the depth, consistency, skills, and knowledge of staff members within programs across the system.

SPOC member ReGina Hentz discussed the need for front-line staff in service agencies to get enhanced training on empathy and communication. She said residents experiencing homelessness deserve dignity and respect. **"Know how to talk to people because if you don't know how to talk to someone, you instantly get a turn off or you instantly get a negative response from the person you're talking to,"** Hentz said. "Disrespect breeds disrespect. If I don't have respect for the clients I am talking to, I shouldn't expect them to respect me because they see me as a barrier rather than a help."

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

**Policy and Planning**

Activities include implementing a system wide study of current wages/benefits, as well as developing strategies to ensure wages/benefits are more equitable, reduce staff turnover and vacancies, improve client experiences and outcomes, and develop new policies that equitably recognize and value lived experiences of homelessness within hiring processes.

**Resource Investments**

Investments include identifying resources and modifying budgets to improve compensation of people working within the homelessness response system.

**Capacity Building**

Activities include ensuring staff have access to information, training, and development opportunities necessary for the performance of current roles and for growth opportunities.

**Partnerships**

Activities are focused on strengthening connections across programs and organizations and expanding regular input opportunities so staff can impact decision-making within the system.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to:

- Ensure strategies for addressing compensation and training of staff are developed and implemented in partnership with people working in a wide range of roles within the homelessness response system and by people with lived experience of that system.
- Focus especially on identifying and addressing any racial disparities and other inequities in compensation, advancement, and representation in leadership roles
- Ensure training opportunities are accessible to people performing all types of roles and working all types of schedules within the system; are culturally-responsive and culturally-specific; and directly address topics focused on equity and justice.

## PERFORMANCE METRICS

Activities within this Action Area are intended to strengthen staffing and capacity within programs across Detroit's homelessness response system so that progress can be made on each of the performance metrics of this Plan.

# ADVOCATING FOR RESOURCES TO EXPAND THE SYSTEM AND IMPROVE QUALITY OF PROGRAMS
## Action Area Manager: **HRD**

## FOCUS OF IMPROVEMENT ACTION AREA

### Issues to be Addressed

System Modeling activities implemented to support the development of this Plan estimated the appropriate number of high-quality services, emergency shelter, and rehousing capacity needed to meet the forecasted number of households anticipated to enter the homelessness response system. The model projected the need for expanded availability of:

- Emergency Shelter
- Rapid Rehousing
- Permanent Supportive Housing
- Other permanent housing opportunities.

The inadequate quality of programs, and the lack of capacity to serve people with more complex service needs, were also consistently highlighted throughout all planning processes. The community lacks, however, a clear and collaborative advocacy agenda and coordinated approaches to secure additional resources. More information on these activities can be found in Improvement Action Area 4 of the Improvement Work Plan.

### Key Data

Key findings of the System Modeling activities include projections for what is needed within the homelessness response system in Detroit to meet anticipated needs, including:

- An estimated additional 840 units of Permanent Supportive Housing (PSH) for individuals and 30 PSH units for families are needed.

- An estimated additional 150 units of Rapid Rehousing (RRH) for individuals and 105 units of RRH for families are needed.

- An estimated additional 275 units of Emergency Shelter for individuals and 20 units for families are needed.

- An estimated additional 820 units of other permanent housing for individuals, and 155 such units for families, are needed.

More information regarding the findings of the System Modeling activities can be found in *Appendix C: System Modeling Report*.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Expand organized advocacy efforts focused on achieving increased availability of resources and changes in policies essential for preventing and ending homelessness.

2. Secure an expanded array of resources to better enable the homelessness response system to achieve the community's commitment to connect people quickly and efficiently to housing and services.

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Policy and Planning

Activities include developing a collaborative federal, state, and local advocacy agenda and strategy to make the case for and secure a wider array of resources for services and housing programs.

### Capacity Building

Activities include forming a leadership cohort that helps guide research into additional funding streams and the feasibility of their use to expand and strengthen programs and services.

### Partnerships

Activities include aligning advocacy efforts across agencies to eventually form a collective to advocate for resources and policy changes.

### Data Analysis

Activities include using data generated through the Coordinated Access Model (CAM) to assess needs and gaps in available resources and to make the case for expanded housing and services investments.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to:

- Co-create an advocacy agenda in partnership with people with lived experience

- Ensure the deployment of any additional resources prioritizes addressing racial inequities and other disparities found within the current homelessness response system.

### PERFORMANCE METRICS

Activities within this Action Area are intended to expand and improve the quality of programs across Detroit's Homelessness Response System, which will drive progress on all of this Plan's performance metrics.

"Homelessness isn't sexy, and it doesn't bring people out. It is a struggle. Because it's homeless people and that stereotype around it, you can't get anybody at the table. There is still this attitude that you're homeless because you did something wrong."
~ SPOC member Taura Brown

# BUILDING UPON EXISTING IMPROVEMENT EFFORTS

## Action Area Manager: **HAND**

## FOCUS OF IMPROVEMENT ACTION AREA

**Issues to be Addressed**

The community has been implementing several improvement efforts in recent years that should be built upon during the implementation of this Plan, including:

- The implementation of new partnerships for the community's coordinated entry system, the Coordinated Access Model (CAM)
- The Youth Homelessness Demonstration Program, demonstrating new approaches to preventing and ending youth homelessness
- The Built for Zero initiative, strengthening cross-system partnerships to achieve an effective end to Veteran homelessness in Detroit

Through the implementation of this Plan, the community will sustain focus on these improvement efforts. More information on these activities can be found in Improvement Action Area 5 of the Improvement Work Plan.

**Key Data**

The CAM system performs more than 8,000 intakes of households experiencing homelessness each year.

Point-in-Time Count data estimates that there are more than 90 unaccompanied youth experiencing sheltered or unsheltered homelessness on any given night.

Built for Zero initiative partners currently estimate that there are approximately 125 Veterans experiencing homelessness who are on the By Name List and actively seeking housing.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Solidify the foundational operations of the Coordinated Assessment Model (CAM) system and governance structures and implement improvement efforts across all of CAM's core roles and services, guided by the recommendations and priorities of people with lived experience.

2. Clarify and strengthen CAM's roles and partnerships within the homelessness response system and its connections and coordination with other systems.

3. Assess and strengthen the implementation of programs and services funded through the Youth Homelessness Demonstration Program (YHDP).

4. Advance youth-led implementation of the Coordinated Community Plan to End Youth Homelessness (CCP) and its vision, priorities, and strategies.

5. Apply the vision and guiding principles embraced within YHDP and the CCP across all efforts for preventing and ending youth homelessness and across the entire homelessness response system.

6. **Achieve Functional Zero for Veteran homelessness[3] through the continued implementation of the data-driven Built for Zero initiative.**

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[3] Functional Zero for Veteran homelessness means that the number of Veterans experiencing homelessness at any time does not exceed the community's proven record of housing at least that many Veterans in a month.

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Policy and Planning

Activities include implementing governance structures and formalizing partnerships for CAM, reintegrating YHDP implementation into existing CoC structures, involving youth in decision-making processes across the entire homelessness response system, and reducing returns to homelessness among Veterans.

### Capacity Building

Activities include strengthening diversion and problem-solving services for CAM participants, assessing YHDP programming and applying lessons learned across all programming, and developing a guide for funders for future investments into preventing and ending youth homelessness.

### Partnerships

Activities include developing a shared vision for the role of CAM within the homelessness response system, strengthening information sharing and coordination between CAM and other programs, strengthening partnerships and referrals among organizations serving Veterans, and implementing cross-system partnerships to strengthen efforts to prevent and end homelessness.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to:

- Ensure that people with lived experience are playing decision-making roles within CAM governance and operations.

- Implement assessment tools and prioritization processes within CAM that help to advance equity in access, opportunities, and outcomes.

- Continue to elevate youth as the guiding leaders for the YHDP efforts, from design to implementation to assessment.

- Ensure that leadership roles are being played by youth who are fully representative of youth who face inequitable risks and experiences of homelessness, including BIPOC and LGBTQIA+ youth and other marginalized populations.

- Closely monitor and address any emerging inequities or disparities among the Veterans still experiencing homelessness as the community progresses toward Functional Zero for Veteran homelessness.

## PERFORMANCE METRICS

Activities within this Action Area will especially impact the following Plan performance metrics:

- **Total Number of People Experiencing Homelessness,** including unaccompanied youth and Veterans.

- **Length of Time Homeless,** with performance targets of no more than 120 days for people who exit emergency shelter to permanent supportive housing and no more than 60 days for people who exit emergency shelter to rapid rehousing.

- **Project Occupancy,** with a performance target that all projects are fully occupied, or at no less than 90% of full enrollment.

## Improvement Action Area 6

# STRENGTHENING AND REIMAGINING SHELTER

## Action Area Manager: **HRD**

## FOCUS OF IMPROVEMENT ACTION AREA

### Issues to be Addressed

Site visits, focus groups, listening sessions, community planning sessions, and the guidance provided by people with lived experience have all identified critical and profound issues with the quality and physical environments of current shelter facilities, programs, and practices.

Further, some people with lived experience report that shelter programs and services are not responsive to their needs or concerns, and can even be traumatizing.

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, enhance the treatment of people in shelters, and ultimately reimagine and transform the community's approach to sheltering people. More information on these activities can be found in Improvement Action Area 6 of the Improvement Work Plan.

### Key Data

Detroit's homelessness response system currently includes 520 beds of emergency shelter for single adults and 93 units for families with children (1 family unit includes multiple beds).

Approximately 3,600 households are served in emergency shelter or transitional housing programs each year, including more than 3,000 single adult households and more than 500 households of families with children.

Analysis of system performance data demonstrated very long shelter stays for those people who exited shelters to housing, averaging 471 days.

System Modeling activities identified the need for an estimated additional 275 beds of emergency shelter for individuals and 20 units for families (1 unit per family) to optimize the homelessness response system.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Enhance the quality of facilities currently being used as shelter.

2. Expand the supply and range of models of emergency shelter options available within the community.

3. Enhance the services available within shelter programs to better meet people's needs and improve housing and quality of life outcomes for residents.

4. Ensure people experiencing homelessness and people working within programs understand the options for shelter and services and the expectations for programs, providers, and system leaders.

5. Foster stronger person-centered cultures within shelter programs by ensuring that all funders and providers are accountable to fully supporting people's autonomy and dignity, for treating and valuing all people equitably, and for embracing and implementing best practices.

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Partnerships

Activities include strengthening connections and information sharing across programs and providers.

### Capacity Building

Activities include establishing, enforcing, and supporting the capacity to achieve standardized expectations among funders and shelter providers, and strengthening the implementation of trauma-responsive practices and housing-focused services across programs.

### Resource Investments

Proposed Investment priorities focus on improving current shelter facilities, expanding the supply of shelter available in the community, and expanding and enhancing the range of services available to shelter participants.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to:

- Address the needs and concerns, and follow the guidance, of people with recent experience of shelter programs, including people of color; single men; LGBTQIA+ people; survivors of domestic and intimate partner violence; survivors of human trafficking; people with disabilities; youth and young adults; women; parents with children; and others.

- Actively engage staff playing direct service roles in efforts to identify challenges, test and try new approaches, and assess the impact of implemented changes.

- Identify and address inequities and disparities in access to shelter, client experiences of shelter, services and housing opportunities provided to participants, and outcomes.

## PERFORMANCE METRICS

Activities within this Action Area will especially impact the following Plan performance metrics:

- **Length of Time Homeless,** with performance targets of no more than 120 days for people who exit emergency shelter to permanent supportive housing and no more than 60 days for people who exit emergency shelter to rapid rehousing.

- **Exits to permanent housing,** with a performance target of 60% of emergency shelter program participants exiting to permanent housing.

- **Returns to Homelessness,** with performance target of less than 5% of persons returning to homelessness within 1-6 months after exiting a shelter to permanent housing.

# EXPANDING HOUSING SUPPLY AND BUILDING AN EFFECTIVE REHOUSING SYSTEM

## Action Area Manager: **HRD**

## FOCUS OF IMPROVEMENT ACTION AREA

**Issues to be Addressed**

A healthy rehousing toolkit for a homelessness system includes adequate housing supply for residents exiting homelessness, effective housing case management to help households navigate to permanent housing, and robust partnerships with landlords and housing providers. In Detroit, the ability of people to exit homelessness is hampered by challenges in each aspect of the rehousing system.

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 still needs to be increased. The community also lacks core elements of a coordinated, purposeful system for rehousing people. Additionally, coordinated and intentional landlord engagement and unit cultivation strategies are lacking. 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.

More information on these activities can be found in Improvement Action Area 7 of the Improvement Work Plan.

**Key Data**

System Modeling activities identified that Detroit's homelessness response system:

- Currently includes approximately 155 Rapid Rehousing program slots for individuals and 130 program slots for families with children, but needs an estimated additional 150 slots of Rapid Rehousing (RRH) for individuals and 105 slots of RRH for families.

- Currently includes approximately 1,600 Permanent Supportive Housing (PSH) units for individuals, creating about 160 move-in opportunities per year, but needs an estimated additional 840 such units.

- Currently includes approximately 300 Permanent Supportive Housing units for families with children, creating about 30 move-in opportunities per year, but needs an estimated additional 30 such units.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Expand supply of deeply affordable rental housing to reduce housing instability and to provide more options for people exiting homelessness.
2. Expand the supply of housing options with appropriate services that are specifically designed to support people to end their homelessness.
3. Develop and implement system-level, coordinated policies and practices for operating efficient rehousing activities.
4. Redesign and strengthen the delivery of Housing Navigation services to ensure the provision of consistent, high-quality, and flexible services.
5. Implement comprehensive, system-level landlord engagement, unit cultivation, and accountability strategies to enhance people's ability to secure housing to end their homelessness.
   .

6. Enhance and standardize the quality of Permanent Supportive Housing.
7. Enhance services and supports to help people secure housing and successfully end their homelessness

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Policy and Planning
Activities include improving collaboration to support development and operation of housing programs and the rehousing system.

### Capacity Building
Activities include establishing, enforcing, and supporting the capacity to ensure appropriate rehousing and housing stabilization.

### Partnerships
Activities include strengthening connections and information sharing across funders, developers, landlords, and service providers.

### Data Analysis
Activities include better tracking of all steps and outcomes for housing placement, including equity analyses.

### Resource Investments
Investments focused on developing additional housing options, improving quality of existing housing programs, and building a rehousing system that includes improved housing navigation and landlord engagement.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to ensure that:

▪ People are being provided equitable access to housing programs and resources without racial inequities or other disparities in people's success at leasing units.

▪ People are provided genuine and meaningful choices among housing options and can secure units in neighborhoods and communities aligned with their preferences and needs.

▪ People with disabilities, including behavioral health disabilities, and other challenges have access to services and supports to help them secure and sustain accessible housing options.

▪ People are being treated equitably by funded housing providers and landlords and any inequities or discriminatory treatment are immediately addressed and resolved.

▪ Development activities are providing people with an expanded range of choices for housing options in neighborhoods and communities aligned with their preferences, needs, and market dynamics.

▪ Development activities support universal design principles to ensure that people with disabilities have equitable access to housing options.

## PERFORMANCE METRICS

Activities within this Action Area will especially impact the following Plan performance metrics:

- **Length of Time from CAM Referral Date Until Date Housed,** with performance targets of not more than 14 days for site based/single site programs and not more than 60 days for scattered-site and tax-credit financed properties.

- **Exited to or Remained in Permanent Housing,** with performance targets of 80% of Rapid Rehousing participants, and 90% of Permanent Supportive Housing participants, moving into housing or still being in permanent housing on the last day of the measurement period.

- **Return to Homelessness,** with performance targets of less than 5% within 0 – 6 months and less than 10% within 7 to 12 months.

# REDUCING UNSHELTERED HOMELESSNESS

## Action Area Manager: **HRD**

## FOCUS OF IMPROVEMENT ACTION AREA

**Issues to be Addressed**

Organizations providing outreach and engagement activities need to strengthen their collaboration, coordination, and communication to ensure alignment of intentions and efforts. Stronger connections need to be developed between outreach programs and all other elements of the homelessness response system, including housing resources.

Further, efforts to address the needs of people who are unsheltered and have behavioral health care needs must be re-assessed, as it is not clear that current strategies are staffed by people with necessary clinical skills or are providing people with improved access to the treatment resources they need to resolve their homelessness.

More information on these activities can be found in Improvement Action Area 8 of the Improvement Work Plan.

**Key Data**

Point-in-Time Count data estimates that there are more than 200 people experiencing unsheltered homelessness on any given night in the Detroit CoC's geographic area, approximately 13% of the more than 1,500 people experiencing homelessness.

It is widely believed by local partners and stakeholders that these estimates significantly undercount the population due to the challenges of identifying and counting people who are unsheltered; therefore, the System Modeling analyses applied a 25% escalator and estimated the unsheltered population at 253 people.

Further, recent data indicates that more than 2,200 people experienced unsheltered homelessness in Detroit over the course of a year. Among those people, 55% were men, 51% were disabled, 42% had no income, and the average age was 35.

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Convene all system stakeholders to work toward a unifying, system-wide strategy for engagement, navigation, and rehousing supports for persons experiencing unsheltered homelessness focused on system goals, objectives, roles and responsibilities, and evidence-based activities associated with reducing unsheltered homelessness.

2. Strengthen the practice of outreach services by building the capacity and resources of outreach providers to engage and rehouse persons experiencing unsheltered homelessness.

3. Ensure that outreach teams and services have access to the types of housing options and strategies for all engaged outreach participants that will enable participants to explore and secure their own housing resolution.

## IMPROVEMENT ACTIVITIES

Activities within this Action Area rely upon the following Building Blocks:

### Policy and Planning

Activities include collaboratively developing an outreach plan for outreach programs and creating guidelines for assessing health and safety risks.

### Capacity Building

Activities include providing regular training and capacity building opportunities for outreach providers, developing and supporting the achievement of outreach practice standards, and standardizing housing planning approaches across programs.

### Partnerships

Activities include establishing multi-disciplinary outreach teams, including peer specialists and other specialized staff.

## EQUITY CONSIDERATIONS

Within the implementation of these Activities, it will be essential to:

- Incorporate equitable representation of people with lived experience of unsheltered homelessness and people with a history of engagement with Detroit's outreach programming and services within decision making processes.

- Address any disparities or inequities in access to outreach services and outcomes of outreach programming.

- Address the unique challenges that people with disabilities and people with behavioral health care needs face in accessing services and exiting unsheltered homelessness.

## PERFORMANCE METRICS

Activities within this Action Area will especially impact the following Plan performance metrics:

- **Number of People Experiencing Unsheltered Homelessness,** in total and by subpopulations.

- **Length of Time from CAM referral to Permanent Supportive Housing until housed,** with targets of not more than 30 or 60 days, depending on the type of PSH.

- **People Exiting Street Outreach Programs to Permanent Housing,** with a target of at least 40%.

# Next Steps and Reporting

The City of Detroit and Homeless Action Network of Detroit commit to consistently and transparently reporting out progress on the implementation activities related to this Plan. The preliminary plan for first-year collaboration and reporting activities includes the following:

| Activity | Timeline Milestones |
|---|---|
| Activity Action Area Managers and Activity Leads attend first Implementation Convening to lay out work plans, ensure alignment, and create performance goals | Occurs by October 2024 |
| Shared project management tools are launched to ensure cross-organization communication between Activity Action Area Managers and Activity Leads | Complete by end of 2024 |
| Activity Action Area Managers meet to discuss progress, alignment and collaboration | Cadence to be determined during first Implementation Convening |
| Activity Action Area Managers meet with HRD leadership, HAND leadership, and Funders Council (FC) staff lead | Cadence to be determined during first Implementation Convening |
| Action Area Managers make collective presentation to CoC Board on Plan updates | Cadence to be determined during first Implementation Convening |
| Action Area Managers and HRD/HAND leadership make collective presentation to City Council on Plan updates | Occurs annually |
| Plan Progress Meeting is held to provide updates to the community and solicit feedback | Occurs annually |
| Plan webpage is updated on HRD and HAND websites | Cadence to be determined during first Implementation Convening |
| Progress Benchmarks data is generated by HAND HMIS staff | Cadence to be determined during first Implementation Convening<br><br>Data should be posted on HRD/HAND websites and incorporated into update presentations |

# Acknowledgements

The City of Detroit, the Homeless Action Network of Detroit (HAND), the Detroit Continuum of Care (CoC), and the Barbara Poppe and Associates (BPA) Consulting Team thank all of the people who have participated in this planning process and whose expertise and wisdom have informed the development of this Strategic System Improvement Plan, including:

- The people with lived experiences of homelessness in Detroit who shared their expertise, perspectives, guidance, and recommendations through holding leadership roles in this process participating in focus groups, listening sessions, interviews, and planning sessions.

- The people working within the homelessness response system in Detroit who gave generously of their time, expertise, insights, and ideas throughout every part of the planning process.

- Elected officials, other leaders, and the many people working in partnership with the homelessness response system who shared information, analyses, data, guidance, and recommendations about recent efforts and activities in the community.

- The organizations who helped to host focus groups, listening sessions, site visits, work group meetings, and many other activities.

- The people who served on the Detroit Project Team and helped inform the early design and implementation of planning activities.

- And everyone who served on the Strategic Plan Oversight Commission to help ensure the success and impact of this planning process:
  - DeAndra Matthews, resident with lived experience
  - Lydia Adkins, resident with lived experience
  - A'Aisha Ahmed, resident with lived experience
  - Ma'Jenaya Johnson, resident with lived experience
  - ReGina Hentz, resident with lived experience
  - Roquesha O'Neal, 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

**For more information regarding this Plan, please see
the City's Homelessness Strategic Planning Project webpage.**

> **The BPA Consulting Team:**
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# IV.

# Improvement Work Plan

# IMPROVEMENT WORK PLAN PART 1: SYSTEM-WIDE IMPROVEMENTS

Part 1 of the Improvement Work Plan identifies system-wide Improvement Objectives and Activities for driving progress within the following 5 Action Areas:

**SYSTEM-WIDE IMPROVEMENTS**

Action Area 1: **Establishing the Structures Necessary for Plan Implementation**

Action Area 2: **Leading the System toward Equity and Justice**

Action Area 3: **Enhancing Staffing/Capacity Across the Homelessness Response System**

Action Area 4: **Advocating for Resources to Expand the System and Improve Quality of Programs**

Action Area 5: **Building Upon Existing Improvement Efforts**

*Note on Staffing in the Improvement Work Plan:*

This Plan identifies Action Area Managers, Objective Leads, and Activity Leads, whose roles are expected to include the following responsibilities:

- Scoping the work (e.g., identifying options, opportunities, risks, resource needs, strategies for measuring progress, timelines, action steps/owners, etc.).
- Identifying the types and scale of resources needed to advance work; sharing the needs with the CoC backbone and funders; and pursuing directly or supporting partners to pursue, as applicable.
- Regularly convening core partners needed to advance implementation of Activities, monitor progress, and course correct as needed.
- Working with CoC backbone staff to agendize items at relevant committee(s) to share updates on Activities with community stakeholders, solicit feedback, etc.
- Working with CoC backbone and Detroit Advisors Group and the Youth Advisory Board to determine how best to engage PWLEH in work. This will include coordinating to orient people with lived experiences of homelessness to the Activities and their roles.
- Providing information and updates to CoC backbone to support overall progress reporting on Strategic System Improvement Plan.

*Note on Activity Timelines:*

*Activity start dates in the Improvement Work Plan often refer to the beginning of work to accomplish the Activity, not the expected date of Activity completion or the implementation of an end product.*

# 1

# ESTABLISHING THE STRUCTURES NECESSARY FOR PLAN IMPLEMENTATION

## Action Area Managers: **HRD and HAND**

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are focused on driving progress toward the following Objectives:

1. Reconceive Continuum of Care structures and protocols to support Plan implementation.

2. Stand-up an interagency Funders Council to address identified challenges and gaps within the system and to support leveraging, scaling, and alignment of funding resources to support Plan implementation.

3. Launch priority activities.

## IMPROVEMENT ACTIVITIES

As illustrated by Exhibit A and Exhibit B below, the Activities in this Action Area will require structures that are already in place (the CoC Board and Committees) along with new, additional structures and roles to fill implementation gaps (Funders Council, Action Area Managers, and Activity Leads).

In Exhibit A, dotted lines demonstrate areas of needed information flow and coordination, and both Exhibit A and B provide additional detail on the roles of each entity.

Improvement Objective #1.1
**Reconceive Continuum of Care structures and protocols to support Plan implementation.**

**Objective Lead**
HAND (as CoC Backbone)

**Supporting Organizations**
CoC Board members/partners

***Improvement Activity #1.1.1. Reconceive CoC Charter:*** Reconceive CoC Charter to provide a stronger foundation for plan implementation, including (but not limited to) clarifying roles and decision-making protocols, updating committee structure to support Plan implementation, and revisiting seats to improve representation. Recommended issues to be addressed via process include, but are not limited to:

- Clarify roles and domain of CoC Board vis-a-vis Funders Council in partnership with HRD (e.g., CoC Board decision-making entity on HUD requirements, and a forum for discussion and feedback on other issues and topics);

- Clarify roles and decision-making authority of CoC Board relative to General Membership;

- Clarify ex-officio seats vs appointed and elected seats.

- Establish representation metrics to guide appointments to CoC Board and committees (ensuring appointments better represent racial demographics of the community, as well as establishing metrics for participation by persons with lived experience);

- Establish committee within the Plan governance structure to strengthen the community's capacity to develop and sustain efforts focused on advancing racial equity; clarify how this committee intersects/works with other committees to advance CoC objectives;

- Establish new committee structure to support Plan implementation;

**Activity Lead**
HAND (as CoC Backbone)

**Timeframe**
April to July 2024

- Create requirement for annual committee work plans to support alignment with strategic plan priorities and support CoC Board's ability to identify when deliverables will be coming out of committee for discussion/adoption;
- Stagger CoC Board and committee chair terms; and
- Update participation, conflict of interest, and code of conduct policies.

| | |
|---|---|
| *Improvement Activity #1.1.2. Develop and execute MOUs between the CoC Board and the designated entities:* Develop and execute Memorandums of Understanding (MOUs) between the Board and the CoC's system-level staffing entities (e.g., Collaborative Applicant, HMIS Administrator, Coordinated Entry Management Entity) to define the roles and responsibilities of each and how parties will work together. | **Activity Lead** CoC Board <br><br> **Timeframe** Initiate in 2024 |
| *Improvement Activity #1.1.3. Recruit for/stand up Racial Equity Committee:* Implement new committee within the CoC governance structure to strengthen the community's capacity to develop and sustain efforts focused on advancing racial equity and addressing, with an intersectional focus, all inequities and disparities within the homelessness response system. Committee members would be charged with considering how the CoC collects, analyzes, and uses data to drive equitable outcomes; working with other committees to identify equity metrics to be embedded in their respective annual work plans; supporting the CoC on developing a racial equity review process to be used by committees as they pursue implementation activities within their purview; and other goals and objectives as determined appropriate. | **Activity Lead** HAND (as CoC Backbone) <br><br> **Timeframe** Late 2024 |
| *Improvement Activity #1.1.4. Align CoC committees to Plan priorities and recruit members for these committees to support Plan implementation:* Implement new committees and/or align existing committees within the CoC governance structure to support plan implementation. The total number of committees will be based on CoC backbone capacity to support staffing functions as outlined in Attachment B, currently estimated at up to nine committees. Domain of committees for 2024 will depend on early implementation priorities as outlined in the final Plan and will be updated based on CoC protocols for developing annual priorities in future years. CoC backbone staff should collaborate with subject matter expert staff in other entities, such as HRD, as needed to set up committees. | **Activity Lead** HAND (as CoC Backbone) <br><br> **Timeframe** 2024 |
| *Improvement Activity #1.1.5. Develop Committee Work Plans:* The creation of annual work plans is intended to a) ensure alignment around annual priorities, b) ensure each committee has a clear understanding of its roles and responsibilities vis-à-vis other committees, and c) ensure the Board understands what different committees are working on and when to expect and agendize final deliverables and recommendations coming out of different committees throughout the year. The timeframe listed is for year one, but the creation of work plans should be completed on an annual basis to reflect implementation priorities for the subsequent year. | **Activity Lead** HAND (as CoC Backbone) <br><br> **Timeframe** Initiate in 2024 for existing committees; initiate in 2025 for any newly created committees |

### *Implementation Milestones*
- Updated Charter adopted by CoC General Membership.
- MOUs between CoC Board and designated entities executed.
- Racial Equity Committee launched.
- Committees necessary for Plan implementation launched, with staffing support identified.

Improvement Objective #1.2
**Stand-up an interagency Funders Council to address identified challenges and gaps and to support leveraging and alignment of funding resources to support Plan implementation.**

**Objective Lead**
HRD

**Supporting Organizations**
HAND

*Improvement Activity #1.2.1. Create job description for Director of the Funders Council and identify staff person:* The Funders Council will require dedicated senior-level staffing to support partner outreach and relationship management, convening support (such as agenda development, meeting facilitation, follow-up), and technical support to partner agencies as needed to advance objectives. Additionally, this staff position will be responsible for coordinating closely with the senior-level staff person responsible for guiding/overseeing CoC backbone responsibilities.

**Activity Lead**
HRD

**Timeframe**
2024

*Improvement Activity #1.2.2. Develop MOU to support role clarity and coordination protocols with CoC Backbone:* A Memorandum of Understanding between the convener of the Funder's Council and HAND (as CoC backbone) will support role clarity and the creation of protocols for coordination between entities.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024 and finalize in early 2025

*Improvement Activity #1.2.3. Develop bylaws to support establishment and operation of Funders Council:* The creation of rules to outline the purpose, membership, structure, and protocols of the Funders Council will ensure all members understand the objectives of the body and their roles and responsibilities as members. The Funders Council will have co-chairs, one of which must be a member of the CoC Board to support alignment and coordination.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024 and finalize in 2025

*Improvement Activity #1.2.4. Identify and recruit members for the Funders Council:* Although partner relationship management is an ongoing activity, launching the Funders Council will require an initial surge of effort to recruit partners and get the right people to the table. This includes 1:1 meetings with partner agencies to update them on the Plan, discuss the role and objectives of the Funders Council, discuss what is being asked of them as a member to the Council (both generally as a group and individually as an agency), the level of representation requested, and the anticipated time commitment.

**Activity Lead**
HRD

**Timeframe**
2024

> *Implementation Milestones*
> - Funders Council convenes, with staffing and supporting documents in place.

Improvement Objective #1.3
**Launch prioritized Action Areas and Activities.**

**Objective Lead**
Agencies identified as leads of Year 1 Action Areas and Activities

**Supporting Organizations**
N/A

*Improvement Activity #1.3.1. Identify staffing strategy for Action Area Managers and Activity Leads:* While this plan identifies Action Area Manager and Activity Lead *agencies*, those agencies will subsequently need to identify specific staff to lead the work and serve as points of contact for the community.

**Activity Lead**
Agencies identified as leads of Year 1 Activities

**Timeframe**
April to June 2024

***Improvement Activity #1.3.2. Develop initial project plans:*** Once staff have been identified, project plans should be developed to guide the implementation of each specific strategy, including identifying options, risks, resource needs, a strategy for measuring progress, action steps and owners, and a timeline. Project plans will also identify which CoC committee will be used to provide updates and gather stakeholder input, as well as how the work will involve people with lived experience of homelessness. Each Action Area manager should work with Objective and Activity leads to identify how supporting partners will be engaged in planning and decision making.

**Activity Lead**
Agencies identified as leads of Year 1 Activities

**Timeframe**
Initiate in 2024 and 2025 (start timeframes depend on activities)

*Implementation Milestones:*

- Staff identified for all 2024 activities.
- Action Area Managers have established plan for coordination between managers to enhance oversight of Plan activities.
- Action Area Managers begin reporting on progress, challenges, and plans to Funders Council.

# Exhibit A.
## Detroit Strategic System Improvement Plan Implementation Structure

**Funders Council Convener**

**CoC Designated Entities**

Provide staffing support to Funders Council, including partner outreach & Relationship management, convening support, and technical support as needed. Also responsible for system level coordination with CoC Backbone

Provide Staffing support to CoC per guidelines/protocols outlined in CoC Charter. Specific duties may be fleshed out more fully in MOUs between Board and entity (at the Board's discretion).

**Funders Council**

**CoC Board**

Leverage and align funding resource and policy to support strategic plan implementation

Provide direction and oversight of system, including providing oversight of system-level staffing entities (Collaborative Applicant, HMIS, Coordinated Entry, Backbone), establishing annual priorities, determining programmatic standards, and making decisions on/ ensuring compliance with HUD CoC reqs.

Committee 1

Committee 2

**Action Area Managers**

Committee 3

Committee 4

Responsible for providing oversight of activity leads within their action area and providing reports/updates to CoC Board and Funders Council

Committee 5

Committee 6

Staff person(s) responsible for providing strategic and project management support of specific plan activity. Activity leads will participate in relevant CoC committee to share updates, solicit feedback from Community Partners, etc.

**Activity Lead**

**General Membership**

Committees and ad hoc work groups (up to 9 at any given time) will support execution of work around a specific topic/domain, including problem identification, brainstorming solutions, providing input/ feedback on draft work products presented by strategy leads, etc.

Approve updates to charter, designate system- level staffing entities, volunteer to serve on Board and/ or committees, and participate in membership meetings and other public forums to offer feedback and stay informed in what's happening in the system.

## COC BOARD

***Purpose:*** To provide direction and oversight of the homelessness response system.

- Includes broad ranging representation (government agencies, people with lived experience, service providers, landlords/developers, etc.) with focus on diversity and intersectionality
- Provides oversight of system-level staffing entities (Collaborative Applicant, HMIS Administrator, CE Management Entity, Backbone)
- Determines annual priorities
- Tracks/monitors system performance and identifies changes/course corrections as needed
- Makes decisions on and ensures compliance with HUD CoC requirements

***Sample Duties:***

- Regularly reviews system performance and identifies annual project/funding priorities
- Identifies framework for HUD CoC competition (priorities, rating/ranking criteria, etc.); approves project applications
- Provides guidance/decisions on Point In Time Count methodology
- Approves CAM prioritization protocols and policy decisions
- Develops and/or adopts programmatic standards (e.g., shelter standards that should be incorporated in RFPs and monitored against; PSH case management standards)

***Convener:***
HAND serves as backbone staffing for the CoC entity.

## FUNDERS COUNCIL

***Purpose:*** To leverage, scale, and align funding resources to support strategic plan implementation.

- Includes public and private sector agency funders (cross-system); executive level participants (to ensure ability to direct resources, make decisions, and problem-solve); and funder rep(s) from CoC Board to support alignment

***Sample Duties:***

- Determines highest/best use of different funding sources (e.g., if Community Development Block Grant funds can be used for shelter development or rehab, Emergency Solutions Grant funds could be reserved for shelter operations or services)
- Develop/issue a joint RFP to provide resources from different agencies (e.g., housing subsidies, case management services, behavioral health supports) via a singular process
- Align requirements across funding agencies (e.g., all agencies funding PSH work to use consistent standards – e.g., adherence to Housing First principles, use of CAM to fill vacancies, consistent case management ratios and standards)
- Identify mainstream funding sources that can be better targeted to meet homelessness response system needs
- Troubleshoot issues tied to funding sources (e.g., voucher issuance/orientation, application review, or inspections are taking too long; high percentages of units are not passing inspections)
- Identify additional federal and state resources that partner agencies could be pursuing
- Pursue private sector partnerships to fill system level gaps

***Convener:***
HRD

## Action Area Managers

- Provides oversight of and support to Activity Leads within their action area
- Works with Activity Leads to identify, communicate, and secure resource needs
- Convenes Activity Leads within their action area to support alignment
- Meets with other Action Area Managers to support alignment across strategies
- Provides updates/reports to Funders Council and CoC Board

## Activity Leads

- Scopes project/develops project plan (i.e., identifies options, opportunities, risks, resource needs, strategies for measuring progress, timelines, action steps/owners, etc.)
- Identifies the types and scale of resources needed to advance work; coordinates with Action Area Managers to communicate information as appropriate
- Coordinates with relevant CoC Backbone staff and committee chairs to agendize items at CoC committee meetings to share updates, solicit feedback, etc. with community stakeholders
- Works with CoC Backbone, Detroit Advisors Group, and the Youth Action Board to determine how best to engage people with lived experience in work
- Coordinates with Action Area Managers to provide info/updates to CoC Backbone to support overall progress reporting on strategic plan

## CoC Board & Committee Chairs

- Provides strategic thought partnership on issues coming under the chair's purview
- Works with CoC Backbone to develop annual work plan/priorities/timeline and tentative meeting schedule
- Supports CoC Backbone in ensuring adequate participation/representation by assisting with outreach and recruitment
- Participates in prep meetings with Backbone to develop agenda, identify follow-up tasks and assignments, identify materials needed, etc.
- Assists with scheduling and logistics, as agreed upon with CoC Backbone
- Assists with meeting facilitation, as agreed upon with CoC Backbone
- Assists with recording and distributing meeting minutes, as agreed upon with CoC Backbone
- Reports out on behalf of committee to Board (or on behalf of Board to other bodies – e.g., General Membership)

## CoC Backbone Staff *

- Manages selection/seating of Board & committee members per protocols outlined in charter (e.g., issue invitations, lead recruitment, oversee selection process, manage onboarding/training of new members)
- Plans/facilitates Board and committee meetings – e.g., works w/ chairs to plan agendas, facilitate meetings, record/distribute minutes, track completion of action items
- Supports participation by people with lived experience of homelessness – e.g., recruits, onboards and trains members; provides meeting prep support; ensures residents have tools needed to participate (e.g., access to technology, transportation assistance); administers stipends
- Leads partnership development and stakeholder engagement – e.g., one-on-one engagement of partners, both existing and new, to educate, develop buy-in, seek support in filling gaps, etc.
- Coordinates system performance review and annual planning – e.g., works with Action Area Managers, HMIS team, and others to compile information needed to assess system performance and progress against the plan; facilitates planning process to identify needed changes/course corrections based on that information; and ensures public distribution of information
- Provides CoC membership management – e.g., issues invitations, plans/hosts meetings, manages communications, manages trainings
- Leads collaborative process for developing written standards for CoC

*Separate from Collaborative Applicant, HMIS, and Coordinated Entry duties*

# LEADING THE HOMELESSNESS RESPONSE SYSTEM TOWARD EQUITY AND JUSTICE

## Action Area Manager: **HRD and HAND**

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are focused on driving progress toward the following Objectives:

1. Foster and build trust across the homelessness response system to drive progress on accountability and collaboration to create a more equitable and just system.

2. Establish a shared understanding of equity and justice principles, including anti-Blackness and all forms of oppression within the homelessness response system, to dismantle discriminatory practices and achieve equity and inclusivity.

3. Ensure adequate levels of funding are available within the system to remove barriers to the performance of leadership, decision-making, and guidance roles by people with lived experience of homelessness.

4. Support professional growth and development of individuals with lived experience of homelessness and facilitate their transition into paid staff and leadership roles.

## IMPROVEMENT ACTIVITIES

Improvement Objective #2.1
**Foster and build trust across the homelessness response system to drive progress on accountability and collaboration to create a more equitable and just system.**

**Objective Lead**
HRD

**Supporting Organizations**
HAND; City of Detroit Police Department (DPD); Detroit Health Department (DHD); Detroit Wayne Integrated Health Network (DWIHN); homelessness services and housing organizations

***Improvement Activity #2.1.1. Purposefully review and learn from past efforts and commit to working differently:*** Convene facilitated discussions to debrief past and recent efforts to collaborate. Acknowledge ways in which collaborations were not successful and trust was damaged or broken. Through those discussions, secure and document clear commitments for how collaborative efforts will be managed differently moving forward, for how future breakdowns in collaboration or trust will be addressed, and for how accountability to those commitments will be managed.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024, then ongoing

***Improvement Activity #2.1.2. Strengthen efforts to deepen trust with, and representation of, people with lived experience in guidance and decision-making roles:*** Conduct culturally-responsive outreach and engagement with people from marginalized communities who are not adequately represented among people providing guidance or performing decision-making roles, including but not limited to Black men, LGBTQIA+ people, and people with disabilities. Implement a variety of community engagement opportunities to gather insights and experiences, such as topic-focused meetings, working groups addressing improvement activities, and other approaches to establish trust, open dialogue, and engage people into authentic and meaningful decision-making roles.

**Activity Lead**
HRD and HAND

**Timeframe**
Initiate in 2024, then ongoing

***Improvement Activity #2.1.3. Monitor trust-building activities implemented and assess impact:*** Through the Racial Equity Committee of the CoC, create mechanisms for monitoring accountability to the commitments to working differently to repair and build trust, and to

**Activity Lead**
Racial Equity Committee

**Timeframe**

deepen and expand trusting relationships with people with lived experiencing performing guidance and decision-making roles.

Initiate in 2024, then ongoing

### Implementation Milestones

- Feedback loops, such as surveys and regular meetings, to assess progress on building trust within the system and perceptions of how partners are working together are developed.
- Regular updates and reports on the progress of efforts to repair and build trust, including the steps taken, challenges faced, and outcomes achieved are conducted.
- Documentation of increased and more equitable representation of people with lived experience of homelessness within guidance and decision-making roles is created.

## Improvement Objective #2.2

**Establish a shared understanding of equity and justice principles, including anti-Blackness and all forms of oppression within the homelessness response system, to dismantle discriminatory practices and achieve equity and inclusivity.**

**Objective Lead**
HAND

**Supporting Organizations**
HRD; HUD TA providers and other TA Providers; DWIHN; State of Michigan departments; and homelessness services and housing organizations

***Improvement Activity #2.2.1. Engage and learn from BIPOC-led organizations:*** Perform culturally-responsive outreach to smaller and BIPOC-led organizations, foster meaningful relationships, actively listen and learn from their experiences, and develop targeted capacity development activities for these groups, such as trainings, funding strategies, and other strategies.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

***Improvement Activity #2.2.2. Provide equity- and justice-focused education and training:*** Provide ongoing education and training programs for system leaders, staff, CoC Board and Committee members, volunteers, and community partners on topics such as unconscious bias, intersectionality, disability justice, gender, and LGBTQIA+ rights, and other topics that could include, but are not limited to:
- Introduction to equity concepts, anti-Blackness, historical and current racism, and the oppression of vulnerable populations by race, gender, ethnicity etc.
- White dominant culture in a majority Black system
- Cultural competence vs. cultural humility
- The importance of allyship and advocacy
- Power dynamics, organizational change, and systems change
- Self-assessment of privilege and biases
- Practical skills for housing providers to fight discrimination

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #2.2.3. Analyze and strengthen alignment of recently-developed policies with equity and justice principles:*** Through collaborative efforts with the Racial Equity Committee, Detroit Advisors Group, and Youth Action Board, identify recently-developed policies within the homelessness response system for their alignment with equity and justice principles and revise policies to better promote equity, inclusivity, anti-oppression practices, and fair access to resources and services.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #2.2.4. Develop shared expectations for the provision of accessible and affirming services:*** Through collaborative efforts with the Racial Equity Committee, Detroit Advisors Group, and Youth Action Board, develop shared expectations for the provision of accessible and affirming services, such as provision of language interpretation services, physical accessibility accommodations, safe spaces that respect and affirm LGBTQIA+ identities, and culturally-responsive and culturally-specific programming and services.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

### Implementation Milestones

- Education and training programs related to equity, justice, and anti-oppression are conducted for system leaders, staff, CoC Board and Committee members,

volunteers, and community partners. Measurement tools to analyze the trainings' impact on understanding and ability to provide inclusive and equitable support to homeless individuals are created.

- Surveys and other feedback mechanisms are implemented to gather feedback from people experiencing homelessness, other community members, and partners to assess satisfaction with the inclusivity and fairness of services provided by the homelessness response system.

- Implementation and adherence to newly developed policies are monitored.

- Partnerships with organizations representing and servicing BIPOC communities, people with disabilities, and LGBTQIA+ people are created. Mechanisms are implemented to assess the quality and strength of those partnerships.

## Improvement Objective #2.3
**Ensure adequate levels of funding are available within the system to remove barriers to the performance of leadership, decision-making, and guidance roles by people with lived experience of homelessness.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HAND | City of Detroit; Detroit Advisors Group; Youth Action Board; and funders and philanthropic organizations |

*Improvement Activity #2.3.1. Expand budget available to support the participation of people with lived experience of homelessness across the entire homelessness response system:* Develop system-wide budget and secure additional funding through public and private sources for regular and consistent compensation of individuals with lived experience of homelessness performing leadership, decision-making, and guidance roles across the homelessness response system.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #2.3.2. Explore options and reach decisions regarding whether any forms of emergency assistance can be provided to support the performance of system roles by people with lived experience of homelessness:* Explore options for transparent processes for provision of any forms of emergency assistance or other supports (such as child and health care reimbursement, transportation stipends, etc.) to better support the performance of decision-making roles by people with lived experience of homelessness. Transparently report outcomes of such explorations and decisions reached and ensure that any provision of such emergency assistance is governed by clear eligibility criteria and processes.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2027

*Implementation Milestones*
- Opportunities to increase funding allocated specifically for compensating people with lived experience are explored.
- Decisions for providing emergency assistance to people with lived experience of homelessness are reached.

Improvement Objective #2.4
**Support professional growth and development of individuals with lived experience of homelessness and facilitate their transition into paid staff and leadership roles within the homelessness response system.**

| Objective Lead | Supporting Organizations |
|---|---|
| HAND | City of Detroit; Detroit Advisors Group; Youth Action Board; workforce development agencies; and funders and philanthropic organizations |

*Improvement Activity #2.4.1. Create leadership and skill development opportunities:* Offer regular and ongoing learning opportunities and training sessions focused on nurturing leadership skills and abilities among individuals with lived experience of homelessness to support their participation in decision-making processes and involvement in committees, advisory boards, and other structures.

**Activity Lead**
HAND and HRD

**Timeframe**
Initiate in 2027

*Improvement Activity #2.4.2. Explore potential for developing a mentorship program:* Assess feasibility and options for developing a mentorship program that pairs individuals with lived experience of homelessness with experienced professionals in the field to provide guidance, support, and opportunities for networking and skill development.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2027

*Improvement Activity #2.4.3. Assess potential for developing formal peer training, certification programs, and other educational opportunities:* Determine if there are feasible opportunities to offer and pay for specialized training and/or create certification programs and other educational opportunities tailored to the needs of individuals with lived experience of homelessness. Options might include workshops, seminars, and online courses that enhance people's knowledge and skills in areas such as service provision, advocacy, and leadership. Determine feasibility of providing access to funds or scholarships that can be used to support individuals in pursuing further education, certifications, or professional development opportunities.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2027

*Improvement Activity #2.4.4. Explore potential for creating a formal internship and job placement program:* Explore options and determine feasibility of collaborating with provider organizations and other employers to create internship and job placement programs specifically for individuals with lived experience of homelessness to provide practical work experience and mentorship, and help individuals transition into stable employment.

**Activity Lead**
HAND

**Timeframe:**
Initiate in 2027

*Implementation Milestones*
- Programs and initiatives to support the professional growth of individuals with lived experience of homelessness are explored and developed.

# ENHANCING STAFFING AND CAPACITY ACROSS THE HOMELESSNESS RESPONSE SYSTEM

Action Area Manager: **HRD**

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are focused on driving progress toward the following Objectives:

1. Enhance the compensation of frontline staff, and the representation of people with lived experience within paid staff roles, within programs across the homelessness response system.

2. Enhance the depth, consistency, skills, and knowledge of staffing within programs across the system.

## IMPROVEMENT ACTIVITIES

### Improvement Objective #3.1
**Enhance the compensation of frontline staff, and the representation of people with lived experience within paid staff roles, within programs across the homelessness response system.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HRD | HAND; CoC; Detroit Advisors Group; Youth Action Board; Funders Council; MSHDA; and MDHHS |

| | **Activity Lead** |
|---|---|
| ***Improvement Activity #3.1.1. Implement a compensation study and increase wages and benefits for staff:*** Conduct a system-wide study of current wages/benefits and develop a strategy to increase wages/benefits, make wages more equitable, reduce staff turnover and vacancies, and improve client experiences and outcomes. Study to include comparing wage trends across frontline, management, and executive staff. Based upon study, convene funders across the system to collaborate on ways to improve compensation and benefits for program staff, especially those in front-line, direct-service roles. | HRD **Timeframe** Initiate study in 2025 |

| | **Activity Lead** |
|---|---|
| ***Improvement Activity #3.1.2. Develop and implement policies that equitably value lived experiences of homelessness within hiring and compensation:*** Analyze current hiring and compensation policies and develop and implement new policies that equitably value lived experiences of homelessness within the hiring process. | HRD **Timeframe** Initiate in 2026 |

*Implementation Milestones*

- Report on compensation study completed and distributed to Funders Council and CoC Board.
- Recommendations on policies to improve hiring and compensation provided to Funders Council and CoC Board.
- RFPs and grant awards include new hiring and compensation recommendations in funding cycle following recommendations.
- Agencies begin adopting new hiring and compensation recommendations.

### Improvement Objective #3.2
**Enhance the depth, consistency, skills, and knowledge of staffing within programs.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HAND | CoC; HUD and HUD TA providers; HRD; Mayor's Office; MSHDA; MDHHS; funders and philanthropic organizations |

***Improvement Activity #3.2.1. Regularly gather input from staff working across the homelessness response system:*** Establish regular opportunities and feedback mechanisms to gather input from staff working within homelessness services and housing programs to identify areas for improvement, assess training and information needs, and inform programmatic and policy changes that will better meet the needs of clients.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #3.2.2. Ensure access to knowledge and information essential for performing roles and providing accessible and affirming services:*** Ensure that staff working within homelessness services and housing programs have access to up-to-date and accurate information about housing options, eligibility criteria, and available support services. This can be done through centralized databases or resource directories that are regularly updated.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #3.2.3. Foster stronger connections between staff working in different programs and different elements of homelessness response system:*** Create regular opportunities for staff to meet, network, and establish strong relationships with staff from other programs and from other elements of the homelessness response system.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2026

***Improvement Activity #3.2.4. Provide regular education, training, and professional development opportunities that expand beyond what is required by HUD:*** Expand and standardize trainings for all staff working within programs, ensure the availability of trainings for staff working all shifts and schedules, make sure that trainings are both culturally appropriate and culturally specific, and encourage full participation in training opportunities. Training topics should include: sensitivity training and working with diverse populations; racial equity and implicit/unconscious bias; domestic violence and human trafficking; HMIS and documentation of services; parents' educational rights; customer service; crisis intervention and de-escalation techniques; Housing First and Harm Reduction approaches; trauma-responsive care and vicarious trauma; case management practices; housing navigation services; self-care and avoiding burnout; and other best practices. Support staff to engage in continuous professional development opportunities such as workshops, conferences, and webinars to stay updated on emerging best practices, new resources, and innovative approaches.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2026

***Improvement Activity #3.2.5. Evaluate case management needs across the system and reduce case management caseloads:*** Establish and enforce clear and consistent standards for client to case manager ratios and for minimum client engagement across all programs based on client needs, staff capacity, and best practices. Dedicate increased funding so that programs can hire more staff and achieve established standards.

**Activity Lead**
HAND and HRD

**Timeframe**
Initiate in 2025

***Improvement Activity #3.2.6. Strengthen partnership with the corrections system:*** Ensure those who are released from long term incarceration don't face additional barriers when obtaining affordable housing and strengthen partnerships with legal programs that assist with eviction prevention, diversion, SSI/SSDI income, and other issues.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

***Improvement Activity #3.2.7. Improve access to public benefits through SOAR training and application processing support:*** Ensure that SOAR-trained specialists are available across the homelessness response system to support the benefits application, appeal, and resolution process for persons experiencing homelessness.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

### Implementation Milestones

- Publication of training calendar and quarterly updates.
- Implement tracking mechanisms to document number of staff who received training and support to enhance their skills and knowledge.
- Collect baseline data documenting feedback from staff.

# ADVOCATE FOR AND SECURE RESOURCES TO EXPAND THE SYSTEM AND IMPROVE QUALITY OF PROGRAMS
## Action Area Manager: **HRD**

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are focused on driving progress toward the following Objectives:

1. Expand organized advocacy efforts focused on achieving increased availability of resources and changes in policies essential for preventing and ending homelessness.

2. Secure an expanded array of resources to better enable the homelessness response system to achieve the community's commitment to connect people quickly and efficiently to housing and services.

## IMPROVEMENT ACTIVITIES

Improvement Objective 4.1
**Expand organized advocacy efforts focused on achieving increased availability of resources and changes in policies essential for preventing and ending homelessness.**

**Objective Lead**
HRD

**Supporting Organizations**
City of Detroit; HAND; CoC; philanthropy; MSHDA; MDHHS; CSH; Enterprise Community Partners (ECP); DWIHN; Michigan Coalition Against Homelessness (MCAH); provider organizations, executives, and boards

*Improvement Activity #4.1.1. Develop a collaborative advocacy agenda and strategy:* Develop a collaborative federal, state, and local advocacy agenda and strategy seeking to secure a wider array of resources for services and housing programs, dedicated and available for people being served through the homelessness response system. In addition to expanded resources, advocacy agenda and strategies should address:

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

- Expectations for other systems to collaborate with homelessness response system to increase coordination, expand resources and services, and help prevent homelessness.

- New state policies that better protect renters from displacement, unreasonable rent increases, lease termination without just cause, credit and eviction reporting protections, and discrimination in the housing search process

- Changes to the Low Income Housing Tax Credit program to work more effectively for funding Permanent Supportive Housing and to support tenants to increase income without the threat of displacement.

*Improvement Activity #4.1.2. Align advocacy efforts:* Align advocacy efforts by creating an advocacy committee (as described in Activity 4.2.3) or some other collaborative structure that is charged with ensuring stronger organization, coordination, and consistent messaging.

**Activity Lead**
HRD and HAND

**Timeframe**
Initiate in 2026

*Improvement Activity #4.1.3. Fund and launch a Detroit-based advocacy collective:* Fund a community-based organization to organize and support ongoing advocacy for resources and policy changes, including to address funding gaps, mandates for system partners, intersectional issues related to housing and healthcare, tenant rights and other related topics.

**Activity Lead:**
HRD

**Timeframe:**
Initiate in 2027

*Implementation Milestones*
- Establish advocacy and resources development agenda

Improvement Objective 4.2

**Secure an expanded array of resources to better enable the homelessness response system to achieve the community's commitment to connect people quickly and efficiently to housing and services.**

**Objective Lead**
Funders Council

**Supporting Organizations**
City of Detroit; HAND; CoC; philanthropy; MSHDA; MDHHS; CSH; ECP; DWIHN; MCAH; provider organizations, executives, and boards

*Improvement Activity #4.2.1. Use CAM-generated data and information to assess needs:* Use CAM-generated data and information to assess needs and gaps in available resources and to make the case for expanded housing and services investments.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #4.2.2. Collaboratively research additional funding streams:* Create a leadership cohort that helps guide partners in researching additional funding streams.

**Activity Lead**
Funders Council

**Timeframe**
Initiate in 2027

*Improvement Activity #4.2.3. Implement a new Resources Committee:* Develop a new Resources Committee that searches for new resources to bring into the system, periodically assesses known resources to determine ongoing viability, and provides support to integrate resources into the system as they come online.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2027

*Implementation Milestones*

- Establish project plans for each activity.
- Annually report on progress securing additional resources for homelessness response system.

# BUILDING UPON EXISTING IMPROVEMENT EFFORTS

## Action Area Manager: **HAND**

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are focused on driving progress toward the following Objectives:

1. Solidify the foundational operations and governance structures of the Coordinated Assessment Model (CAM) and implement improvement efforts across all of CAM's core roles and services, guided by the recommendations and priorities of people with lived experience.

2. Clarify and strengthen CAM's roles and partnerships within the homelessness response system and its connections and coordination with other systems.

3. Assess and strengthen the implementation of programs and services funded through the Youth Homelessness Demonstration Program (YHDP).

4. Advance youth-led implementation of the Coordinated Community Plan to End Youth Homelessness (CCP) and its vision, priorities, and strategies.

5. Apply the vision and guiding principles embraced within YHDP programs and the CCP across all efforts for preventing and ending youth homelessness across the entire homelessness response system.

6. Achieve Functional Zero for Veteran homelessness[4] through the continued implementation of the data-driven Built for Zero initiative.

## IMPROVEMENT ACTIVITIES

### Improvement Objective #5.1
**Solidify the foundational operations and governance structures of the Coordinated Assessment Model (CAM) system and implement improvement efforts across all of CAM's core roles and services, guided by the recommendations and priorities of people with lived experience.**

| Objective Lead | Supporting Organizations |
|---|---|
| HAND | HRD; CoC; Wayne Metro Community Action Agency (WMCAA); Community and Home Supports (CHS); and homelessness services and housing organizations |

*Improvement Activity #5.1.1. Design and implement governance structures for CAM implementation:* Design and implement on-going governance structures specific to CAM implementation, including representation of people with lived experience and providers; ensure that people with lived experience are supported to inform and drive decision-making for continuous improvements on an on-going basis; and strengthen communication and coordination with other CoC governance and committee structures.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

*Improvement Activity #5.1.2. Formalize partnerships and roles within CAM implementation:* Formalize partnerships and roles among the organizations charged with leading CAM implementation, including HAND, Wayne Metro, and Community & Home Supports, to ensure clarity of roles and responsibilities and effective coordination and communication across all implementation and improvement efforts.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

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[4] Functional Zero for Veteran homelessness means that the number of Veterans experiencing homelessness at any time does not exceed the community's proven record of housing at least that many Veterans in a month.

*Improvement Activity #5.1.3. Enhance people's access to CAM information and services:* In alignment with prior and on-going guidance from people with lived experience, enhance people's access to CAM information and services and provide equitable access for people who are unsheltered through expanded hours, the implementation of service models featuring both call center and in-person access sites, transportation services to support people's access to services, streamlined "housing packet" documentation processes, the development of clear and consistent shelter access and referral policies, and other improvements.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

*Improvement Activity #5.1.4. Strengthen prioritization processes within CAM implementation:* Strengthen prioritization processes, including replacing current assessment and prioritization tools and policies that are creating or furthering inequities, and implement and monitor new processes to ensure equity in assessment, prioritization, referrals, and access to services that fall within CAM's scope of responsibilities. Ensure that such improvements better address the unique vulnerabilities of people residing in unsheltered locations.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #5.1.5. Strengthen rapid exit/diversion and problem-solving services for people engaging with CAM services:* Improve rapid exit/diversion and problem-solving services being provided to people being served through CAM, ensuring such opportunities are embedded into every element of engagement with people, providing a wider range of financial assistance, and strengthening case management services offered in alignment with rapid exit/diversion resources and problem-solving services.

**Activity Lead**
HAND and HRD

**Timeframe**
Initiate in 2025

*Improvement Activity #5.1.6. Develop a comprehensive monitoring, reporting, and evaluation plan focused on CAM operations and performance:* Develop a comprehensive monitoring, reporting, and evaluation plan focused on CAM operations and performance, share findings transparently with partners and the community, and use findings to drive future decision-making and improvement processes.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #5.1.7. Implement other improvement efforts responsive to guidance provided by people with lived experience:* Continue to implement other improvement efforts directly responsive to the guidance provided by people with lived experience during CAM planning processes, including: providing more tools and information to help people understand CAM processes and services, the homelessness response system, what people should expect from their engagement with CAM, and what their options are; providing training for staff to ensure people's dignity and autonomy are being valued and affirmed; and other relevant improvements.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2026

### *Implementation Milestones*
- CAM governance structures and MOU among CAM partners in place.
- Implement revised prioritization processes and assess impact on inequities on an ongoing basis.
- Comprehensive monitoring, reporting, and evaluation plan for CAM established.

## Improvement Objective #5.2
**Clarify and strengthen CAM's roles and partnerships within the homelessness response system and its connections and coordination with other systems.**

**Objective Lead**
HAND

**Supporting Organizations**
HRD; CoC; Wayne Metro; and CHS

*Improvement Activity #5.2.1. Develop a shared vision for the CAM system and its roles:* Develop a shared, community-wide vision for the CAM system and its roles within the homelessness response system and other decision-making processes, and actively and transparently promote understanding of that vision and CAM's roles among people experiencing homelessness and people working across the homelessness response system.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

*Improvement Activity #5.2.2. Strengthen CAM's communication, coordination, and partnerships with other programs:* Regularly convene homelessness response system providers and people with lived experience into policy and planning discussions to strengthen CAM's communication, coordination, and partnerships with outreach programs, shelter

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

providers, and housing and voucher programs to ensure consistent information regarding availability of shelter and housing, and to support people, including people who are unsheltered, to access crisis services, shelter options, and housing opportunities more smoothly and quickly.

***Improvement Activity #5.2.3. Develop stronger partnerships between CAM and other systems:*** Develop stronger partnerships and coordination between CAM and other systems, with initial priorities placed on: re-establishing referral partnership with Detroit at Work for access to employment supports and jobs; improving engagement with Detroit Public Schools for coordination with McKinney-Vento resources and supports; and establishing new partnerships and collaborations with health care institutions and respite care programs.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2026

> *Implementation Milestones*
> - Documentation of shared vision for CAM system and its roles transparently promoted.
> - Implement systems for assessing strength of partnerships with other programs and systems.

Improvement Objective #5.3
**Assess and strengthen the implementation of programs and services funded through the Youth Homelessness Demonstration Program (YHDP).**

| **Objective Lead** | **Supporting Organizations** |
| --- | --- |
| YAB, supported by HAND | CoC; HRD; and youth housing and services provider organizations |

***Improvement Activity #5.3.1. Assess the performance and impact of YHDP-funded programs:*** Develop initial baseline data for youth programs, assess the performance and impact of YHDP-funded programs in comparison with existing programs, and use findings to drive changes within all youth programs and across the homelessness response system.

**Activity Lead**
YAB / HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #5.3.2. Engage leadership of youth throughout assessment efforts:*** Sustain and strengthen youth-led processes within all assessment efforts, analysis of findings, and decision-making processes.

**Activity Lead**
YAB / HAND

**Timeframe**
Initiate in 2025

> *Implementation Milestones*
> - Develop baseline data for youth programs by end of 2024 and implement processes for assessing and comparing the performance of YHDP-funded programs.
> - Document and educate CoC and other partners regarding youth-led assessment and analysis processes.

Improvement Objective #5.4
## Advance youth-led implementation of the Coordinated Community Plan to End Youth Homelessness (CCP) and its vision, priorities, and strategies.

**Objective Lead**
YAB, supported by HAND

**Supporting Organizations**
CoC; Committee on Youth Homelessness; HRD; youth housing and services provider organizations; and other youth-serving organizations and systems

***Improvement Activity #5.4.1. Re-integrate CCP implementation processes and decision-making into CoC's Committee on Youth Homelessness:*** Re-integrate CCP implementation processes and decision-making into revived Committee on Youth Homelessness and define Committee's role in prioritizing elements and implementing the CCP, monitoring YHDP program implementation, assessing outcomes, and advancing changes across system

**Activity Lead**
YAB / HAND

**Timeframe:**
Initiate in 2024

***Improvement Activity #5.4.2. Develop guide for funders for future investments into programs for youth:*** Develop quantitative and qualitative data regarding gaps in current array of programs for youth and develop guide for funders to drive future investment decisions.

**Activity Lead**
YAB / HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #5.4.3. Expand cross-system partnerships to advance efforts to prevent and end youth homelessness:*** In alignment with CCP, develop concrete plans for expanded cross-system partnerships with education, mental health, child welfare, juvenile justice, and other systems that may be prioritized, and complete planning and decision-making processes currently underway for determining which other elements of the CCP will be prioritized for implementation.

**Activity Lead**
YAB / HAND

**Timeframe**
Initiate in 2025

***Improvement Activity #5.4.4. Implement additional innovative models for preventing and ending youth homelessness:*** In alignment with the CCP, explore and identify opportunities for implementing additional innovative models for preventing and ending youth homelessness, such as direct cash transfers to youth, host homes, shared housing, interventions for youth aging out of foster care or experiencing other system transitions, and other models.

**Activity Lead**
YAB / HAND

**Timeframe**
Initiate in 2027

### *Implementation Milestones*

- Re-integrate CCP implementation processes and decision-making into revived Committee on Youth Homelessness.
- Develop first version of guide for funders.
- Document and transparently report on the start of enhanced cross-system partnerships.

### The Vision to End Youth Homelessness from the CCP

Our shared Mission and Vision is for youth and young adult voices to be centered and elevated in our collective efforts towards building an equitable and inclusive community where youth and young adults of all backgrounds (LGBTQIA+, BIPOC, parenting, etc.) have access to: safe, stable, and affordable housing; supportive services that use a community coordinated response to offer educational and employment opportunities; spreading awareness and resources through building permanent connections; and any other resources and services that ensure youth homelessness is rare, brief, and non-recurring.

**Improvement Objective #5.5**
**Apply the vision and guiding principles embraced within YHDP programs and the CCP across all efforts for preventing and ending youth homelessness and across the entire homelessness response system.**

| Objective Lead: | Supporting Organizations: |
|---|---|
| YAB, supported by HAND | CoC; Committee on Youth Homelessness; HRD; youth housing and services provider organizations; and other youth-serving organizations and systems |

| | |
|---|---|
| ***Improvement Activity #5.5.1. Integrate youth within decision-making across homelessness response system:*** Identify and document strong practices for engaging and supporting youth within YHDP design and decision-making processes and identify opportunities to integrate aligned practices across all elements of the homelessness response system. | **Activity Lead** YAB / HAND **Timeframe** Initiate in 2024 |
| ***Improvement Activity #5.5.2. Apply YHDP's Vision and Guiding Principles across youth programming and homelessness response system:*** Actively promote and increase awareness of the vision and guiding principles embraced within YHDP programs and the CCP and convene input and planning discussions to identify how that vision and the guiding principles can be applied and/or adapted for other youth programming and other elements of the homelessness response system. | **Activity Lead** YAB / HAND **Timeframe** Initiate in 2025 |
| ***Improvement Activity #5.5.3. Drive changes and decisions responsive to guidance and recommendations from youth:*** Elevate awareness of the guidance and recommendations provided by youth with lived experience and convene planning discussions to determine strategies for driving responsive changes within youth-serving programs and the homelessness response system. | **Activity Lead** YAB / HAND **Timeframe** Initiate in 2025 |
| ***Improvement Activity #5.5.4. Use new funding opportunities to advance YHDP's Vision and Guiding Principles:*** Design and implement mechanisms to ensure that new funding opportunities and initiatives are aligned with and advance the implementation of the vision and guiding principles embraced within YHDP programs and the CCP and that youth are playing decision-making roles regarding implementation of funding and initiatives. | **Activity Lead** YAB / HAND **Timeframe** Initiate in 2026 |

> ***Implementation Milestones***
> - Document expanded representation of youth within decision-making across homelessness response system.
> - Document how an expanded range of youth programming, other elements of homelessness response system, and new funding opportunities are embracing and advancing YHDP's Vision and Guiding Principles.

**Improvement Objective #5.6**
**Achieve functional zero for Veteran homelessness through the continued implementation of the data-driven Built for Zero initiative.**

| Objective Lead | Supporting Organizations |
|---|---|
| Veterans Leadership Committee | U.S. Department of Veterans Affairs (VA); HAND; HRD; CoC; Community Solutions; and housing and services providers serving Veterans |

| | |
|---|---|
| ***Improvement Activity #5.6.1. Analyze reasons for returns to homelessness among Veterans:*** Complete analysis of reasons for returns to homelessness among Veterans and develop collaborative strategies for reducing such returns to homelessness. | **Activity Lead** Veterans Leadership Committee **Timeframe** On-going |
| ***Improvement Activity #5.6.2. Strengthen case management and partnerships among programs serving Veterans:*** Standardize case management and services available across programs and strengthen partnerships and referrals among programs to ensure that Veterans' needs are being consistently and holistically met. | **Activity Lead** Veterans Leadership Committee **Timeframe** On-going |

***Improvement Activity #5.6.3. Expand affordable and desirable housing options for Veterans exiting homelessness:*** Expand the range of housing options and the breadth of partnerships with landlords to fully utilize available housing vouchers for Veterans and to increase housing options that are available to Veterans and that better align with their preferences, interests, and goals.

**Activity Lead**
Veterans Leadership Committee

**Timeframe**
On-going

***Improvement Activity #5.6.4. Enhance case-conferencing practices for Veterans:*** Strengthen case conferencing activities, including engaging Veterans directly into case conferencing discussions, to better address the needs of Veteran households who are returning to homelessness, have complex service needs, and/or are families with children.

**Activity Lead**
Veterans Leadership Committee

**Timeframe**
On-going

***Improvement Activity #5.6.5. Improve and increase diversion strategies with Veterans:*** Focus on better utilization of prevention/diversion services - standardize diversion strategies/interventions across the Veteran housing solutions enterprise, reduce inflow, and alleviate the trauma of homelessness through effective diversion/prevention techniques.

**Activity Lead**
Veterans Leadership Committee

**Timeframe**
On-going

***Improvement Activity #5.6.6. Improve data entry expectations to ensure data is reliable:*** Continue to improve data entry (data field definitions, accuracy, precision, and consistency) in the Homeless Management Information System (HMIS), and assess reports regarding lengths of time through various points in the system and program specific data for HUD-VA Supportive Housing (HUD-VASH), Supportive Services for Veteran Families (SSVF), and Grant and Per Diem (GPD) programs

**Activity Lead**
Veterans Leadership Committee

**Timeframe**
On-going

> ### Implementation Milestones
> - Achievement of functional zero for Veteran homelessness.

# IMPROVEMENT WORK PLAN PART 2: IMPROVING CORE ELEMENTS OF HOMELESSNESS RESPONSE SYSTEM

Part 2 of the Improvement Work Plan identifies Improvement Objectives and Activities for driving progress for specific elements of the homelessness response system, within the following 3 Action Areas:

Action Area 6: **Strengthening and Reimagining Shelter**

Action Area 7: **Expanding Housing Supply and Building an Effective Rehousing System**

Action Area 8: **Reducing Unsheltered Homelessness**

# STRENGTHENING AND REIMAGINING SHELTER

## Action Area Manager: **HRD**

## IMPROVEMENT OBJECTIVES

Activities within this Action Area are designed to drive progress toward the following Objectives:

1. Enhance the quality of facilities currently being used as shelter.

2. Expand the supply and range of models of emergency shelter options available within the community.

3. Enhance the services available within shelter programs to better meet people's needs and improve housing and quality of life outcomes for residents.

4. Ensure people experiencing homelessness and people working within programs and at the system-level, understand the options for shelter and services and the expectations for programs, providers, and system leaders.

5. Foster stronger person-centered cultures within shelter programs by ensuring that all funders and providers are accountable for fully supporting people's autonomy and dignity, for treating and valuing all people equitably, and for embracing and implementing best practices.

## IMPROVEMENT ACTIVITIES

### Improvement Objective #6.1
**Enhance the quality of facilities currently being used as shelter.**

| Objective Lead | Supporting Organizations |
|---|---|
| HRD | City of Detroit; HAND; CoC; MSHDA; MDHHS; funders and philanthropic organizations; shelter provider organizations; DAG; and YAB |

***Improvement Activity #6.1.1. Ensure people's safety and health is protected within shelter programs:*** Assess and address health and safety issues, security concerns, and physical environments within shelters, warming centers, and overflow spaces, with expectation that some changes will require new investments and capital improvements to the physical environments of shelters.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024

***Improvement Activity #6.1.2. Improve shelter environments to be more appropriate for residential uses and more welcoming and affirming:*** Develop a detailed plan for, and implement, improvements to shelter environments that will ensure that all facilities feel more residential and are more welcoming and affirming for the full diversity of people accessing shelter. Partner with people with lived experience to identify priorities for improvements to ensure all shelters provide equitable and accessible spaces and services, with the expectation that significant changes will require new investments.

**Activity Lead**
HRD

**Timeframe**
Initiate planning work in 2024 and 2025, then ongoing

#### *Implementation Milestones*
- Processes for gathering shelter residents' safety and security concerns, and recommendations for specific improvement to shelter environments launched.
- Publish report on planned improvements to emergency shelter facilities.

Improvement Objective #6.2
**Expand the supply and range of models of emergency shelter options available within the community.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HRD | City of Detroit; HAND; CoC; MSHDA; MDHHS; funders and philanthropic organizations; shelter provider organizations; DAG; YAB; and DWHIN |

*Improvement Activity #6.2.1. Assess options to expand and redesign shelter options and implement different models to better meet the diverse needs of individuals and families:* Explore the range of alternative shelter models being implemented in other communities, develop deeper understanding of models and outcomes, and pursue funding and opportunities to test the most promising models in Detroit. Proactively inventory and assess vacant land, vacant or underutilized buildings, and neighborhoods that can provide new opportunities for developing and implementing new shelter options to ensure equity in distribution of programming throughout the community.

**Activity Lead**
HRD

**Timeframe:**
Initiate in 2024 with development of work plan for activity

*Improvement Activity #6.2.2. Expand the supply of shelter options:* Expand the supply of emergency shelter options. Prioritize de-congregating existing programs and the implementation of new non-congregate shelter options with enhanced privacy and independence, facilities that are fully accessible to people with disabilities, and shifting programs to 24/7 operating hours to support greater dignity, security, and improved outcomes. This will generally require new investment in existing and new shelter/interim housing sites. Consideration should also be made to ensuring shelter/interim housing programs are in geographically diverse locations across the City of Detroit.

**Activity Lead**
HRD

**Timeframe**
Continue in 2024 and beyond

> *Implementation Milestones*
> - Process for assessing models and options for expanding and redesigning shelter options launched.
> - Publish report on vision for supply of emergency shelter options.

Improvement Objective #6.3
**Enhance the services available within shelter programs to better meet people's needs and improve housing and quality of life outcomes for residents.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HRD | City of Detroit; HAND; CoC; MSHDA; MDHHS; funders and philanthropic organizations; shelter provider organizations; DAG; YAB; and DWHIN |

*Improvement Activity #6.3.1: Enhance the quality of housing case management provided by shelters:* Strengthen and standardize housing case management across shelters for both residents who are connected to CoC resources and those who are not immediately prioritized for CoC housing resources.

**Activity Lead**
HRD
**Timeframe**
Initiate in 2024

*Improvement Activity #6.3.2 Improve and enhance transportation services to improve access to available shelter and community services:* Improve transportation access to community resources for residents staying in shelters. Ensure the unique needs of different household types and populations are accommodated.

**Activity Lead**
HRD
**Timeframe**
Initiate in 2024

*Improvement Activity #6.3.3: Improve access to a more holistic range of services:* Ensure all shelters are providing access to a holistic range of services to shelter residents that address their mental health and emotional needs and honor and embrace people's identities, either on-site or through connections to community programs.

**Activity Lead**
HRD
**Timeframe**
Initiate in 2025

*Improvement Activity #6.3.4. Improve health care access in shelters:* Continue to implement and assess impact of current initiatives intended to improve shelter participants' access to physical and behavioral health care services and determine if expanded or additional activities are needed to improve health care access.

**Activity Lead**
HRD
**Timeframe**
Initiate in 2025

*Implementation Milestones*

- Processes for gathering shelter residents' satisfaction with and recommendations for services in shelters, including housing placement supports, launched.
- Determine if expanded or additional activities are needed to improve health care access.
- Publish report on planned improvements to services within emergency shelter facilities.

## Improvement Objective #6.4

**Ensure people experiencing homelessness, and people working within programs and at the system-level, understand the options for shelter and services and the expectations for programs, providers, and system leaders.**

**Objective Lead**
HRD

**Supporting Organizations**
HAND; CoC; City of Detroit; MSHDA; MDHHS; funders and philanthropic organizations; shelter provider organizations; DAG; and YAB

*Improvement Activity #6.4.1. Educate people regarding shelter options, operations, and their rights:* Develop informational materials that explain how to access shelter and all parts of homelessness response system and services available, and how to access the CAM system and its roles and services. Strengthen current efforts to publicize shelter residents' rights and responsibilities, including grievance process, and provide training for residents in shelters regarding their rights and how to navigate the system and housing options. Design and promote opportunities for people with lived experience to provide input and inform decision-making, and actively promote funding awards made and transparently communicate the programs and services supported by that funding. Design system-wide feedback mechanisms for residents to provide input on their experiences in shelter and use this data to improve service delivery across providers.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024

*Improvement Activity #6.4.2. Strengthen coordination across shelter providers and programs:* Promote greater coordination across shelter providers by instituting shared processes of gathering shelter residents' satisfaction with services; developing system-wide methods to educate frontline shelter staff on shelter options, operations, and resident rights; holding regular check-ins and meetings with all shelter leaders; and other activities that promote collaboration and alignment across providers.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

*Implementation Milestones*

- Updated informational materials are published and regularly updated.
- Regular meetings across shelter providers and programs, including executives of organizations that offer shelter, continue and are assessed for effectiveness and areas of improvement.
- Processes for testing frontline shelter staff understanding of shelter options, operations, and shelter resident rights launched and findings are used to improve materials and coordination.
- Processes for gathering shelter residents' satisfaction with shelter options, operations, and their resident rights launched, and findings are published and used to improve materials/coordination and provide transparency and accountability.

Improvement Objective #6.5
**Foster stronger person-centered cultures within shelter programs by ensuring that all funders and providers are accountable for fully supporting people's autonomy and dignity, for treating and valuing all people equitably, and for embracing and implementing best practices.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| Funders Council | City of Detroit; HAND; CoC; MSHDA; MDHHS; funders and philanthropic organizations; shelter provider organizations; DAG; YAB; and DWHIN |

*Improvement Activity #6.5.1. Establish and enforce standardized expectations among funders and shelter providers:* Through collaborative efforts between funders, providers, and people with lived experience, establish, monitor, and enforce standardized expectations and formal agreements between funders and programs to promote the safety, dignity, and autonomy of program participants through policies, practices, services, staffing, case management expectations, funder activities, and capacity-building strategies. Expectations should include a focus on:

- Person-centered and trauma-informed practices
- Data-driven decision-making
- Designing and improving services to shorten lengths of time to housing, improve exits to permanent housing, reduce returns to homelessness, and create housing plans based on the individual needs of households
- Providing low-barrier options for populations not desiring to participate in shelter services
- Honoring and valuing people's cultures and identities, including LGBTQIA+ identities
- Using Housing First and Harm Reduction approaches
- Minimizing shelter rules and eliminating "morality policing"
- Confidentiality practices
- Ability to work with people in different languages
- After hours entry capacity
- Accommodating all cultural, dietary, and work-related needs within meal programs, including self-preparation
- Reducing unsheltered homelessness and eliminating barriers to enrollment that limit crisis response and housing options for people experiencing unsheltered homelessness

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024

*Improvement Activity #6.5.2. Implement trauma-responsive practices in shelter programs:* Deepen trauma-responsive care practices across all shelters through consistent training and monitoring of implementation. Ensure that staff working within shelters are supported with an understanding of their past, current, or secondhand experiences of trauma.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

*Implementation Milestones*
- Updated agreements reflecting standardized expectations between funders and providers.
- Launch process for testing frontline shelter staff understanding of trauma-responsive practices and use these findings to improve processes, practices, and staff trainings.

# EXPANDING HOUSING SUPPLY AND BUILDING AN EFFECTIVE REHOUSING SYSTEM
## Action Area Manager: **HRD**

## IMPROVEMENT OBJECTIVES:
Activities within this Action Area are focused on driving progress toward the following Objectives:

1. Expand supply of deeply affordable rental housing to reduce housing instability and provide more options for people exiting homelessness, especially for high-need populations.

2. Expand the supply of housing options with appropriate services that are specifically designed to support people to end their homelessness.

3. Develop and implement system-level, coordinated policies and practices essential for operating efficient rehousing activities that cut across program types and for improving client experiences and outcomes.

4. Redesign and strengthen the delivery of Housing Navigation services and supports to ensure the provision of consistent, high-quality, and flexible services to people accessing all forms of permanent housing.

5. Implement comprehensive, system-level landlord engagement, unit cultivation, and accountability strategies to enhance people's ability to secure housing to end their homelessness.

6. Enhance and standardize the quality of Permanent Supportive Housing to prevent loss of housing and returns to homelessness.

7. Enhance services and supports to support people to secure housing and successfully end their homelessness.

## IMPROVEMENT ACTIVITIES

Improvement Objective #7.1
**Expand supply of deeply affordable rental housing to reduce housing instability and to provide more options for people exiting homelessness, especially for high-need populations.**

**Objective Lead:**
HRD

**Supporting Organizations**
HAND; Mayor's Office; DHC; MSHDA; MDHHS; CoC; Funders Council

***Improvement Activity #7.1.1. Build new deeply affordable rental housing:*** Build new deeply affordable rental housing, especially units that have rents that are affordable to households earning less than the City of Detroit's median income. Target and/or prioritize a set-aside of these housing opportunities to specific high-need populations that disproportionately experience homelessness.

**Activity Lead**
HRD

**Timeframe**
Continue in 2024 and ongoing

***Improvement Activity #7.1.2. Deepen income targeting requirements in City-funded or supported developments:*** Deepen income targeting requirements in City-funded or supported developments, both requiring a greater percentage of income-restricted units and requiring lower rent levels, to serve more lower-income Detroiters. Target and/or prioritize a set-aside of these housing opportunities to specific high-need populations that disproportionately experience homelessness.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

***Improvement Activity #7.1.3. Explore and pilot innovative housing models:*** Explore and pilot innovative housing models to increase the supply and range of housing options, including shared housing with individual leases, host homes, using school buildings and commercial spaces, and housing opportunities for specific underserved populations.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

***Improvement Activity #7.1.4. Improve property management practices in publicly funded housing developments:*** Establish and require enhanced practices in property management

**Activity Lead**
HRD

for affordable and supportive housing properties receiving public funding from or partnering with public agencies like the Michigan State Housing Development Authority or the Detroit Housing Commission.

**Timeframe**
Initiate in 2025

*Improvement Activity #7.1.5. Determine best way that CoC could advance development of quality affordable housing:* Explore and identify the appropriate roles for the CoC in advancing the development of quality affordable housing, which could include ensuring the quality of buildings/units, raising awareness of the issue of homelessness, dispelling stereotypes and harmful narratives about residents experiencing homelessness, siting Permanent Supportive Housing in high-opportunity neighborhoods, and funding the rehabilitation of existing Permanent Supportive Housing units.

**Activity Lead**
HAND, HRD, and Funders Council

**Timeframe**
Initiate in 2026

*Implementation Milestones*

- Increase annual access to Other Permanent Housing options.
- Key partners convened and workplan developed to achieve this objective.
- Evaluate improvements.

## Improvement Objective #7.2
**Expand the supply of housing options with appropriate services that are specifically designed to support people to end their homelessness.**

**Objective Lead:**
HAND or HRD

**Supporting Organizations**
HRD/HAND; Mayor's Office; DHC; MSHDA; MDHHS; DWIHN; RRH providers; PSH providers; outreach and shelter providers; landlords; healthcare and behavioral health organizations; VA; CoC; Funders Council; DAG; and YAB

*Improvement Activity #7.2.1. Design and fund wraparound services and support to households who are exiting homelessness using a housing voucher:* Analyze data, assess needs, and design and fund supportive services for those who receive vouchers but are not enrolled in Rapid Rehousing or Permanent Supportive Housing. Determine how to provide wraparound support for these households to be rehoused and provide for up to six months after lease-up to prevent loss of housing and returns to homelessness.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024

*Improvement Activity #7.2.2. Design and fund new Rapid Rehousing program models:* Design and fund new Rapid Rehousing program models and secure units through innovative mechanisms, such as: Rapid Rehousing targeted to specific priority populations with services tailored to address their specific needs; master-leasing units Rapid Rehousing participants can quickly access and then take over the lease at the end of the Rapid Rehousing term; Rapid Rehousing program that provides only case management and housing navigation resources for households who have adequate income and do not need financial assistance, but who do need help navigating the housing search process.

**Activity Lead**
HAND

**Timeframe**
Initiate with program design in 2025

*Improvement Activity #7.2.3. Fund new Permanent Supportive Housing, including designing new program models:* Fund new Permanent Supportive Housing options, including designing new program models, including models for specific priority populations with services tailored to their specific needs. Capital investment will be needed to cover costs of development and acquisition for new build, conversion, or rehabilitated buildings. Ongoing funding for rental assistance/operating costs and robust supportive services will be required for all types of PSH, including single site, scattered site, and integrated housing. The funding will need to be designed to support projects that are sponsor-based or tenant-based. The funding for capital, operations, and services should be identified to ensure all new PSH meets quality standards and is sustainable in the long-term.

**Activity Lead**
HAND and HRD (HAND leads on program models and HRD leads on development project pipeline)

**Timeframe**
Initiate design processes in 2025

*Implementation Milestones*

- Expand RRH and PSH annual slots.
- Key partners convened and workplan developed to achieve this objective, including a plan to expand funding sources.

- Process launched for gathering participants' satisfaction with PSH and RRH and findings used to implement additional improvements.
- Evaluate any expansion programs.

Improvement Objective #7.3
**Develop and implement system-level, coordinated policies and practices essential for operating efficient rehousing activities that cut across program types and for improving client experiences and outcomes.**

**Objective Lead**
HAND or HRD

**Supporting Organizations**
City of Detroit; DHC; MSHDA; MDHHS; DWIHN; RRH providers; PSH providers; outreach and shelter providers; landlords; healthcare and behavioral health organizations; VA; CoC; Funders Council; DAG; and YAB

*Improvement Activity #7.3.1. Improve data collection to identify ways to make the voucher lease-up process more effective and efficient:* In coordination with system partners like HRD, improve data collection on actual lease-ups for MSHDA and DHC voucher holders, evaluate pre- and post- lease up processes with voucher holders to make these processes more trauma informed, and analyze for disparities based on race, gender, disability, and LGBTQIA+ status.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

*Improvement Activity #7.3.2. Improve and streamline workflows across housing systems and partners:* Improve and streamline workflows and processes between MSHDA, DHC, housing agents, homelessness service providers, landlords, CAM, and residents to speed up processing rental payments, ensure units are high quality, enhance communication to residents and landlords, ease paperwork submission challenges for residents, improve recertification processes, facilitate better data integration between HMIS and the voucher lists, and close services gaps. Identify opportunities to better meet the needs of various groups, such as people with disabilities, seniors, English language learners, and youth. This should include the CAM processes related to the universal application for housing resources.

**Activity Lead**
Funders Council

**Timeframe**
Initiate in 2024, then ongoing through end of Plan

*Improvement Activity #7.3.3. Explore housing strategies to prevent future inflow into the homelessness response system:* Explore new ways and strengthen existing programs to prevent future inflow into the homelessness response system, including programs to serve households facing eviction, people who are doubled-up, or people living in hotels/motels due to the lack of alternative, adequate accommodations.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024 and 2025

*Improvement Activity #7.3.4. Test ways to improve voucher utilization and reduce time from homelessness to stability:* Building upon the Sheltered Housing Placement initiative, design and fund a flexible funding pilot for those who are designated to receive a voucher, testing ways to improve voucher utilization and reduce time from homelessness to housing stability, and improve the collection and sharing of data among all partners involved.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

*Improvement Activity #7.3.5. Create a cross-sector coalition to support the updated rehousing system:* Build a multi-disciplinary coalition of housing commissions, housing navigators, developers, landlords, housing inspectors, and others to engage and support collaborative system alignment, information sharing and goal setting.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

*Implementation Milestones*
- Convene the housing partners and develop a workplan to complete the initial workflow redesign.
- Convene the key voucher partners and establish a workplan to analyze currently available data about the lease-ups for voucher holders disaggregated by key demographic information.
- Determine best ways to expand the rehousing system to serve unsheltered people and implement initiatives.
- Convene the cross-sector coalition.

- Launch process for gathering participants' satisfaction with rehousing services and other housing placement supports with findings published and used to implement additional improvements.
- Establish data tracking and reporting process to identify rate of housing placement and time to housing and compare across all program types, disaggregated by key demographic information.

## Improvement Objective #7.4

**Redesign and strengthen the delivery of Housing Navigation services and supports to ensure the provision of consistent, high-quality, and flexible services and supports to people accessing all forms of permanent housing.**

**Objective Lead**
HAND

**Supporting Organizations**
HRD; Mayor's Office; DHC; MSHDA; MDHHS; DWIHN; RRH providers; PSH providers; outreach and shelter providers; landlords; healthcare and behavioral health organizations; VA; CoC; Funders Council; DAG; and YAB

*Improvement Activity #7.4.1. Comprehensively re-design the processes that support rehousing to be more effective and consistent across all housing programs:* Clarify the roles and responsibilities of emergency shelter/interim housing staff, case managers, permanent supportive housing providers, rapid rehousing providers, and housing navigation staff. Review best practices and explore how other communities are providing rehousing services. Design dedicated staff positions to provide housing navigation and housing location services. Ensure all processes and services are trauma-informed and designed to better meet the needs of various groups, such as people who are unsheltered, people with disabilities, seniors, English language learners, and youth.

**Activity Lead**
HAND

**Timeframe**
Initiate design process in 2025 for implementation in 2026 and 2027

*Improvement Activity #7.4.2. Fund and provide additional, dedicated staff who provide individualized housing navigation services:* Fund and provide additional, dedicated housing navigation staff for all types of rehousing system programs to assist people during the process from start to move-in, including ensuring access to services for people who are unsheltered. These positions would be separate from positions that provide landlord engagement, case management, or housing location services.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #7.4.3. Fund and provide dedicated staff who provide individualized housing location services:* Fund and provide dedicated housing location staff for all types of rehousing system programs to cultivate a range of housing options that can be accessed by staff and clients engaged in housing navigation services. These staff would interface with landlords, manage rent negotiation, etc., for the homelessness response system rather than for individual programs. These positions would be separate from positions that provide landlord engagement, case management, or housing navigation services.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #7.4.4. Fund and create participant flex funds to expedite move-in:* Implement flexible funds throughout the homelessness response system to support costs for housing applications, security deposits, transportation during housing search, move-in costs, furniture, and other household needs.

**Activity Lead**
Funders Council

**Timeframe**
Initiate in 2025

*Implementation Milestones*
- Convene the key partners and develop a workplan to implement these Activities.
- Process launched for gathering participants' satisfaction with Housing Navigation services and supports and findings published and used to implement additional improvements.
- Evaluate program and system improvements.

Improvement Objective #7.5
**Implement comprehensive, system-level landlord engagement, unit cultivation, and accountability strategies to enhance people's ability to secure housing to end their homelessness.**

**Objective Lead**
HRD

**Supporting Organizations**
City of Detroit, DHC; MSHDA; MDHHS; DWIHN; RRH providers; PSH providers; outreach and shelter providers; landlords; healthcare and behavioral health organizations; VA; CoC; Funders Council; DAG; and YAB

*Improvement Activity #7.5.1. Design a comprehensive approach to landlord engagement, incentives, and accountability:* Coordinate landlord engagement and accountability across the rehousing system, which could include establishing a standard set of incentives and requirements, such as funds for minor repairs to improve units before move-in, risk mitigation funds to cover costs of tenant damages, supplement security deposits, etc. Develop requirements for landlords to be able to receive incentives, such as being willing to accept clients with histories of homelessness and housing barriers (evictions, poor/no credit, justice engagement) or allowing tenants to make safety modifications that the tenant can operate for personal safety. Explore feasibility of developing pool of quality units or universal landlord database that can accommodate a range of unit sizes and family configurations.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

*Improvement Activity #7.5.2. Recruit and educate landlords to participate in the comprehensive landlord engagement strategy and to support their success in partnerships with housing programs:* Create a centralized, system-level landlord engagement strategy, including the addition of a landlord/developer CoC board position to unify system and assist with advocacy for community needs and increasing landlord/developer buy-in for working with homelessness response system clients. Identify necessary training needs and build training program for landlords to educate them on intricacies of housing programs and voucher programs, as well as the benefits of being involved in these programs.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

*Improvement Activity #7.5.3. Pilot creating a pool of pre-inspected units that are at or below the Fair Market Rent (FMR):* Using national best practices, pilot a local approach to create a pool of units that have been pre-inspected and reviewed for Fair Market Rent to be sure cost of utilities is considered in determining the affordability of units. Engage with independent contractors to carry out inspections to ensure clients do not need to wait for repairs to be made prior to lease-up.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

*Improvement Activity #7.5.4. Develop innovative ways to address minor unit quality issues:* Explore developing a training program through which people from workforce development programs make minor repairs within units to address quality and inspection issues.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

*Implementation Milestones*
- Convene the key partners and develop a workplan to implement these Activities.
- Process launched for gathering participants' satisfaction with landlord engagement, units, and supports; findings used to implement additional improvements.
- Process launched for gathering rehousing staff members' satisfaction with landlord engagement, units, and supports; findings published and used to implement additional improvements.
- Process launched for gathering participating landlords' satisfaction with engagement and supports; findings published and used to implement additional improvements.
- Evaluate program and system improvements.

## Improvement Objective #7.6
**Enhance and standardize the quality of Permanent Supportive Housing and prevent loss of housing and returns to homelessness**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HAND | City of Detroit; DHC; MSHDA; MDHHS; DWIHN; RRH providers; PSH providers; outreach and shelter providers; landlords; healthcare and behavioral health organizations; VA; CoC; Funders Council; DAG; and YAB |

*Improvement Activity #7.6.1. Update and ensure accountability to clear program and performance standards:* Update, implement, review, and monitor existing and new Permanent Supportive Housing providers (all entities who develop, operate, manage, or provide services) for compliance with clear program and performance standards, including but not limited to: client to case manager ratios; staff credentials; separate staff for property management and case management; robust services; accessible units for people with disabilities; ongoing compliance with housing quality standards; and other standards prioritized by people with lived experience, including people living in Permanent Supportive Housing programs. Review funding, staffing levels, system training for all PSH staff, etc. to be sure all PSH programs can meet program and performance standards. These standards should be used to inform activity 7.2.2 (fund new PSH).

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Improvement Activity #7.6.2. Reduce terminations from Permanent Supportive Housing:* Analyze termination data, assess needs, and design and test housing retention services to reduce terminations from Permanent Supportive Housing and risks of people returning to homelessness.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

### Implementation Milestones
- Convene the key partners by June 2024 and develop a workplan to implement these Activities.
- Process launched for gathering participants' satisfaction with access to services and supports in early 2025; findings used to implement additional improvements.
- Evaluate program and system improvements beginning in 2026.

## Improvement Objective #7.7
**Enhance services and supports to support people to secure housing and successfully end their homelessness.**

| **Objective Lead** | **Supporting Organizations** |
|---|---|
| HRD | HAND; DHC; MSHDA; MDHHS; DWIHN; RRH providers; PSH providers; outreach and shelter providers; landlords; healthcare and behavioral health organizations; VA; CoC; Funders Council; DAG; and YAB |

*Improvement Activity #7.7.1. Strengthen case conferencing structures:* Strengthen the facilitation and the use of CAM-generated data and information within case conferencing structures in the homelessness response system for different populations or across program types.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2024

*Improvement Activity #7.7.2. Improve access to community supports and services:* Foster improved system integration and prioritize trauma-responsive care to connect clients to wraparound community supports and services to enhance client stability, reduce returns to homelessness, and improve the overall effectiveness of the rehousing system.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

### Implementation Milestones
- Convene the key partners by December 2024 and develop a workplan to implement these Activities.
- Process launched for gathering participants' satisfaction with access to services and supports in early 2025 and findings used to implement additional improvements.
- Evaluate program and system improvements beginning in 2026.

# REDUCING UNSHELTERED HOMELESSNESS

## Action Area Manager: **HRD**

## | IMPROVEMENT OBJECTIVES

Activities within this Action Area are focused on driving progress toward the following Objectives:

**1.** Convene all system stakeholders to work toward a unifying, system-wide strategy for engagement, navigation, and rehousing supports for persons experiencing unsheltered homelessness focused on system goals, objectives, roles and responsibilities, and evidence-based activities associated with reducing unsheltered homelessness.

**2.** Strengthen the practice of outreach services by building the capacity and resources of outreach providers to engage and rehouse persons experiencing unsheltered homelessness using evidence-based practices.

**3.** Ensure that outreach teams and services have access to the types of housing options and strategies for all engaged outreach participants that will enable participants to explore and secure their own housing resolution pathway.

## | IMPROVEMENT ACTIVITIES

Improvement Objective #8.1
**Convene all system stakeholders to work toward a unifying, system-wide strategy for engagement, navigation, and rehousing supports for persons experiencing unsheltered homelessness focused on system goals, objectives, roles and responsibilities, and evidence-based activities associated with reducing unsheltered homelessness.**

**Objective Lead**
HRD

**Supporting Organizations**
HAND; City of Detroit Police Department (DPD); Detroit Health Department (DHD); DWIHN; CoC; organizations providing outreach services; YAB; DAG; Regional Transit authority of Southeast Michigan (RTA); neighboring jurisdictions adjacent to CoC

*Improvement Activity #8.1.1. Develop an operations plan for outreach services and partners:* Develop an Outreach Operations Plan that defines daily system management activities and responsible entities who will contribute to reductions in unsheltered homelessness and accelerated access to housing resolution for persons experiencing homelessness in unsheltered locations. Elements of the Operations Plan will address the following:

- Housing resolution as the core focus, informing all elements of outreach, engagement, health and safety risk assessment, and care coordination.
- Relocation or incarceration of individuals experiencing unsheltered homelessness is not the preferred approach and will only be performed in the most limited and prescribed of circumstances.
- Clearly defined roles and responsibilities of all major partners contributing to the Operational Plan.
- Alignment and coordination between outreach teams and other service providers working with residents experiencing unsheltered homelessness.
- Positive housing outcomes that are tailored to the needs of individual households.
- Performance metrics for measuring progress in stakeholder engagement and reductions in unsheltered homelessness.
- Funding strategy to support system improvement activities.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024, complete in 2025

***Improvement Activity #8.1.2. Define guidelines for assessing health and safety risks:***
Define objective and evidence-based guidelines for assessing health and safety risks associated with specific behaviors and/or living conditions of unsheltered persons such that those behaviors and/or conditions that warrant involuntary commitment to a psychiatric crisis unit for short-term residential stays. Ensure adherence to the guidelines by all relevant partners.

**Activity Lead**
DWIHN

**Timeframe**
Initiate in 2025

### Implementation Milestones

- Outreach Operations Plan adopted which directs key partners and supporting organizations in reinforcing community-wide strategies to reduce unsheltered homelessness and partnership roles contributing to Outreach Operations Plan implementation.
- Collaboratively developed MOU fully executed among all key City of Detroit departments, HAND, and CoC establishing a system-wide unsheltered strategy focused on rehousing and minimizing relocation and addressing performance benchmarks, communication strategies, written resource materials that support engagement, housing navigation, and rehousing supports.
- Develop, adopt, and train partners on use of an objective health and safety risk assessment tool to assess health and safety status of individuals.

## Improvement Objective #8.2
**Strengthen the practice of outreach services by building the capacity and resources of outreach providers to engage and rehouse persons experiencing unsheltered homelessness using evidence-based practices.**

**Objective Lead**
HRD

**Supporting Organizations**
HAND; DPD; DHD; DWIHN; organizations providing outreach services

***Improvement Activity #8.2.1. Establish outreach practice standard:*** Establish an outreach practice standard that describes essential elements of street outreach services, engagement practices, navigation supports, and housing-focused case management.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

***Improvement Activity #8.2.2. Provide annual training and capacity building opportunities:***
Provide annual training and capacity building opportunities to City-funded outreach providers. Extend training opportunities to community-based providers of outreach. Training includes critical time intervention (CTI), harm reduction, trauma-responsive service strategies, and housing-focused case management strategies for persons experiencing unsheltered homelessness.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2025

***Improvement Activity #8.2.3. Develop solutions to increase connections to technology and the internet for unsheltered residents:*** Connect residents who are unsheltered to the internet and technology to enhance the frequency, quality, and consistency of communication among program participants and their assigned case worker to support case coordination and housing placement., etc.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

***Improvement Activity #8.2.4.: Establish multi-disciplinary Outreach teams:*** Establish multi-disciplinary Outreach teams with peer specialists and specialized staff for psychiatric care, health care, employment, housing search and location, and securing public benefits. Explore Healthcare for the Homeless and ACT team models as a resource for this Improvement Activity.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2026

### Implementation Milestones

- Outreach Practice Standards are developed and fully implemented by City-funded outreach providers.
- Outreach training curricula developed and in place that offers capacity building opportunities in the following topics: Housing First practices; engaging participants who are resistant to services; critical time intervention; harm reduction practices; housing-focused case management in a street-based setting; reducing barriers to

housing location; providing engagement services in a manner that affirms sexual orientation and gender identity of individuals; and supporting participants in managing their obligations as lease holders.

- Ongoing funding source secured for technology needs.

## Improvement Objective #8.3

**Ensure that outreach teams and services have access to the types of housing options and strategies for all engaged outreach participants that will enable participants to explore and secure their own housing resolution pathway.**

**Objective Lead**
HRD

**Supporting Organizations**
HAND; organizations providing outreach services

*Improvement Activity #8.3.1. Evaluate the CoC's current structured housing planning template for outreach teams and develop recommendations for improvement:* Evaluate the current housing planning template built into HMIS that pulls in participant data, case manager activities, housing documentation, referral options, and housing planning next steps with time frames and points of contact for follow-up. Determine effectiveness of tool and improve, streamline, and align structured housing planning templates across street outreach teams.

**Activity Lead**
HRD

**Timeframe**
Initiate in 2024

*Improvement Activity #8.3.2. Update CAM operations to streamline access for unsheltered persons:* Implement improvements to documentation status and tracking, housing application status and tracking, and communication processes, including regular updates, identification of missing information, next steps to complete housing packets, and entities responsible for advancing the housing packet.

**Activity Lead**
HAND

**Timeframe**
Initiate in 2025

*Implementation Milestones*

- Recommendations developed for improving current housing planning template.
- CAM and HMIS technology are leveraged to include more granular tracking of housing packet status, referral status, and next steps.

# V.
# Appendices

# APPENDIX A:
# ACRONYMS & PROGRAM MODEL DESCRIPTIONS

## Acronyms

The following acronyms may be found within this Plan:

| | |
|---|---|
| **BIPOC:** | Black, Indigenous, and Other Persons of Color (BIPOC) |
| **CAM:** | Coordinated Assessment Model |
| **CCP:** | Coordinated Community Plan to End Youth Homelessness |
| **CoC:** | Continuum of Care |
| **DAG:** | Detroit Advisors Group |
| **DPD:** | City of Detroit Police Department |
| **DHC:** | Detroit Housing Commission |
| **DHD:** | Detroit Health Department |
| **DDOT:** | Detroit Department of Transportation |
| **DV/IPV:** | Domestic Violence / Intimate Partner Violence |
| **DWIHN:** | Detroit Wayne Integrated Health Network |
| **ES:** | Emergency Shelter |
| **HAND:** | Homeless Action Network of Detroit |
| **HCV:** | Housing Choice Vouchers |
| **HMIS:** | Homeless Management Information System |
| **HRD:** | City of Detroit Housing and Revitalization Department |
| **HUD:** | U.S. Department of Housing and Urban Development |
| **LGBTQIA+:** | Lesbian, Gay, Bisexual, Transgender, Queer and/or Questioning, Intersex, Asexual/Aromantic/Agender |
| **MDHHS:** | Michigan Department of Health and Human Services |
| **MSHDA:** | Michigan State Housing Development Authority |
| **OPH:** | Other Permanent Housing |
| **PWLEH:** | Persons with Lived Experience of Homelessness (PWLEH) |
| **PSH:** | Permanent Supportive Housing |
| **RRH:** | Rapid Rehousing |
| **SH:** | Safe Haven |
| **SO:** | Street Outreach |
| **SOAR:** | Supplemental Security Income/Social Security Disability Insurance Outreach, Access, and Recovery |
| **SPOC:** | Strategic Plan Oversight Commission |
| **TA:** | Technical Assistance |
| **TANF:** | Temporary Assistance for Needy Families |
| **TH:** | Transitional Housing |
| **VA:** | U.S. Department of Veterans Affairs |
| **YAB:** | Youth Action Board |
| **YHDP:** | Youth Homelessness Demonstration Program |

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Appendix A: Acronyms and Program Model Descriptions

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# Program Model Descriptions

The following program models represent core elements of the homelessness response system, including both crisis response and rehousing program models, that were included within System Modeling activities.

## Crisis Response Program Models

### Homelessness Prevention

A set of strategies to assist people in maintaining their housing and/or prevent them from entering the homeless system. Strategies are accessible and are integrated with other mainstream services.

**Description**

Emergency financial assistance to help lease holders and mortgage holders avoid imminent homelessness due to code violations, arrearages, or other financial crises. Supportive services and financial assistance associated with housing retention or relocation assistance, and advocacy and mediation to mitigate factors leading to imminent homelessness.

**Essential Program Elements**

Prevention services include flexible funding, direct case management, support for vital document collection, employment assistance, leads for safe alternative housing resources. Funding is used to provide modest financial assistance which may cover current and back rent, security deposits, current and back utility payments to prevent people from entering the homeless system. Services include direct client support and follow-up case management to ensure client maintains stable housing.

**Target Population**

Households in occupied, foreclosed or code deficient homes and apartments, often without utility access. Households are at imminent risk of homelessness within 14 days. Some participants must be relocated to avoid homelessness.

### Rapid Exit/Diversion

Financial assistance and problem-solving assistance to resolve the immediate housing crisis.

**Description**

Housing problem solving and emergency financial assistance to help people avoid imminent homelessness or rapidly resolve current homelessness. The goal is immediate housing stability. Interventions include supportive services, advocacy, and mediation to mitigate factors leading to or prolonging imminent homelessness.

**Essential Program Elements**

Assistance includes helping with finding, applying for, and moving into stable, affordable, and permanent housing. Case managers conduct housing and needs assessment. Participants are diverted from shelter through landlord mediation, family outreach and mediation, legal services, access to financial prevention assistance, and negotiation and advocacy on behalf of client to avoid homelessness.

**Target Population**

Households calling CAM, requesting crisis assistance, engaged with outreach teams, and/or receiving emergency shelter assistance.

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Appendix A: Acronyms and Program Model Descriptions

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## Street Outreach

Emergency services and engagement intended to link unsheltered households who are homeless and in need of shelter, housing, and support services.

### Description
Street-based, mobile outreach teams that address basic needs and seek to move people off the streets and into safe housing.

### Essential Program Elements
Low-demand, street-based services that address basic needs (e.g., food, clothing, blankets) and seek to build relationships with the goal of moving people into housing and engaging them in services over time. Multi-disciplinary clinical staff provide or link persons with case management, assistance to develop a person-centered case management plan, housing placement, on-site psychiatric and addictions assessment, medication, other immediate and short-term treatment, and access to other programs and services. Ideally outreach case manager would continue to work with the client once they are placed in housing. If outreach provider does not serve as person's case manager once person is moved into housing, outreach team should provide appropriate transition services and maintain communication with case manager about client progress and need for additional services. Newly unsheltered homeless people should be supported with Rapid Exit assistance whenever possible.

### Target Population
People experiencing unsheltered homelessness on the streets, in abandoned buildings, or in cars, frequently targeting those with mental illness, substance use disorders, or dual diagnosis.

## Emergency Shelter

Ensure basic needs are met and provide stabilization and assessment, focusing on quickly moving all persons to housing, regardless of disability or background.

### Description
Shelter provides a humane and dignified space that is safe, clean and trauma-informed with a focus on initial housing assessment, immediate housing placement and linkage to other services. All services should be voluntary and person-centered. Facilities should be fully accessible to people with disabilities, and have 24/7 operating hours to support dignity, security, and improved outcomes.

### Essential Program Elements
Entry point shelter with sleeping quarters, showers, laundry, meals, other basic services, and linkage to case manager and housing navigator (co-located on-site) with the goal of helping households move into stable housing as quickly as possible. Transportation services are provided to secure housing and other community services. Shelters include an array of stabilization options that allow for varying degrees of participation and levels of support based on client needs and engagement at the time they enter the system (i.e., for those with chronic addictions, mental illness, and co-occurring disorders). On-site teams should offer rapid exit services within 3 days of entry and then conduct an initial housing assessment if rapid exit is not an option. The assessment should determine housing needs and preferences (e.g., unit size, rent levels, location) and subsidy needs, and identify housing options and barriers, provide ongoing case management, and manage ongoing housing support and services that the client will need to remain stably housed. Clients should receive "next step" housing (e.g. Rapid Rehousing, Permanent Supportive Housing, Other Permanent Housing) within 30 to 120 days.

### Target Population
People experiencing homelessness.

**Strategic System Improvement Plan for Detroit's Homelessness Response System**
Appendix A: Acronyms and Program Model Descriptions

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# Rehousing Program Models

## Rapid Rehousing

Permanent housing with temporary subsidies in a community-based setting. Time-limited and voluntary services are focused on tenancy obligations, employment, housing stability, credit repair, and legal services.

### Description

Community-based permanent housing with transitional subsidies and mobile services to maintain housing after temporary assistance ends (typically within one year). RRH may be structured as a bridge to PSH for households requiring immediate PSH housing placement when traditional PSH is not immediately available. RRH can be provided through direct-lease and master-lease models. Residents should be covered by a standard lease in direct-lease models and at exit from master-lease models.

### Essential Program Elements

Safe affordable units located in community-based settings with voluntary services that focus on tenancy skills, employment, housing stabilization, and legal assistance for individuals and families with temporary barriers to self-sufficiency. Housing assistance may be provided for up to two years, although the length of enrollment is typically one year. Services include rental assistance, housing stabilization services, landlord mediation, case management, budgeting, life skills, parenting support, and child welfare preventive services. Typical case worker to client caseload is 1:25 or less. All program services should be trauma-responsive.

### Target Population

Households experiencing homelessness with temporary barriers to housing placement and stability.

## Permanent Supportive Housing

Housing where people may stay indefinitely with long-term (non-time limited) rental assistance with voluntary supportive services.

### Description

Permanent affordable housing linked with supportive services that help residents maintain housing. Generally, units are furnished and provide a private bath/shower and a kitchen. Residents should be covered by a standard lease. Units may be single site, scattered site, and integrated housing with rental assistance that is sponsor-based or tenant-based. Targeted to persons with significant barriers to housing stability.

### Essential Program Elements

Permanent housing with voluntary supports that help residents maintain housing and address barriers to economic stability. PSH programs provide subsidized housing or rental assistance, access to 24/7 tenant support services, and quality property management services. Recognizing that relapse is part of the recovery process, PSH programs should hold units open for 30 days while clients are in treatment or in other institutions. If a client returns to a program after 30 days and their unit was given to someone else, staff should work with that client to keep them engaged and place them in a unit when one is available. PSH programs should have a tolerant, or harm reduction, approach to engage clients with serious substance use issues. While in PSH, clients should receive supportive services appropriate to their needs from their case manager and/or the ACT multidisciplinary team. A typical case worker to client caseload is 1:25 or less. All services should be trauma-responsive.

### Target Population

People experiencing homelessness with significant barriers to housing stability, including zero to very low incomes, chronic disabilities that impede ability to live independently, including street homeless adults and dually diagnosed individuals.

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## Other Permanent Housing

Housing where people may stay indefinitely with temporary or long-term rental assistance and/or supportive services.

**Description**

A variety of permanent housing options, including below market rate and permanent rental subsidies, and service coordination for persons that need support maintaining housing.

**Essential Program Elements**

A broad range of clustered or scattered-site permanent housing options for individuals with temporary barriers to self-sufficiency, including group living arrangements, shared apartments, or scattered-site apartments. Residents can receive rental subsidies (transitional or permanent, deep or shallow) and supportive services. Both length and intensity of housing subsidy and services are defined on a case-by-case basis depending on resident's needs. A service coordinator should conduct a comprehensive assessment and develop a long-term housing stability plan based on their needs. All program services should be voluntary and trauma-responsive.

**Target Population**

Households experiencing homelessness who have limited incomes.

## Housing Navigation Support Services

Housing search and transition case management services for homeless families and individuals transitioning from homelessness into permanent housing.

**Description**

Case management, housing location, and housing stabilization services targeted to families and individuals to accelerate housing move-in and support long-term housing stability.

**Essential Program Elements**

Intensive, goal-oriented case management services to help clients actively search for housing or who have received a housing match through coordinated entry (known as CAM for Detroit). Services include assistance securing documents, housing search and location, housing stabilization case management, advocacy with landlords/property managers, and other services that address the critical needs that people face when reentering the community from a shelter environment or unsheltered setting. Access to safe, affordable, quality units that have been cultivated through landlord engagement is provided. Flex funds are readily available to support costs for housing applications, security deposits, transportation during housing search, move-in costs, furniture, and other household needs. Emphasis is on linking clients to available community-based and mainstream services that support successful and long-term stability in permanent housing. All program services should be voluntary and trauma-responsive.

**Target Population**

People experiencing homelessness.

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# APPENDIX B:
# DESCRIPTION OF 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) came 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 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.

The planning process featured:

- **Shared leadership with people with lived experiences of homelessness,** including equitable representation across all decision-making structures and work groups and throughout planning conversations.

- **The Strategic Plan Oversight Commission (SPOC)** was formed to guide and make critical decisions within the planning processes and for the development and adoption of the Strategic System Improvement Plan. The composition of the 10-member SPOC was structured to include equitable representation of people with lived experience alongside representatives appointed by the CoC, HAND, and the City of Detroit.

- **Robust engagement and partnership with people currently experiencing homelessness,** through focus groups, one-on-one conversations, and Community Planning Sessions, to identify critical priorities for improving Detroit's homelessness response system and potential solutions.

- **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 partners., with a focus on exploring the perceived impacts and benefits of each initiative, what has helped to support their

success and impact, and what has limited their success and impact.

- **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 work to advance community goals; reviewing 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; and analyzing funding and investment information to better understand what sources of funding are supporting different types of programs and activities.

- **A week-long community visit by the Consultant Team,** during which the team facilitated listening sessions, focus groups, site visits, program observations, meetings and planning sessions to gather perspectives on strengths and challenges related to current system and programs, to identify opportunities for improvement, and to test emerging priorities.

- **Work Groups were implemented to identify strategies and activities to be prioritized for this Plan,** including Work Groups focused on System Modeling, Implementation Framework, and Building Momentum.

- **To identify solutions for critical community priorities, the BPA Consulting Team facilitated 14 Community Planning Sessions,** developed and implemented by Planning Teams of people with lived experience of homelessness in Detroit and people working in Detroit's homelessness response system, focused on solutions for:
  - Strengthening and Reimagining Shelter
  - Improving Rehousing and Housing Supply in Detroit
  - Reducing Unsheltered Homelessness

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- **System Modeling activities were implemented to prioritize uses of key homelessness system resources** and address key questions regarding best use of system resources, adequacy of supply of existing system resources for meeting current needs, additional resources needed to optimize the homelessness system and achieve key performance measures, and estimated costs.

## Teams Designing and Implementing Planning Processes

### Consulting Team

Barbara Poppe and Associates (BPA) 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 was comprised of leading national experts and two Community Consultants with lived expertise of homelessness in Detroit

This BPA Consulting Team worked 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 BPA 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.

### Strategic Plan Oversight Commission

The BPA Consulting Team facilitated the Strategic Plan Oversight Commission (SPOC) formed to help guide and make critical decisions for the design of these planning processes and for the development and adoption of the Strategic System Improvement Plan. The composition of the 10-member SPOC was 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

Please see the ***Strategic Plan Oversight Commission Charter*** for more information about the SPOC's roles and processes.

Please see HRD's ***Homelessness Strategic Planning Project webpages*** for information from DPT and SPOC meetings.

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> **The local partners and BPA Consulting Team embraced the following values throughout this planning process:**
>
> **Centering equity and justice,** informed by intersectional analyses, across the planning 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, action-oriented, built to work and evolve over time, and nimble** to respond to the ever-changing dynamics of today's world.
>
> **Establishing metrics and processes 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.

## Input and Guidance of People with Lived Experience

### Overview

On behalf of the BPA Consulting Team, David Dirks and Kourtney Clark led robust engagement efforts with participants experiencing homelessness, who were all compensated for their time, including 13 virtual and in-person focus groups and 1-on-1 conversations, with a total of 62 people participating, 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, members of the consulting team also spoke 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**
- **Finding and Securing Housing;**
- **Shelter Access, Quality, and Client Experiences; and**
- **Training for Staff**

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## Guidance from Focus Groups and Interviews

### 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)[5] or shelters and also that wait times for receiving referrals were very inconsistent,** ranging from 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.

### 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) was 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 necessities to make it a livable home,** such as furniture, mattresses, linens, basic kitchen items, supplies needed for infants and children, and other essentials.

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[5] The Coordinated Assessment Model (CAM) 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.

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## 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 must 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 **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 noted that some shelters are too far away from jobs and essential services.

## 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.** Participants expressed **concerns with the professionalism of staff, inequitable treatment of clients,** and inappropriate relationships among staff and between staff and clients.

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## Illustrative Quotes from People with Lived Experience

*"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."*

*"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 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 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."*

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# Review of Recent and Current Initiatives

## Overview

On behalf of the BPA Consulting Team, Matthew Doherty led an 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 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 limited their success and impact; and considering the implications for potential priorities to be addressed within the Strategic System Improvement Plan.

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 Placement
  *(Implementation ongoing)*

- Mental Health Co-Response Partnerships
  *(Implementation ongoing)*

- Landlord Engagement
  *(No active implementation)*

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Please see ***Appendix A*** of the ***Interim Findings Report***, prepared by the BPA Consulting Team and released in October 2023, for 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

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## Consultant's 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 has not been implemented to date and the C4 Racial Equity Initiative has not yet taken hold in the community.

- 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 the need to listen to and be guided by people with lived expertise than previously true,** but improvements are 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 the 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);

- Strengthening landlord engagement, 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 is not clearly defined or embraced. Quality of programs, and capacity to serve people with more complex needs, are significantly impacted by funding levels, including

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service 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 the 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.

## Review of Governance, Performance, and Funding

### Overview

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.

Please see _**Appendix B**_ of the _**Interim Findings Report,**_ prepared by the BPA Consulting Team and released in October 2023, for more details regarding the review process, the information considered, and findings.

### 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

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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, 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.

- **Several 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

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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),[6] 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**.

## 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 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.**

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[6] See *White Dominant Culture & Something Different* worksheet for one description of some of the norms of white dominant culture.

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## 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 the 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 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 homelessness response system.

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# On-Site Community Visit

## Overview

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, program observations, meetings and planning sessions, to gather perspectives on strengths and challenges related to current systems/programs, 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:<br>• Single adults and unsheltered people<br>• Youth and young adults<br>• Families with children<br>• Front line staff<br>• Prevention and diversion<br>• Racial justice<br>• Continuum of Care (CoC) members<br>▪ 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.<br>▪ A total of 35 people participated in these in-person focus groups.<br>▪ 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, 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 elected officials and representatives from a diverse range of organizations, departments, collaboratives, including:<br>▪ Mayor's Office<br>▪ Strategic Plan Oversight Commission (SPOC)<br>▪ City Councilmembers<br>▪ Housing and Revitalization Department (HRD)<br>▪ Homeless Action Network of Detroit (HAND)<br><br>▪ Department of Transportation<br>▪ Department of Neighborhoods<br>▪ Health Department<br>▪ Veterans Leadership Committee<br>▪ Detroit Housing Commission<br>▪ Detroit Wayne Integrated Health Network<br>▪ General Services Department |

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# Design and Key Findings of Listening Sessions

## Design of Listening Sessions

For most of the Listening Sessions, the participants were divided into small groups twice and were asked to focus on assigned discussion questions.[7] 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 the following questions:

- *What is working well about the community response to homelessness? What do you think are the most significant accomplishments over the 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 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:

1. 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 the 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. 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 the Strategic System Improvement Plan.

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[7] 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.

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## 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) resonated and were largely confirmed by participants, including many identifying the lack of a clear vision for the system as being a significant issue.

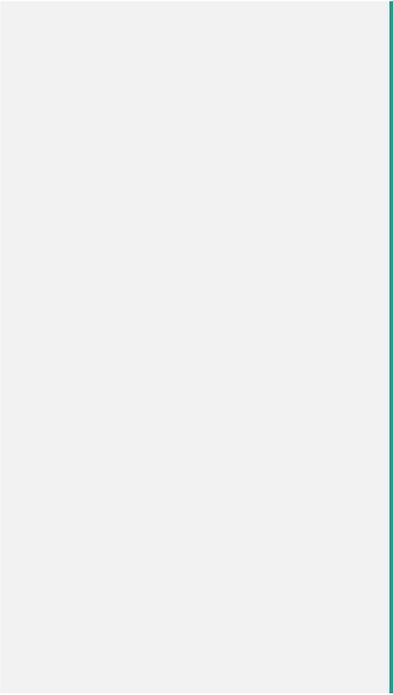| | |
|---|---|
| **Recent Progress, Accomplishments, & Improvements** | ▪ Several positive elements within the homelessness response system were identified, including the **coordination and partnerships that are underpinning the Youth Homelessness Demonstration Program initiative and the efforts to 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, flexibility, 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**; 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 |

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for the 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.

**Quality of Programs & Services**

- Although the discussions did identify several areas of strength and recent improvements and accomplishments, the **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.

- 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 conducted with these kinds of concerns in mind.

- 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 f**or 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,**including:
  - 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;

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- 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.

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# Emerging Priorities Identified

The BPA Consulting Team and the SPOC used the findings from the community visit and reviews to identify eight emerging priorities to be explored through the next stage of planning activities, and through the Strategic System Improvement Plan, organized into the following themes:

## 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 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 to: drive progress on systemic issues; strengthen system and program quality, performance, and accountability; and 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 homeless, 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.

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# Community-Centered Planning Structures and Processes

## Overview

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

<div align="center">

**Work Group 1: System Modeling**

**Work Group 2: Implementation Framework**

**Work Group 3: Building Momentum**

</div>

In addition, the SPOC and the BPA Consulting Team implemented a series of Community Planning Sessions focused on three prioritized topics:

<div align="center">

**Topic 1: Reducing Unsheltered Homelessness**

**Topic 2: Reimagining Shelter / Interim Housing**

**Topic 3: Improving Rehousing and Housing Supply**

</div>

Key information regarding each of these Work Groups and Community Planning Sessions is provided below.

## WG1: System Modeling

| | |
|---|---|
| **Scope** | The System Modeling Work Group designed and directed the analysis process necessary to undertake System Modeling activities, and supported 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 focused on these key questions:<br>▪ What is the best and highest use of each existing system resource (e.g., bed, unit, service slot)?<br><br>▪ How adequate is the supply of existing system resources for meeting current needs of different populations experiencing homelessness?<br><br>▪ What number of additional resources are necessary to optimize the homelessness system and achieve key performance measures? What incremental changes should be prioritized?<br><br>▪ What are the estimated per unit costs needed to address system gaps which, when met/addressed, will contribute to system optimization? |

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## WG2: Implementation Framework

**Scope**

The Implementation Framework Work Group 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?

- *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?

## WG3: Building Momentum

**Scope**

The Building Momentum Work Group reviewed 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 included:

- Reviewing the Initial Review of Recent and Current Initiatives Report prepared previously by the BPA Consulting Team

- 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 the Strategic System Improvement Plan

- Finalizing the list of strategies and activities for recommended inclusion in the Strategic System Improvement Plan

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In addition. the Consulting Team supported SPOC to implement Community Planning Sessions addressing the following topic areas and strategy questions and open to all interested participants, including staff working within the homelessness response system and people with lived experience.

## Community Planning Sessions

| | |
|---|---|
| **Reducing Unsheltered Homelessness** | *Key strategy questions:*<br><br>- What strategies should be refined or undertaken to reduce unsheltered homelessness?<br>- How should these be prioritized?<br>- What types of goals and metrics should be developed?<br>- What community partners and resources should be engaged? |
| **Reimagining Emergency Shelter / Interim Housing** | *Key strategy questions:*<br><br>- How can the community implement recommendations from the Reimagining Interim Housing Project to transform approaches to sheltering people?<br>- What strategies should be undertaken to transform approaches to sheltering people experiencing homelessness?<br>- How should these be prioritized?<br>- What types of goals and metrics should be developed?<br>- What community partners and resources should be engaged? |
| **Improving Re-Housing and Housing Supply** | *Key strategy questions:*<br><br>- What strategies should be undertaken to increase re-housing and improve housing navigation?<br>- What strategies should be undertaken to increase access to and the supply of affordable and permanent supportive housing?<br>- How should these be prioritized?<br>- What types of goals and metrics should be developed?<br>- What community partners and resources should be engaged? |

The implementation of these planning structures and processes strove to ensure 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.

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# Implementation of Community Planning Sessions and Surveys

## Overview

To support the community to identify solutions for critical community priorities, Barbara Poppe & Associates facilitated 14 Community Planning Sessions during October and November 2023.

These sessions were developed and implemented by Planning Teams of people with lived experience of homelessness in Detroit and people working in Detroit's homelessness response system. Each Session focused on different topics and solutions for:

- **Strengthening and Reimagining Shelter**
- **Improving Rehousing and Housing Supply**
- **Reducing Unsheltered Homelessness**

An average of about 78 people participated in each Community Planning Session, and an average of 24% of participants indicated they had lived experience of homelessness.

During these sessions, community members discussed hundreds of potential strategies for improving the homelessness response system in Detroit.

Materials and presentations used during the Sessions, and meeting summaries that include all the ideas for potential strategies identified during Sessions, have been made publicly available at the
*Strategic Plan Meeting Minutes webpage*.

## Surveys and Prioritization of Potential Solutions

The potential solutions identified during Community Planning Sessions on "Strengthening and Reimaging Shelter" and "Improving Rehousing and Housing Supply" formed the basis for survey activities performed the last week of November 2023 to identify the community's priorities among the potential solutions. The surveys were distributed to everyone who participated or had been invited to participate in these sessions. The surveys asked people to offer their thoughts regarding:

- What are the most important activities?
- What should be started during 2024?
- What would success look like or how should we measure success?
- What community partners and resources should be engaged?

Survey responses were analyzed by the BPA Consulting Team, including considering responses from people with lived experiences of homelessness separately and in comparison to responses from other participants.

### *Strengthening and Reimagining Shelter Survey Reponses*

82 people responded to the survey regarding strengthening and reimaging shelter, including at least 15 people with lived experiences of homelessness. Potential activities receiving the highest prioritization by people with lived experience included:

- **Monitor and enforce that all shelters promote safety, dignity, and autonomy.** This could include shelter practices and policies being aligned with non-punitive approaches, using Housing First, minimizing shelter rules, eliminating moral policing, etc. Ensure staff keep shelter residents' information confidential. Ensure multi-lingual supports are available in all shelters. Ensure after hours entry. Offer flexible options for meals to accommodate all cultural, dietary, and work-related needs, including self-preparation. Ensure harm reduction features are in place, e.g., sharps containers and requiring shelter to provide Narcan.

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- **Create and fund a standardized internal housing program within all emergency shelters** to provide support and resources to help support persons to exit from shelter to permanent housing destinations.

- **Pursue a shelter culture shift that promotes the dignity and worth of all persons accessing emergency support,** prioritizes compassion and empathy, holistically embodies the principles of housing first, addresses staffing pay imbalances, and combats the scarcity mindset that can be a barrier to change.

- **Conduct a system wide study of current wages/benefits and develop a strategy to increase wages/benefits to be more equitable.** The study could compare wage

trends between frontline, management, and executive staff. This would reduce staff turnover, reduce staff vacancies, and improve resident experiences and outcomes. Create wage standards that providers must follow to ensure shelter staff (especially those on the front line) are adequately compensated and receive financial benefits like raises and benefits. Ensure all staff have access to insurance, paid time off, holidays, and easily accessible, affordable, anonymous mental health and other supports. Redefine hiring and compensation standards so that those with academic credentials are not disproportionately valued over lived experience of homelessness.

## *Improving Rehousing and Housing Supply Survey Responses*

80 people responded to the survey regarding improving rehousing and housing supply, including at least 18 people with lived experiences of homelessness. Potential activities receiving the highest prioritization by people with lived experience included:

- **Improve and streamline workflows and processes between MSHDA (Michigan State Housing Development Authority), DHC (Detroit Housing Commission), homelessness service providers, landlords, coordinated entry, and residents** to speed up processing rental payments, ensure units are high quality, enhance communication to residents and landlords, ease paperwork submission challenges for residents, improve recertification processes, facilitate better data integration between HMIS and the voucher lists, and close services gaps. Identify opportunities to better meet the needs of various groups, such as seniors, English language learners, and youth.

- **Build a multi-disciplinary coalition of housing commissions, housing navigators, developers, landlords,**

**housing inspectors, and others** to engage in collaborative system alignment, information sharing and goal setting.

- **Conduct a system wide study of current staff wages/benefits and develop a strategy to increase wages/benefits to be more equitable.** This would reduce staff turnover, reduce staff vacancies, and improve resident experiences and outcomes.

- **Pre-inspect units prior to being shared with clients.** Engage with independent contractors to carry out inspections to ensure clients do not need to wait for repairs to be made prior to lease-up.

- **Advocate to change how the federal government calculates the Area Median Income** to be based on the City of Detroit (excluding other areas of Wayne County).

To see detailed analyses regarding the survey participants and responses, please see:

*Strengthening and Reimagining Shelter Survey Analysis*

*Improving Rehousing and Housing Supply Survey Analysis*

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## *Reducing Unsheltered Homelessness Priorities*

During the Reducing Unsheltered Homelessness Community Planning Session held in November, participants reviewed the results of previous Sessions and grouped system improvement recommendations regarding unsheltered homelessness according to three broad planning objectives:

1. **Creating a system-wide strategy for reducing unsheltered homelessness.** This system-wide strategy would align efforts across all partners, jurisdictions and public systems engaged in the work.

2. **Strengthening the practice of outreach.** Community Planning Session participants understand that providers engaged in street outreach activities need to have access to evidence-based practices and effective resources and tools to support their work.

3. **Connecting housing options to street outreach services.** Persons experiencing unsheltered homelessness require readily available housing options to end their homelessness. These housing options need to be part of the community's rehousing strategy so that outreach providers, police, and other system partners who encounter people in unsheltered living arrangements can offer housing as a solution rather than relocation or criminalization.

## Development of Improvement Objectives and Activities

In early December, the Planning Teams who implemented the Community Planning Sessions and the surveys met to debrief, to review the survey results or planning objectives identified, and developed recommended Improvement Objectives and Activities, which were discussed with the Strategic Plan Oversight Commission (SPOC) at their December 13, 2023 meeting.

**The ideas prioritized through these processes were reviewed and refined, and the SPOC determined the final content for this Strategic System Improvement Plan.**

## For More Information

For more information about all aspects of the planning processes that resulted in the development of this Strategic System Improvement Plan, please see HRD's **Homelessness Strategic Planning Project webpage** for a wide range of materials and documents.

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# APPENDIX C:
# SYSTEM MODELING REPORT

## Key Findings

The System Modeling activities performed in support of the development of the Strategic System Improvement Plan are described in detail in this Appendix. System Modeling starts with a stakeholder-defined vision of an optimal homelessness response system and the key attributes that comprise that system. The analysis process then models the appropriate number of high-quality services, emergency shelter, and rehousing capacity to meet the forecasted number of households anticipated to enter the homelessness system. Key findings of the System Modeling analysis include the following estimates:

- An estimated additional 840 units of Permanent Supportive Housing (PSH) for individuals and 30 PSH units for families must be added to Detroit's homelessness response system.

- An estimated additional 150 units of Rapid Rehousing (RRH) for individuals and 105 units of RRH for families must be added to Detroit's homelessness response system.

- An estimated additional 275 units of Emergency Shelter for individuals and 20 units for families must be added to Detroit's homelessness response system.

- An estimated additional 820 units of Other Permanent Housing (OPH) for individuals and 155 units of OPH for families must be added to Detroit's homelessness response system.

- As described in more detail in Tables 13 and 14 below, the costs for adding these interventions to Detroit's homelessness response system are estimated at an additional $43.5 million annually.

## Overview of System Modeling

System Modeling analysis uses the most current information available about the number of households experiencing or at imminent risk of homelessness, the inventory of resources available to meet the needs of households experiencing homelessness, and the program models and pathways through the homelessness system (as defined by Detroit's System Modeling Work Group, established by the Strategic Planning Oversight Commission to undertake System Modeling.)

The System Modeling Work Group proposed a set of assumptions defining an optimal or "right sized" homelessness response system and the SPOC adopted those planning assumptions.

System Modeling results provide estimates of the number of units needed of each program type to meet the needs of households experiencing homelessness every year. This information is combined with average per unit

cost data to estimate the cost of the 'optimal' system.

The concept of an 'optimal' system is aspirational. The results provide a directional perspective on necessary system changes and additional investments necessary to move in the direction of optimization. In addition, system elements contributing to this optimal status are subjective. The transition to this optimal status would likely take several years of deliberate, phased improvements and substantial additional investments.

**For these reasons, System Modeling should be updated regularly with revised assumptions and fresh data and input from community stakeholders, including people with lived experience of homelessness, to reconfirm the directional approach to optimization continues to be on track.**

## System Modeling Expectations

The system model is built on several expectations about system design and operations including:

- **The number of households entering the homelessness system is even throughout the year** without large swings from month to month or season to season in the number of households that need to be served. Although homelessness systems likely experience some degree of seasonal variation in inflow or outflow rates, System Modeling manages these differences by modeling annual prevalence distributed evenly throughout the year.

- **The optimal system includes sufficient year-round bed capacity to address emergency shelter needs for all persons requiring crisis housing assistance.** Crisis shelter beds and rehousing resources operational on only a temporary basis during periods of especially harsh weather conditions are extremely difficult to stand up and manage as an ad hoc, seasonal resource. Historically, these types of temporary shelter beds are often poor quality, do not support successful rehousing outcomes, and can exacerbate participant trauma and dislocation.

- **The number of non-chronically homeless households does not change each year**

- <u>after</u> the initial investment in housing is sufficient to end homelessness for people who meet the definition of chronic homelessness**.**

- **Households returning to homelessness are included with the annual inflow into homelessness** rather than being accounted for separately.

- **Every program is expected to operate effectively and efficiently,** achieving the length of stay and housing outcomes described in the system program models.

- **Net demand for services stays constant,** with improvements in the system balancing out increases in homelessness.

- **The pathways through the homelessness response system developed as part of the System Modeling work are estimated** to guide planning and budgeting decisions. Actual placement decisions for each household are made on a case-by-case basis based on assessment results, consultation with clients, and program eligibility requirements.

# System Modeling Factors

There are several interrelated factors and data that impact modeling of the optimized system. Some of the factors are based on existing information about the homelessness response system and others are based on the system program models that form the optimized system. The modeling calculations use this information to develop the different scenarios of the optimized system.

The factors and data are:

- **2023 Annual and Point-in-time (PIT) Count data** on the number of households experiencing homelessness in the system. Additional data are also included to supplement PIT counts due to households who experience homelessness in unsheltered locations but were not included in the PIT because they were not encountered. Adjustments are also made for domestic violence programs that are prohibited from providing data to HMIS.

- **Annual prevalence information from HMIS** is used to estimate the number of individuals and families that are:
  - inflowing annually to the homelessness system

  - long-term homeless (i.e. people who meet the definition of chronic homelessness)

- **Service strategies or pathways** based on the system program models needed for each group of households (individuals, inclusive of youth, and families) include the following distinct models:
  1. Homelessness Prevention (HP)
  2. Emergency Shelter (ES)
  3. ES + Rapid Exit/Diversion supports to accelerate exits from ES
  4. Rapid Rehousing (RRH) directly from unsheltered locations
  5. ES + RRH
  6. ES + Transitional Housing (TH)
  7. ES + Other Permanent Housing (OPH)
  8. ES + RRH + OPH

9. Permanent Supportive Housing (PSH) directly from unsheltered locations
10. ES + PSH

- **Projections of pathway utilization:**
  - Estimates of the percent of households using each program model pathway are based on aligning household need to program and service type, intensity, and duration
  - Estimates of the length of time in each prevention, shelter or housing program along a program model pathway are based on most efficient but practical time necessary for households to

resolve. Time frames are informed by current system averages.

- **System inventory and cost information** to model housing units and costs over time, including:
  - Existing shelter, housing and subsidy inventory remains constant or increases
  - Current turnover rates for permanent housing resources are held constant
  - Total (services and operating/rent) costs for current system program models are based on HUD-defined Fair Market Rents (FMR) and industry standards for best-practice program models

## System Modeling Analyses

Barbara Poppe and Associates applied the System Modeling analysis to forecast the program capacity and pathways the Detroit homelessness response system needs to ensure that strategic system improvement objectives are realized.

Using optimal project types and services strategies developed during the Detroit Strategic Planning process, the modeling spreadsheet calculates the number of units of each project type needed to serve all the

households expected to experience homelessness each year.

The spreadsheet is designed in Microsoft Excel as a Worksheet with links to all source data in companion tabs. For the purposes of the spreadsheet, modeling is done for families and individuals separately.

All population numbers are for numbers of households experiencing homelessness not the number of people in households.

## Key Assumptions About System and Data

### Annual Need

Data used throughout the spreadsheet for the number of households experiencing homelessness are based on adjusted annual need derived from the FY2023 Official HUD StellaP Upload for the Detroit CoC (MI-501). HUD created the StellaP resource as an interactive data visualization tool to help communities analyze and share the Longitudinal Systems Analysis (LSA) dataset. The LSA is a HUD-required report CoCs submit that includes homelessness response system results on critical performance measures.

Timeframe for the data is October 1, 2022 through September 30, 2023.

Households are included who entered any of the following project types during the reporting period:

- Emergency shelter
- Transitional housing
- Rapid rehousing
- Permanent supportive housing

**Adjustments**

Adjustments were made to the annualized need number based on input and direction from members of the System Modeling Work Group. Those adjustments are highlighted below.

▪ *First Adjustment*: Because the project types included in the StellaP report do not include street outreach services the annual counts for the System Modeling analysis were increased to account for persons who were unsheltered during the reporting period but did not enroll in any other project reported in StellaP. In other words, they were not counted in the FY2023 Official HUD StellaP Upload. Data from clients in outreach-based HMIS projects who had no other project type enrollments represent the adjustment made to StellaP data to achieve an estimated annual need amount inclusive of unsheltered persons served

Final annual need numbers are included in Table 1.

through street outreach but not in any other program type.

▪ *Second Adjustment*: Because projects dedicated to serving households fleeing domestic violence and sexual assault are prohibited from contributing data to HMIS, data from those DV projects are not in the FY2023 Official HUD StellaP Upload. Annual prevalence counts are adjusted to include participants in DV projects not connected to CAM, or DV clients from Detroit but served in outlying jurisdictions due to capacity limitations at local Detroit projects.

*Table 1: Annual Need (Households)*

| 10/1/2022 – 9/30/2023 | Single Individuals | Families |
|---|---|---|
| **FY2023 Official HUD StellaP Upload** | 3,249 | 651 |
| **First Adjustment** | 1,000 | 64 |
| **Second Adjustment** | 90 | 65 |
| *Total Adjusted Annual Need Count* | **4,339** | **780** |

## Point-in-Time Count

Data used throughout the spreadsheet for the number of households experiencing homelessness at a single point in time are derived from the 2023 Point-in-Time (PIT) count.

An escalator of 25% of the baseline PIT count is used to account for persons who experienced

unsheltered homelessness but were not encountered during the PIT and therefore not counted. The additional escalator provides a more likely amount of the true extent of unsheltered homelessness.

Table 2 highlights PIT numbers used for the System Modeling analysis.

*Table 2: 2023 Point-in-Time Count (Households)*

| | Single Individuals | Families |
|---|---|---|
| 2023 PIT Count | 1,160 | 287 |
| Unsheltered Escalator (25%) | 253 | 5 |
| *Total Adjusted PIT Count* | **1,413** | **293** |

The unsheltered homelessness escalator rate may not be sufficient if the crisis response system improves to the extent that street outreach enagement and emergency shelter stays become more feasible options for persons experiencing unsheltered homelessness and more people actively seek assistance from unsafe and overcrowded locations.

Escalator rates for unsheltered homelessness should be assessed and updated in subsequent System Modeling analyses. An improved system may result in additional counts of homelesness due to people actively seeking assistance through street outreach and CAM rather than intentionally avoiding homelessness response system first responders.

# Housing Inventory Count

Data about shelter bed and housing resource inventory are derived from the 2023 Housing Inventory Count (HIC) summarized in Table 3. Any resource with special, one-time funding that was not expected to continue beyond 2023 was excluded from HIC counts for purposes of System Modeling.

HIC resources that are exclusively available to a limited subpopulation of people and not universally available to a general population are also excluded. These excluded special population beds and housing resources include VA-funded resources for persons who meet VHA eligibility requirements and persons living with HIV who meet HOPWA eligibility requirements.

*Table 3: Housing Inventory Count included in Modeling*

| 2023 – Beds/Units Available during PIT Count | Single Individuals | Families |
|---|---|---|
| Emergency Shelter (ES) | 520 | 69 |
| Transitional Housing (TH) | 76 | 28 |
| Safe Haven (SH) | 0 | 0 |
| Rapid Rehousing (RRH) | 155 | 129 |
| Other Permanent Housing (OPH) | 50 | 50 |
| Permanent Supportive Housing (PSH) | 1,616 | 306 |

On a seasonal, temporary basis, Detroit providers operate other crisis shelter projects in addition to the ES inventory included in the above table, Table 3: Housing Inventory Count. These additional crisis shelter resources operate within a wide range of facility, program quality, and accessibility standards. Seasonal, temporary crisis shelter resources include warming centers, vouchers used to fund temporary motel stays, expanded bed capacity in the form of cots or mats, and even chairs and benches where people may rest in the evening during very cold weather.

While the System Modeling analysis includes only fixed, year-round bed/unit resources for purposes of establishing baseline inventory counts, the additional demand for crisis shelter is evidenced by the use of other temporary/seasonal resources.

Temporary shelter resources are prorated for the period they're operational and included in baseline inventory on an annualized equivalent basis. For example, a bed/unit only available for 90 days (3 months) of the year is counted as ¼ of a bed/unit. Table 4 provides additional data about the type and availability of temporary/seasonal resources included in baseline inventory for the current System Modeling analysis.

The table lists actual beds/units available on the night of the PIT count and included on the HIC, not the annualized equivalent adjusted numbers included in System Modeling.

*Table 4: Types of ES Beds Included in HIC*

| PIT ES Bed Types | Units for Families (1 unit is for 1 family and contains multiple beds) | Beds for Singles |
|---|---|---|
| Year-round ES | 69 | 520 |
| Seasonal Beds/Units | 22 | 125 |
| Overflow Beds/Units | - | 54 |
| Utilization beyond Overflow (chairs or mats) | - | 44 |
| **Total** | **91** | **741** |

## Housing and Service Strategies (Pathways Used to Resolve Homelessness)

Housing and service strategies represent the project types and combination of project types that people use to resolve their homelessness.

Collectively all housing and service strategies make up the homelessness response system for Detroit.

Each housing and service strategy is used by a particular proportion of the total annual prevalence count of homelessness.

**Estimating Need for Housing and Service Strategies**

| | Basis for Estimating Need |
|---|---|
| *Homelessness Prevention* | Based on current proportion of households who call CAM, seeking any housing crisis service (such as eviction prevention, emergency shelter, or relocation assistance) and are served by a City of Detroit-funded service designed to prevent homelessness. Note that substantial resources of additional prevention-oriented resources exist in Detroit for lease-holder and mortgage-holder households who are in arrears with housing payments. The City also supports households living in substandard housing conditions or housing with building code violations by providing temporary emergency financial assistance and/or relocation assistance. While these other programs provide prevention interventions, the services are not exclusively targeted to households at imminent risk of literal homelessness within 14 days. These other housing retention resources are not included as baseline homelessness prevention resources in System Modeling because those resources are not exclusively targeted to households at imminent risk of literal homelessness. |
| *Emergency Shelter Only* | Based on attributes of households who use Emergency Shelter (ES) as a one-time crisis intervention and can resolve without any additional intensive assistance. These households experience homelessness as a one-time event, have homeless lengths of stay that are less than the system average, exit emergency shelter and do not return to the homelessness system. |
| *Emergency Shelter + Diversion/Rapid Exit* | Based on current proportion of households who call CAM, seeking any housing crisis services (such as eviction prevention, emergency shelter, or relocation assistance), receive Emergency Shelter assistance but are unable to quickly resolve their homelessness without additional supports. These households tend to have the following attributes: first time homeless, earned income greater than zero, no disability, and presence of family/friends and/or community-based support systems that can support the household's transition back to stable housing. |
| *Rapid Rehousing* | Based on households accessing Emergency Shelter but who have housing barriers that inhibit the household's ability to quickly resolve their homelessness. These housing barriers include lack of income, lack of credit, legal histories such as past evictions or criminal convictions, and lack of connections to local family/friends or other community-based systems that can support the household's acquisition stable housing. |
| *Rapid Rehousing Directly from Streets* | Based on households who meet the criteria for Rapid Rehousing but who do not access emergency shelter. |
| *Emergency Shelter + Transitional Housing* | Based on subpopulations who seek additional support beyond emergency shelter such as time-limited, intensive crisis services available |

| | in a residential setting to persons fleeing domestic violence, youth ages 18-24, and Veterans. |
|---|---|
| *Emergency Shelter + Other Permanent Housing* | Based on households accessing Emergency Shelter who require additional housing subsidy support that include publicly assisted housing, Section 8 housing vouchers, emergency housing vouchers, housing stability vouchers, family unification program vouchers, and other affordable or publicly assisted housing units. |
| *Emergency Shelter + Rapid Rehousing + Other Permanent Housing* | Based on households assisted in RRH but at the standard, 12-month termination point for RRH subsidies are still unable to maintain lease payment obligations due to a lack of sufficient income. These households require additional housing subsidy support that include publicly assisted housing, Section 8 housing vouchers, emergency housing vouchers, housing stability vouchers, family unification program vouchers, and other affordable or publicly assisted housing units. |
| *Emergency Shelter + Permanent Supportive Housing* | Based on households accessing ES who meet the HUD-defined criteria for Permanent Supportive Housing (PSH). These criteria include at least 365 days of homelessness history (either cumulatively or spread across multiple spells of homelessness in a 3-year period) and a verified disability that inhibits the household's ability to acquire and maintain housing independently. PSH provides non-time limited housing with voluntary services. |
| *PSH Directly from Streets* | Based on households who meet the criteria for PSH but do not access emergency shelter. |

**Anticipated Needs for Housing and Service Strategies**

Table 5 shows the percentage of the total homelessness prevalence count that will use each service strategy pathway to resolve their homelessness based on participant need and housing and service type, intensity, and duration.

Each housing and service strategy is mutually exclusive.

*Table 5: Housing and Service Strategies and Percent Anticipated to Need Each to Exit Homelessness*

| Strategies for People Presenting to the Homelessness System Each Month | Single Individuals | Families |
|---|---|---|
| Homelessness Prevention | 4% | 7% |
| Emergency Shelter (ES) Only | 38% | 17% |
| ES + Diversion/Rapid Exit | 7% | 10% |
| Rapid Rehousing (RRH) from Streets | 2% | 0% |
| ES + RRH | 5% | 30% |
| ES + Transitional Housing | 1% | 2% |
| ES + Other Permanent Housing (OPH) | 5% | 7% |
| ES + RRH + OPH | 15% | 19% |
| Permanent Supportive Housing (PSH) from Streets | 5% | 2% |
| ES + PSH | 18% | 6% |
| | **100%** | **100%** |

## Additional Housing Navigation Support Services

In addition to distinct pathways identified above, some households experiencing homelessness will require additional housing supports within their service strategy cohort. These additional supports are called Housing Navigation and include the following services: housing-focused case management, documentation compilation and management, housing search and location, housing application management, and a flexible fund of modest financial support to facilitate a household's transition to new housing.

The Navigation flex fund could support housing deposits, utility deposits, first-month's rent,

transportation assistance, and other activities directly related to acquiring housing and/or building economic self-sufficiency to support lease payment obligations. Navigation is built into TH, RRH and PSH program models as a standard element of case management within those program types. Participants enrolled in ES without TH, RRH, or PSH services will be offered Navigation to support their housing placements. Rates of households benefiting from navigation support are highlighted in Table 6.

### Table 6: Housing Navigation Support Services Available to Households

| Housing Navigation Support Services | Single Individuals | Families |
|---|---|---|
| Households Enrolled in ES without TH, RRH, or PSH Referrals | 50% | 34% |

## Average Length of Stay in Programs and System

Shorter periods of homelessness characterized by an optimized homelessness response system require more efficient system operations and accelerated access to housing.

While some individuals may experience complex housing barriers that require additional programming, more intensive services, and longer lengths of time to resolve, other individuals may be able to resolve their homelessness quite quickly.

A system average length of stay accounts for overall system operations and resources working collaboratively. Table 7 provides an overview of service strategy utilization in an optimal system for individuals and families, and how monthly utilization of the system should be distributed across different project components.

### Table 7: Assumptions about Service Strategies and Percent Anticipated to Need Each to Exit Homelessness

| Service Strategy | Individuals (%) | Families (%) | Projected System Utilization (Average Months of Assistance in Each Program Type) | | | | | | System Length of Time Homeless | |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | Div | ES | TH | RRH | OPH | PSH | Time Homeless | Time Assisted |
| ES + Diversion / Rapid Exit | 7% | 10% | 3 | 2.5 | | | | | 2.5 | 3 |
| ES only | 38% | 17% | | 3 | | | | | 3 | 3 |
| RRH | 2% | 0% | | | | 12 | | | 2.5 | 15.5 |
| ES + RRH | 5% | 30% | | 3 | | 12 | | | 3 | 15 |
| ES + TH | 1% | 2% | | 2 | 6 | | | | 8 | 8 |
| ES + OPH | 5% | 7% | | 3 | | | 12 | | 3 | 15 |
| ES + RRH + OPH | 15% | 19% | | 2 | | 12 | 12 | | 2 | 26 |
| PSH only | 5% | 2% | | | | | | 12 | 3 | 15* |
| ES + PSH | 18% | 6% | | 3 | | | | 12 | 3 | 12* |

*PSH enrollment is indefinite as long as lease obligations are maintained

## Annual Unit Turnover in PSH

While PSH is designed with an indefinite program participation period, some PSH-assisted households experience significant improvement in housing stability, self-sufficiency, and economic well-being.

System Modeling assumes that with the provision of high-quality PSH services some of these high-improvement households will sufficiently address housing barriers such that they are ready to transition to other types of housing they can afford.

Other PSH residents may exit PSH because they need a higher level of care, and others may exit to institutional settings or die. As PSH

residents move on from PSH housing, the vacated PSH units and/or subsidy sources become available for new PSH residents.

Other PSH residents may exit PSH due to voluntary departure due to concerns about the unit/program/neighborhood, lease violations/eviction for nonpayment of rent, arrest/incarceration, disappearance, or other adverse outcomes.

Table 8 shows how an optimized system turnover rate of 10% impacts availability of PSH for new annual move ins.

*Table 8: Annual Unit Turnover in PSH*

| Annual Availability of PSH | Single Individuals | Families |
|---|---|---|
| Inventory of PSH Units/Subsidy Sources | 1616 | 306 |
| Annual Availability based on turnover of 10% | 162 | 31 |

System Modeling analysis considered current PSH turnover rates of 20% but ultimately applied a less frequent turnover rate of 10%. Less frequent turnover is due to an optimized

system that more effectively meets the needs of chronically homeless individuals and promotes long-term retention in PSH and decreasing rates of adverse outcomes.

# Optimal System Conversion Summary

System Modeling forecasts the number of units needed in an optimized homelessness response system to fully meet the needs of all households entering the homelessness response system each year, including households who have experienced long-term homelessness.

Using this optimal system model, Detroit can develop a transition plan that phases in investment and system changes to develop a

more optimized approach to homelessness system design and operation.

The Conversion summaries below in Tables 9 and 10 show current system inventory and available inventory based on turnover for individuals and families (households with at least one adult and one dependent child.) Optimal system assumptions are then modeled to determine the number of additional beds/units to achieve optimal status.

### For Individuals

Tables 9 and 10 below show results for an optimal system design for individuals and families experiencing homelessness.

Ongoing, permanent investment in these additional units will be required to achieve optimal status. Optimal system status enables all persons experiencing a housing crisis to resolve their homelessness using the most appropriate resource type(s) for the minimal amount of time and achieving sustained housing resolution.

As the Detroit community makes progress in the initial years of system investment and expansion according to strategic planning goals, analytical modeling should be refined and updated. Adjustments to bed/unit expansion goals are expected to be made based on updated System Modeling results.

### Table 9: Conversion from Current to Optimal System
#### INDIVIDUALS

| Program Types | Current Bed/Unit Inventory | Current Beds/Units Available Annually for New Enrollments* | Total Needed Beds/Units Annually | Estimated Deficit Between Annual Available vs. Need |
|---|---|---|---|---|
| **Crisis Response System** | | | | |
| Emergency Shelter | 520 | 520 | 794 | **275** |
| Rapid Exit/Diversion | 397 | 397 | 304 | - |
| Transitional Housing | 76 | 76 | 76 | - |
| **Rehousing System** | | | | |
| Rapid Rehousing | 155 | 155 | 304 | **150** |
| Other Permanent Housing | 50 | 50 | 868 | **820** |
| Permanent Supportive Housing | 1,616 | 162 | 998 | **840** |

*Although the Detroit CoC system includes 1,616 PSH units for individuals only about 10% of that inventory turns over annually, making only 162 PSH units available for new enrollments each year.

Ongoing, permanent investment in these additional units will be required to achieve optimal status. Optimal system status enables all persons experiencing a housing crisis to resolve their homelessness using the most appropriate resource type(s) for the minimal amount of time and achieving sustained housing resolution.

As the Detroit community makes progress in the initial years of system investment and expansion according to strategic planning goals, analytical modeling should be refined and updated. Adjustments to bed/unit expansion goals are expected to be made based on updated System Modeling results.

## For Families

Table 10 below shows results for an optimal system design for families experiencing homelessness.

### Table 10: Conversion from Current to Optimal System
#### FAMILIES

| Program Types | Current Unit Inventory | Current Units Available Annually for New Enrollments* | Total Needed Units Annually | Estimated Deficit Between Annual Available vs. Need |
|---|---|---|---|---|
| **Crisis Response System** | | | | |
| Emergency Shelter | 93 | 93 | 107 | **20** |
| Rapid Exit/Diversion | 80 | 80 | - | - |
| Transitional Housing | 28 | 28 | - | - |
| **Rehousing System** | | | | |
| Rapid Rehousing | 129 | 129 | 234 | **105** |
| Other Permanent Housing | 50 | 50 | 203 | **155** |
| Permanent Supportive Housing | 306 | 31 | 62 | **30** |

*Although the Detroit CoC system includes 306 PSH units for families, only about 10% of that inventory turns over annually, making only 31 PSH units available for new enrollments each year.

# Average Costs

City of Detroit and HAND administer or coordinate over $40 million in annual recurring funding for the Detroit homelessness system. Major funding sources include HUD CoC grants based on a competitive national competition for McKinney-Vento resources, and entitlement funds inclusive of Emergency Solutions Grants (ESG), Home Investment Partnerships Program (HOME), and Community Development Block Grants (CDBG). Additional other sources include private foundation and philanthropic investments.

HAND supplied average annual costs for ES, RRH and PSH project types based on available data on complete project budgets from 2023. In addition to project budgets supplied by HAND and HRD, BPA consultants considered average costs from other jurisidictions operating nationally recognized program models for ES, RRH, and PSH. Local cost data were combined with national averages to develop estimated annual costs for ES, RRH and PSH as reflected in Tables 11 and 12.

### Table 11: Estimated Average Annual Cost by Project Bed/Unit/Service Type
#### INDIVIDUALS

| Cost Category | ES | RRH | OPH | PSH* |
|---|---|---|---|---|
| Rent Subsidy/Leasing – 1 Bd FMR | | $14,400 | $14,000 | $14,400 |
| Services | | $5,000 | | $7,000 |
| Operations | $13,500 | | | |
| Administration | $675 | $1,000 | | $1,050 |
| **TOTAL Annual Per Unit Cost** | **$14,175** | **$19,400** | **$14,000** | **$22,450** |

*PSH cost projection data are for scattered site PSH.  Development costs for new, site-based projects average $275,000 per unit according to the Corporation for Supportive Housing.  These development costs  include one-time acquistion, new construction, and/or rehabilitation.

### Table 12: Estimated Average Annual Cost by Project Bed/Unit/Service Type
#### FAMILIES

| Cost Category | ES | RRH | OPH | PSH* |
|---|---|---|---|---|
| Rent Subsidy/Leasing – 2 Bd FMR | | $16,800 | $16,800 | $16,800 |
| Services | | $7,000 | | $9,000 |
| Operations | $18,000 | | | |
| Administration | $675 | $1,000 | | $1,100 |
| **TOTAL Annual Per Unit Cost** | **$18,675** | **$24,800** | **$16,800** | **$26,900** |

*PSH cost projection data are for scattered site PSH. Development costs for new, site-based projects average $275,000 per unit according to the Corporation for Supportive Housing.
These development costs include one-time acquistion, new construction, and/or rehabilitation.

When average costs per unit are multiplied by the estimated number of additional beds/units necessary to achieve optimal system design the results provide an estimate of total new additional investment needed for the Detroit homelessness system.

Results (Tables 13 and 14) reveal an annual additional need of roughly $37 miliion for individuals and $6.4 million for families. These large gaps demonstrate how underfunded the current system is and the scale of additional investment needed to address the housing crisis needs of Detroit residents.

**For Individuals**

*Table 13: Estimated Additional System Investment Needed to Achieve Optimzation*

| INDIVIDUALS | | | |
|---|---|---|---|
| Current System - Individuals | Current Average Cost Per Unit | Additional Inventory for Optimization | Approximate Additional Annual Cost |
| Emergency Shelter | $14,175 | 275 | $3,898,125 |
| Rapid Rehousing | $19,400 | 150 | $2,910,000 |
| Other Permanent Housing | $14,000 | 820 | $11,480,000 |
| Permanent Supportive Housing | $22,450 | 840 | $18,858,000 |
| **TOTAL Additional Annual System Cost** | | | **$37,146,125** |

**For Families**

*Table 14: Estimated Additional System Investment Needed to Achieve Optimzation*

| FAMILIES | | | |
|---|---|---|---|
| Current System - Families | Current Average Cost Per Unit | Additional Inventory for Optimization | Approximate Additional Annual Cost |
| Emergency Shelter | $18,675 | 20 | $373,500 |
| Rapid Rehousing | $24,800 | 105 | $2,604,000 |
| Other Permanent Housing | $16,800 | 155 | $2,604,000 |
| Permanent Supportive Housing | $26,900 | 30 | $807,000 |
| **TOTAL Additional Annual System Cost** | | | **$6,388,500** |