Reimagining Shelter/Interim Housing

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

Barbara Poppe and associates

The collective for impact

Prioritization Survey

Combined Results

Prepared for Discussion by the Planning Team

12/1/23

Co-chairs: Sarah and Amber

BPA team: Donna, Eli, Matthew and Barb

Planning Project Overview

Overall Charge: Develop a Strategic System Improvement Plan for the community's homelessness response system

Community Planning Sessions' Charge: Recommend Critical Improvements and Transformations

Our Focus:

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.

Community Planning Sessions' Purpose

Generate potential solutions or strategies, including:

- **IMPROVEMENTS** to be made within existing efforts and programs (e.g., staffing and role clarification, streamlining, policies and practices, improved partnerships, improved public policy, etc.)
- **INNOVATIONS** to be tried and tested to support transformation of approaches (e.g., new models, new partnerships, new services and staffing designs, new capacity-building efforts, etc.)

Community Planning Session Participation

Community Planning Session	# RSVPs	# Attendees	% PWLEH
11/14/23 **Clients' Basic Needs, Experiences, and Rights**	99	99	22%
11/15/23 **Services and Staffing**	88	74	21%
11/16/23 **Facilities and Environments**	84	84	21%
11/17/23 **Integrating Programs within the Homelessness Response System**	106	78	26%

Process: Online Prioritization Survey

- Potential solutions were identified during the Jam Sessions conducted during each Community Planning Session. All ideas that were generated can be found at this link:

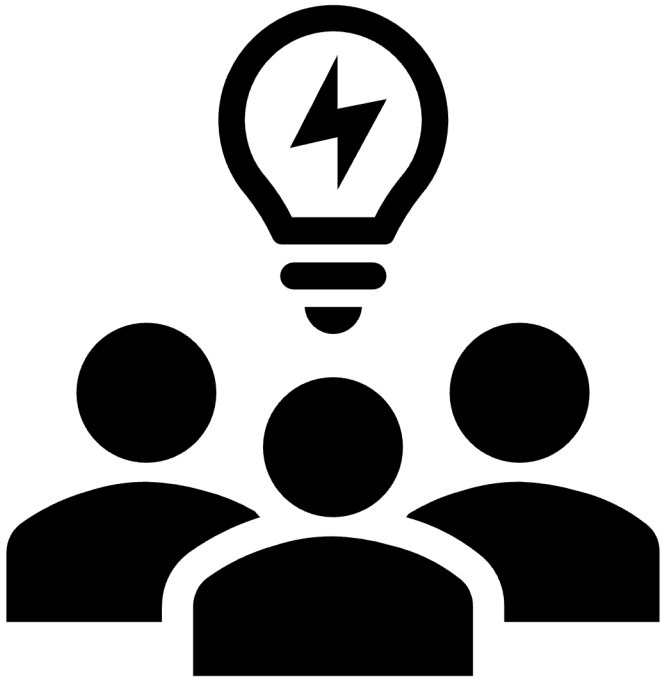
  https://detroitmi.gov/departments/housing-and-revitalization-department/homelessness-strategic-planning-project/strategic-plan-meeting-minutes
- These solutions were used to form the basis for an electronic survey to prioritize among ideas.
- The Admin Team, in partnership with the BPA team, developed and issued the survey.
- The survey was issued by HRD to all who participated and had been invited to participate.
- The survey was open during the period, 11/28 – 11/30.
- The survey was administered and analyzed by the BPA team for presentation to the Planning Team.

Prioritization Considerations

- 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?

Who participated in the survey?

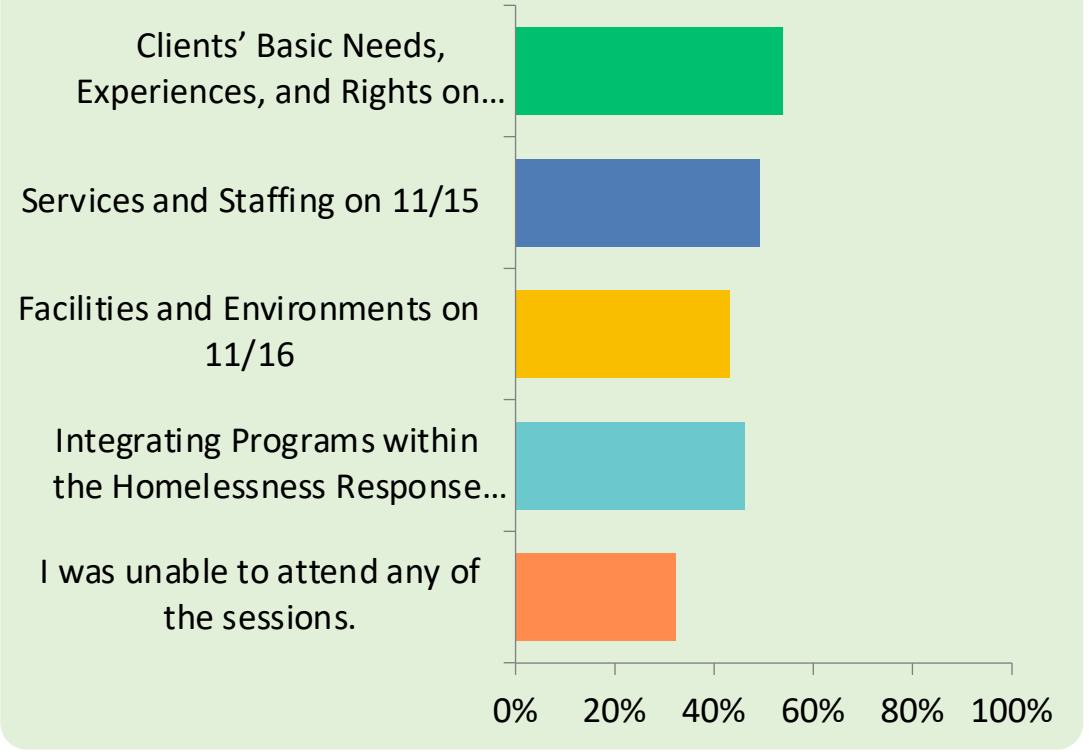
82 Detroit residents who are passionate about improving the response to homelessness



Q1: Reimagining Shelter Community Planning Sessions. Please select each session that you attended:

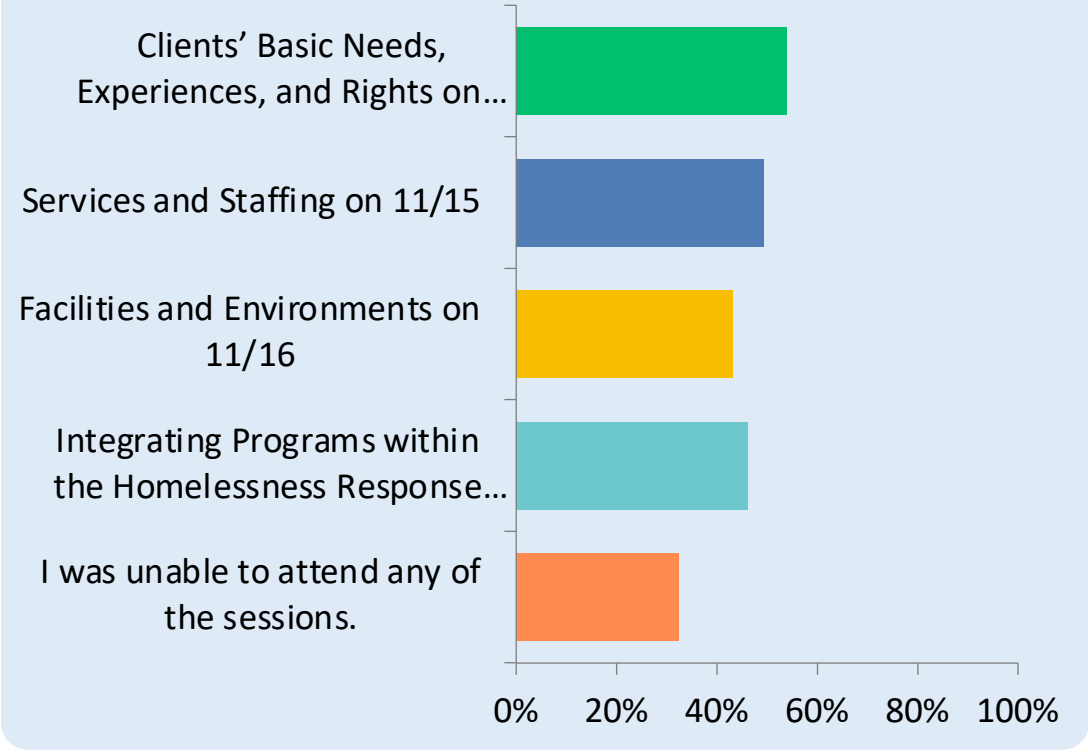
Respondents: People with Lived Experience of Homelessness

Answered: 15 Skipped: 2



Respondents: Other

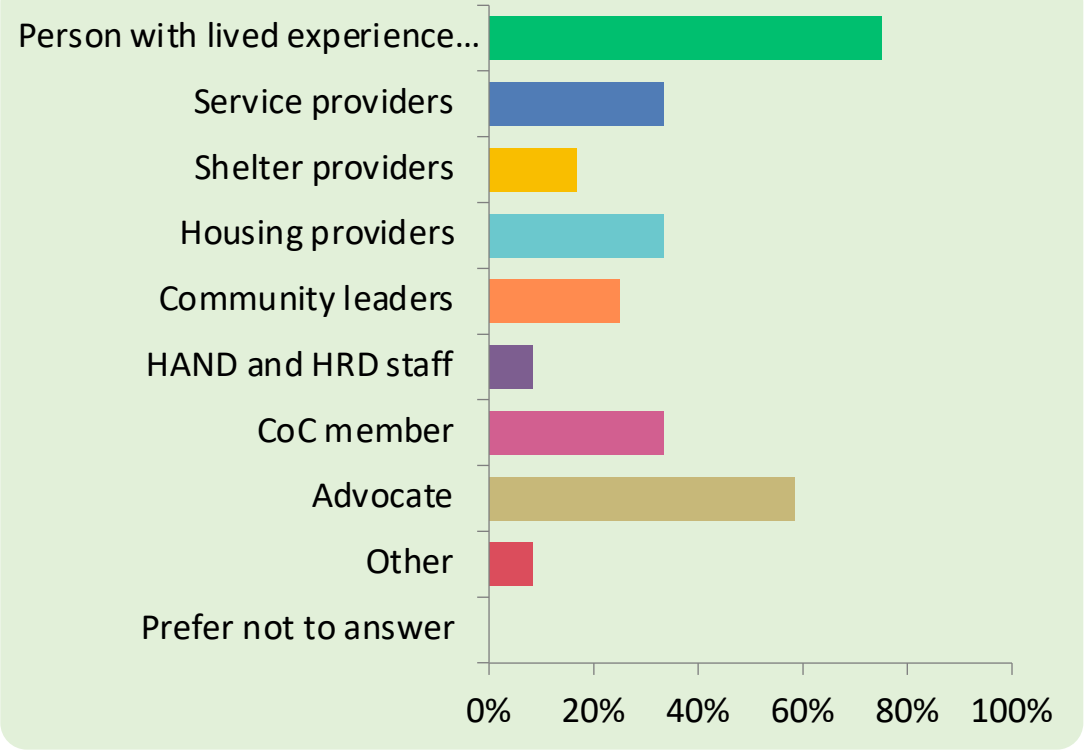
Answered: 65 Skipped: 0



Q20: In what ways do you participate in the homelessness response system? [select all that apply]

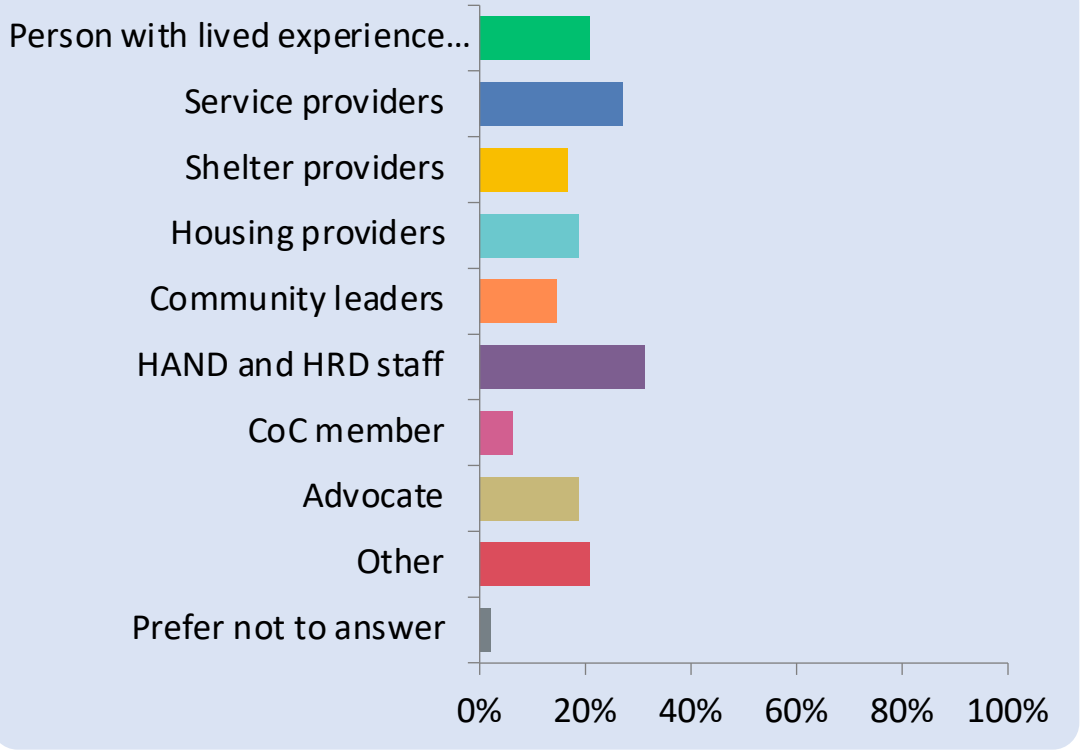
Respondents: People with Lived Experience of Homelessness

Answered: 12 Skipped: 5



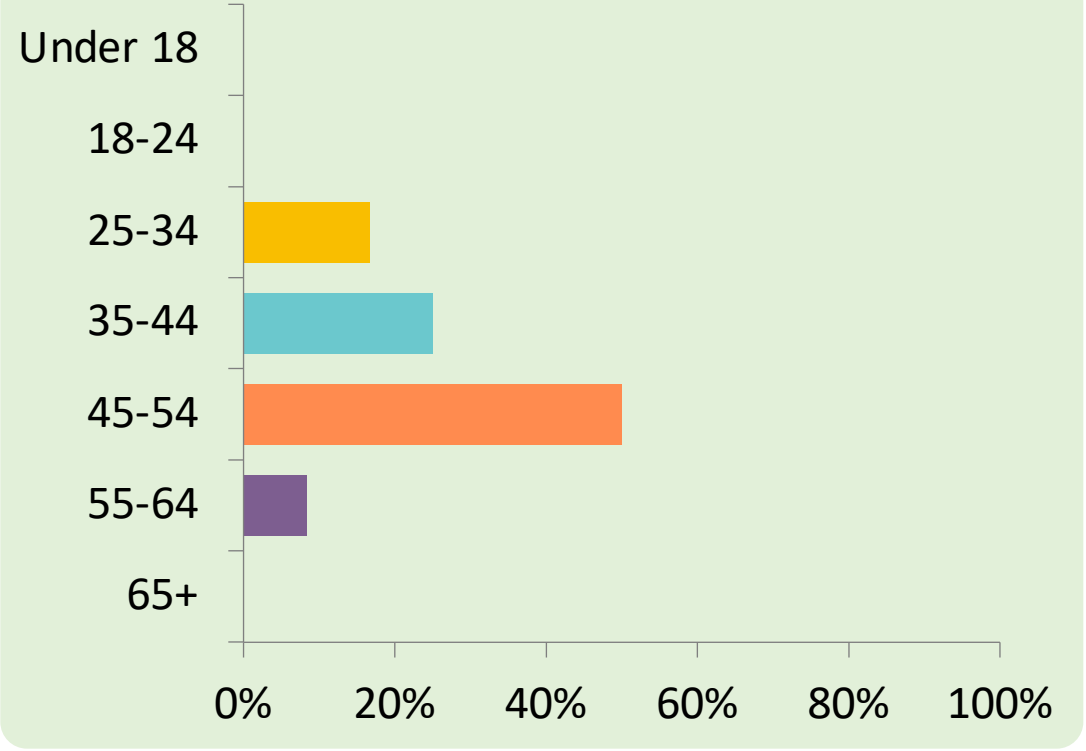
Respondents: Other

Answered: 48 Skipped: 17

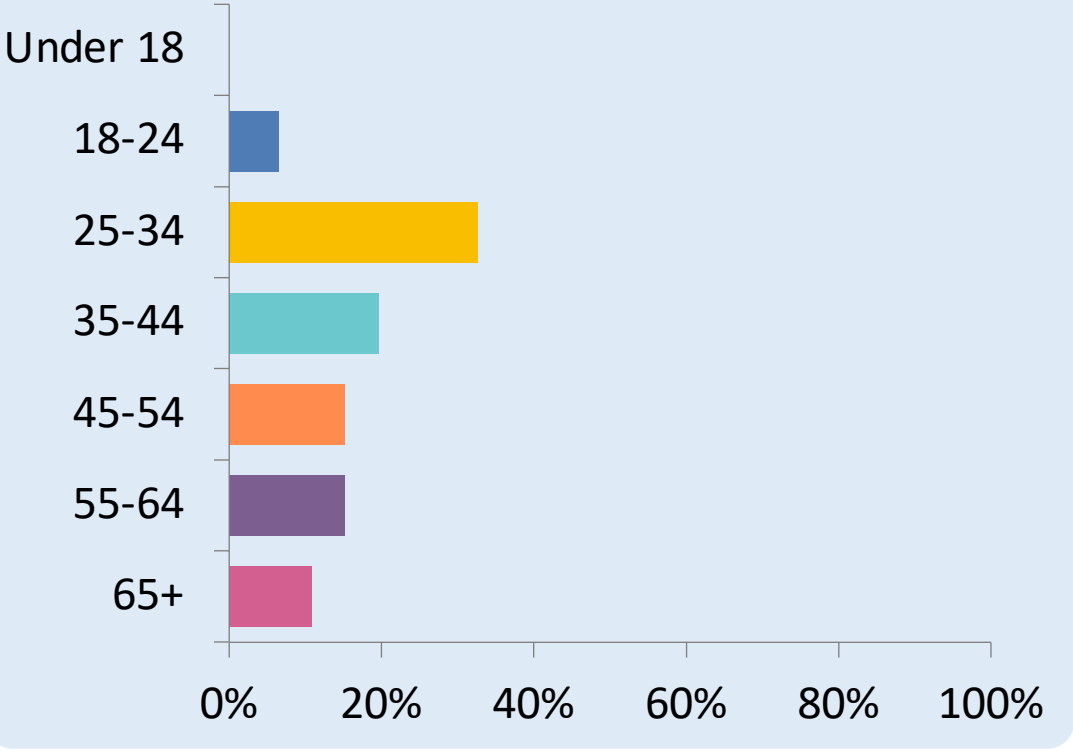


Q21: What is your age?

Respondents: People with Lived Experience of Homelessness
Answered: 12 Skipped: 5

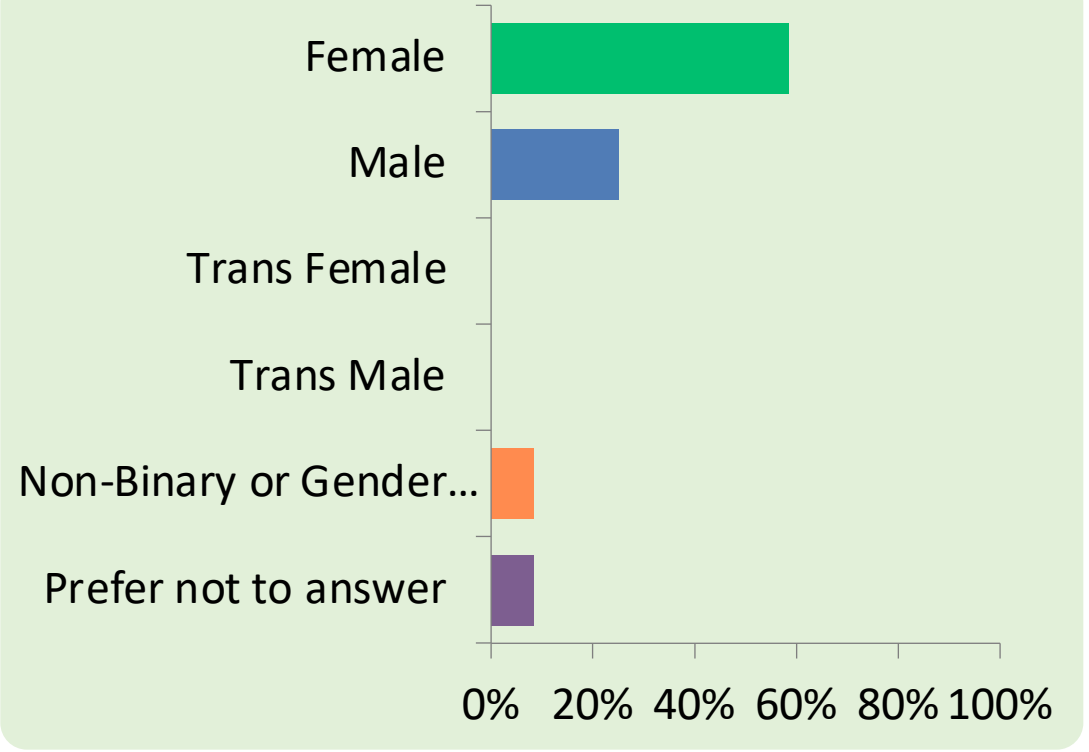


Respondents: Other
Answered: 46 Skipped: 19

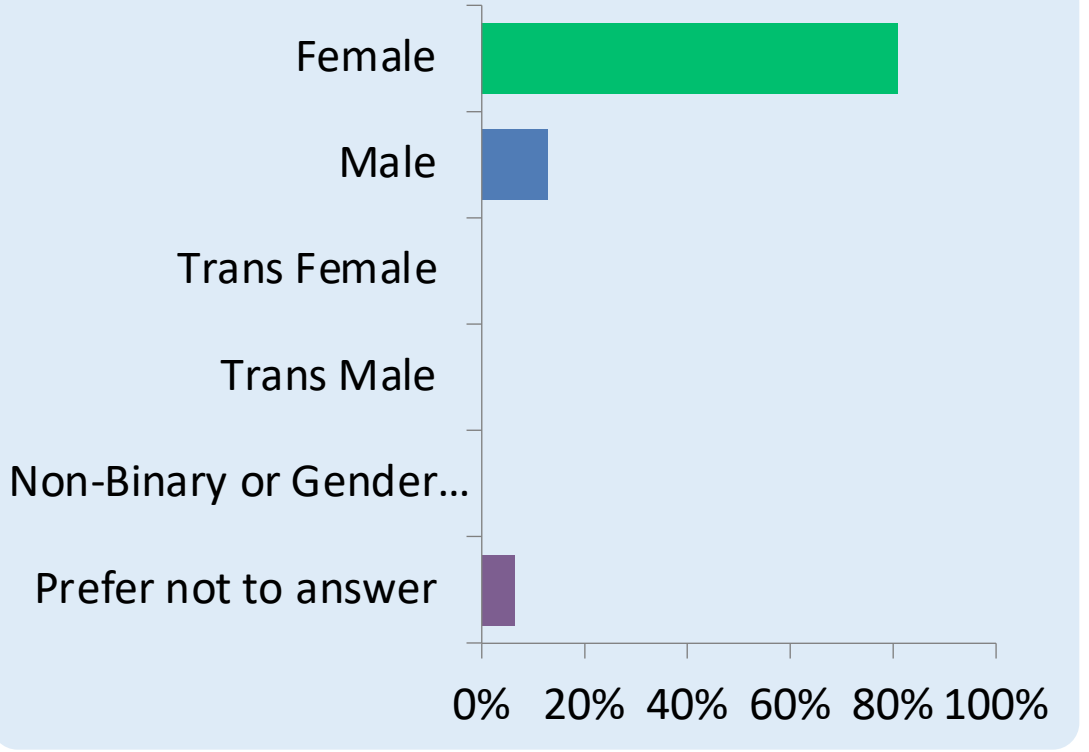


Q22: What is your gender identity?

Respondents: People with Lived Experience of Homelessness
Answered: 12 Skipped: 5

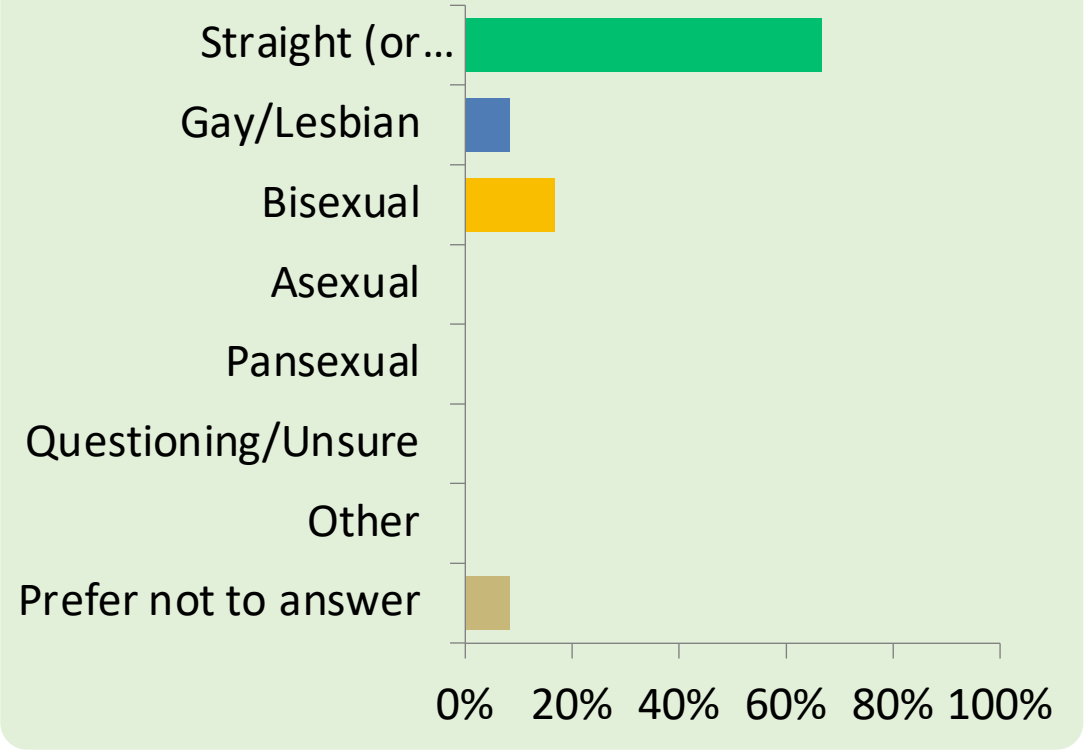


Respondents: Other
Answered: 47 Skipped: 18

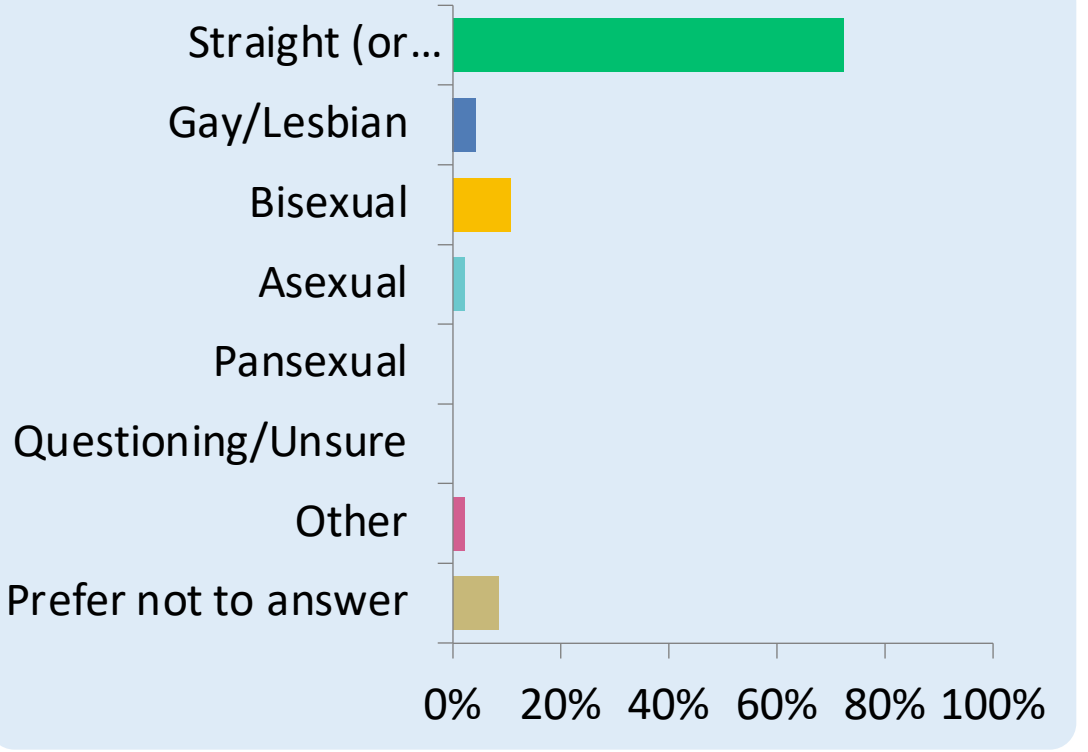


Q23: Which of the following best represents how you think about yourself?

Respondents: People with Lived Experience of Homelessness
Answered: 12 Skipped: 5

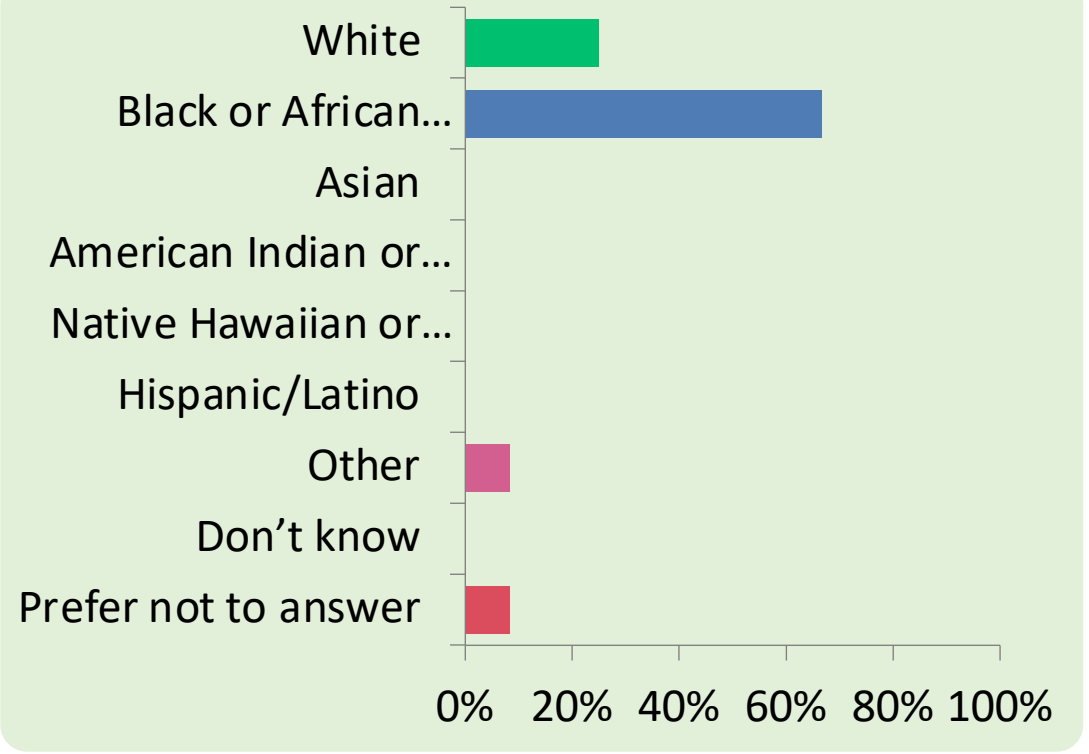


Respondents: Other
Answered: 47 Skipped: 18

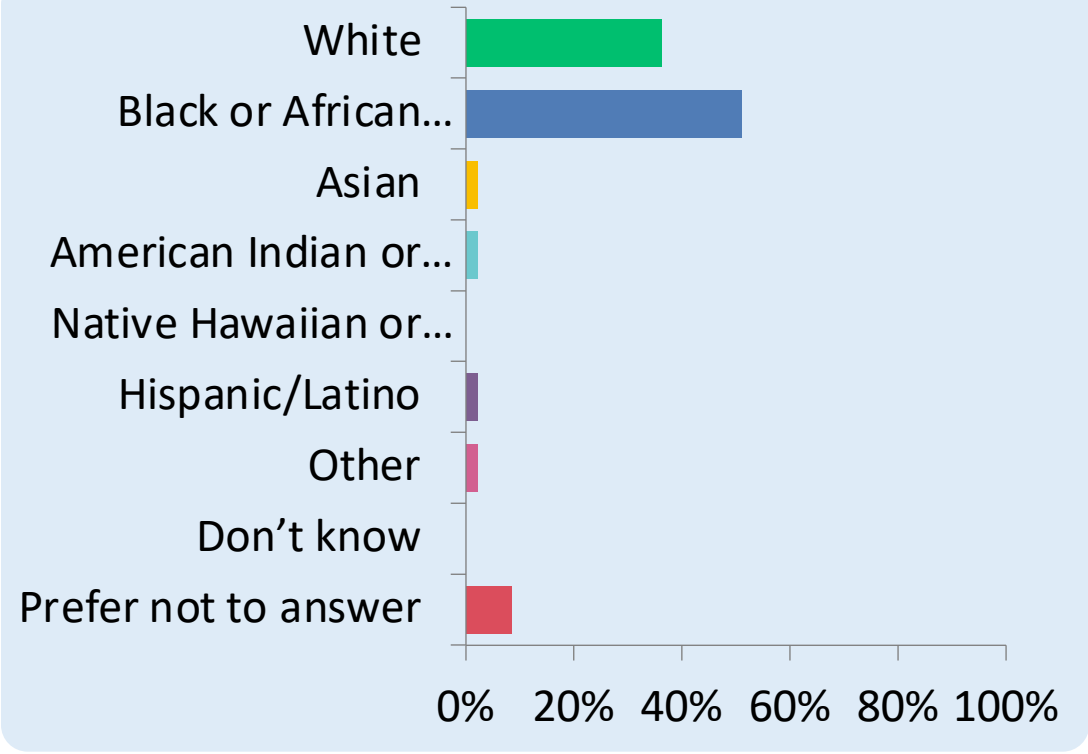


Q24: What is your racial Identity? (you may select more than one).

Respondents: People with Lived Experience of Homelessness
Answered: 12 Skipped: 5

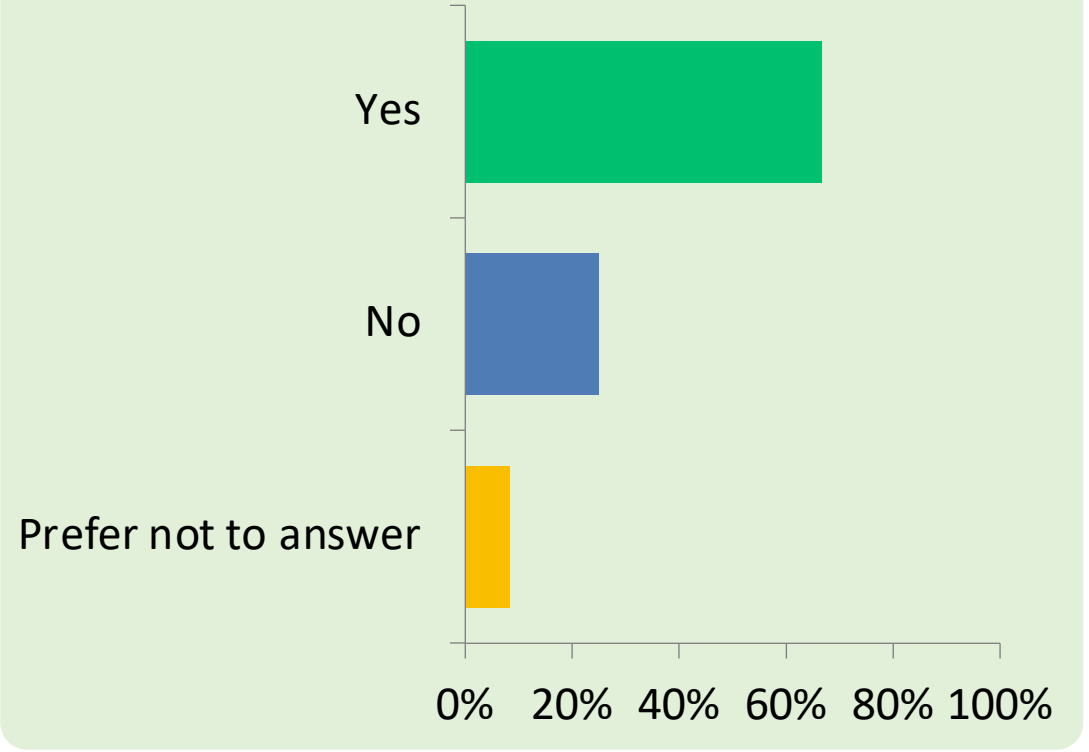


Respondents: Other
Answered: 47 Skipped: 18

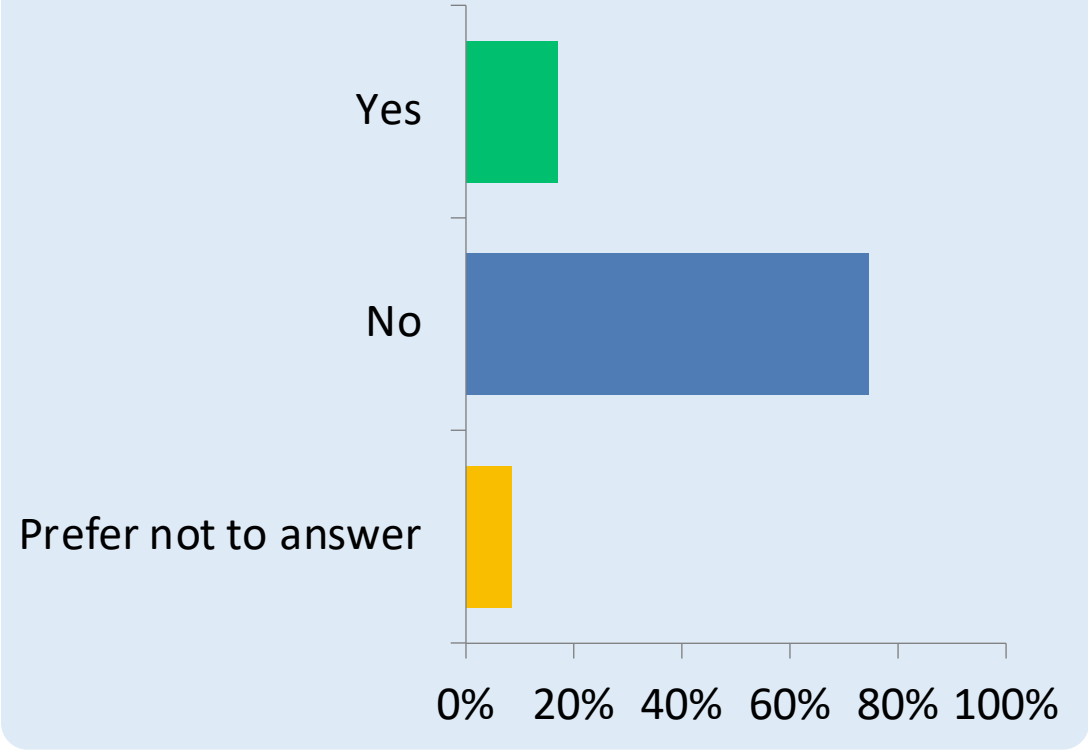


Q25: Are you a person living with a disability?

Respondents: People with Lived Experience of Homelessness
Answered: 12 Skipped: 5



Respondents: Other
Answered: 47 Skipped: 18

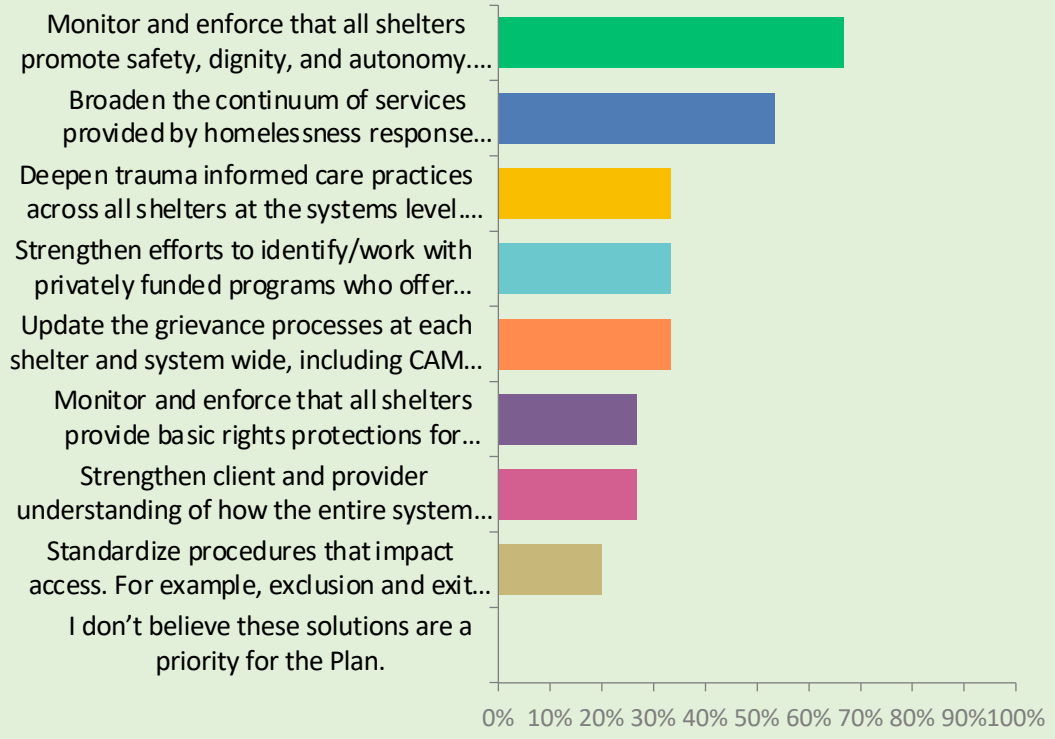


What improvements do they prioritize?

Q2: Improvements: Clients' Basic Needs, Experiences, and Rights. Please select up to three activities that you would prioritize to improve the homelessness system.

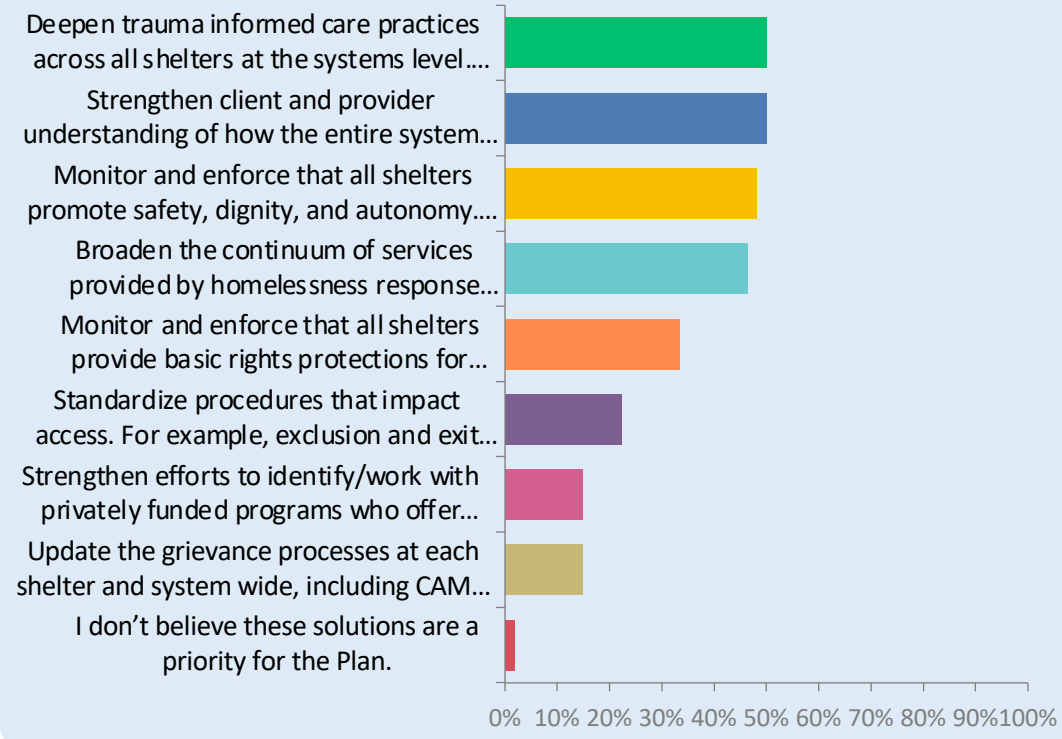
Respondents: People with Lived Experience of Homelessness

Answered: 15 Skipped: 2



Respondents: Other

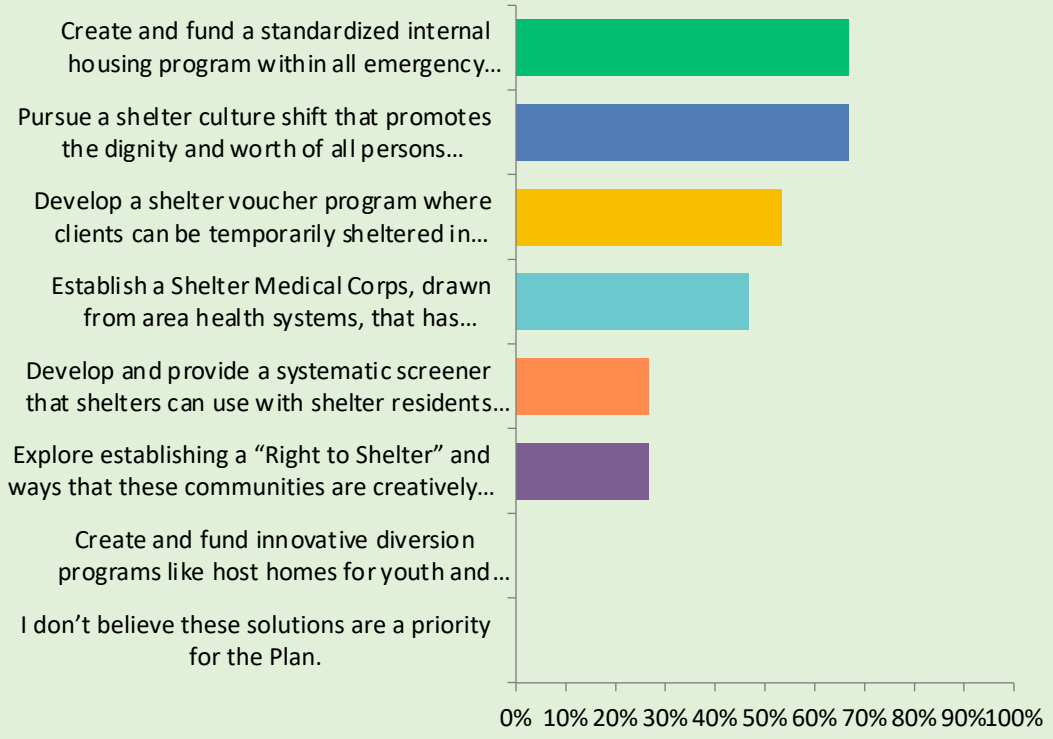
Answered: 54 Skipped: 11



Q3: Innovation: Clients' Basic Needs, Experiences, and Rights. Please select up to three activities that you would prioritize to improve the homelessness system.

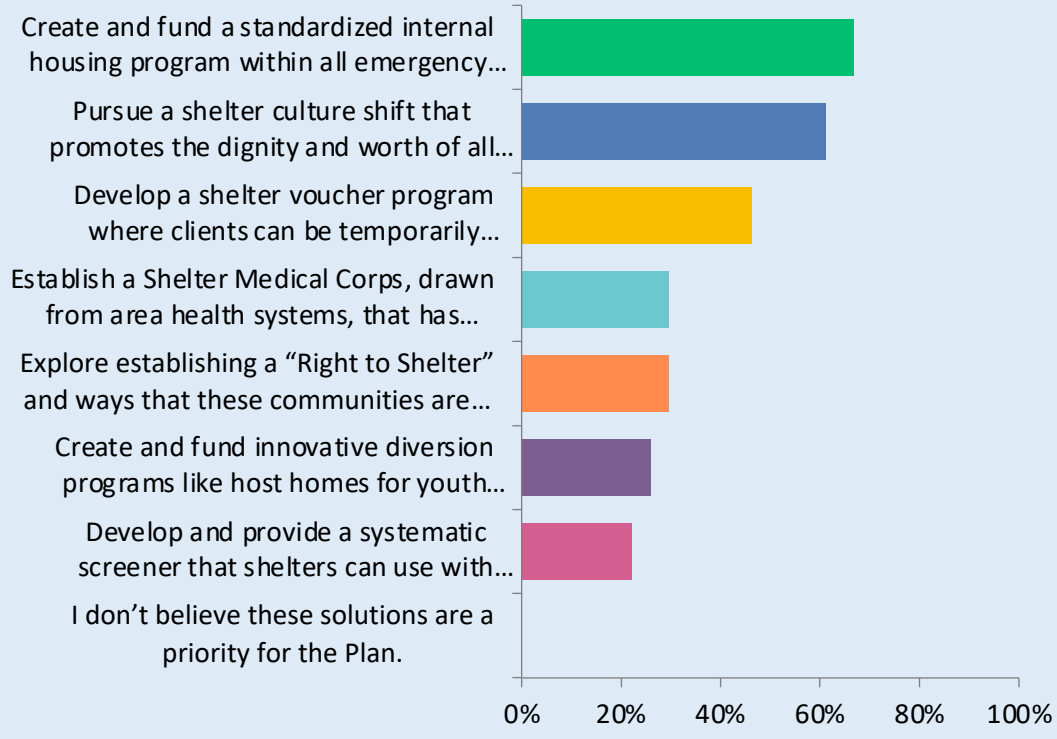
Respondents: People with Lived Experience of Homelessness

Answered: 15 Skipped: 2



Respondents: Other

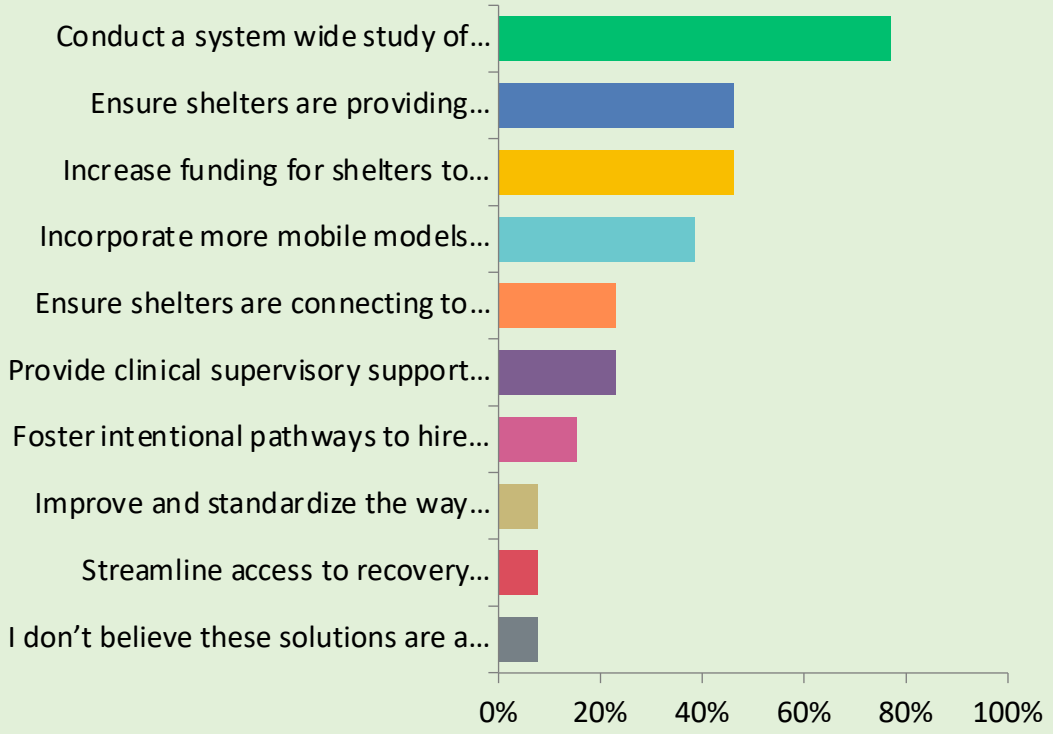
Answered: 54 Skipped: 11



Q5: Improvements: Staffing and Services. Please select up to three activities that you would prioritize to improve the homelessness system.

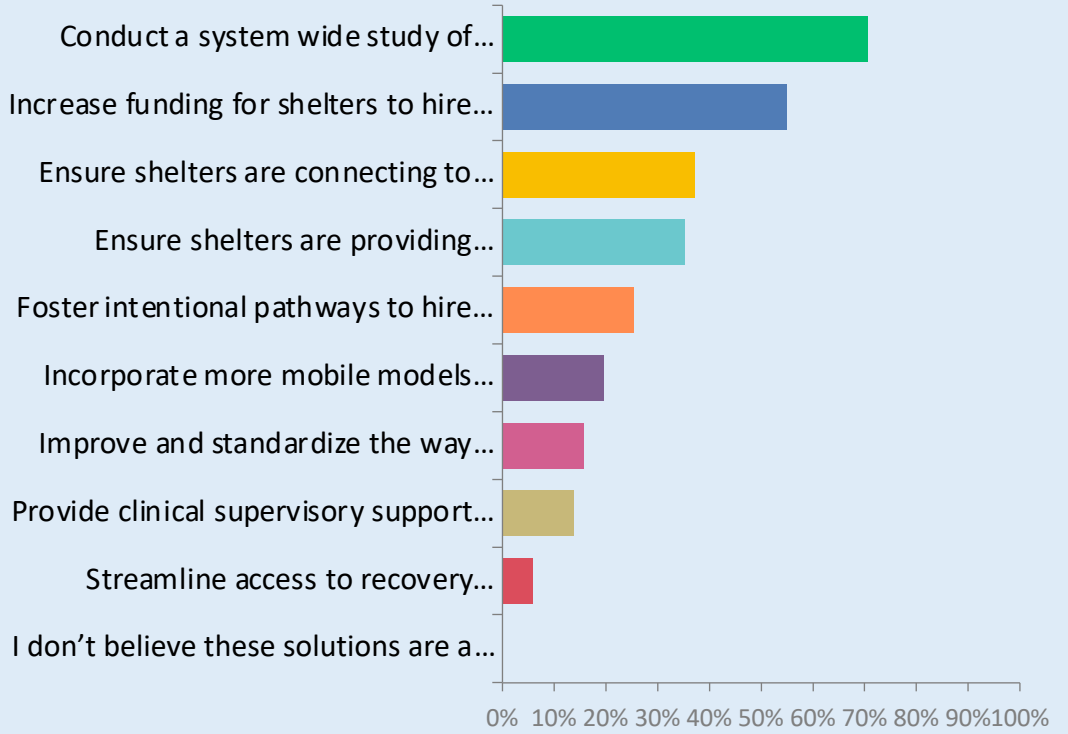
Respondents: People with Lived Experience of Homelessness

Answered: 13 Skipped: 4



Respondents: Other

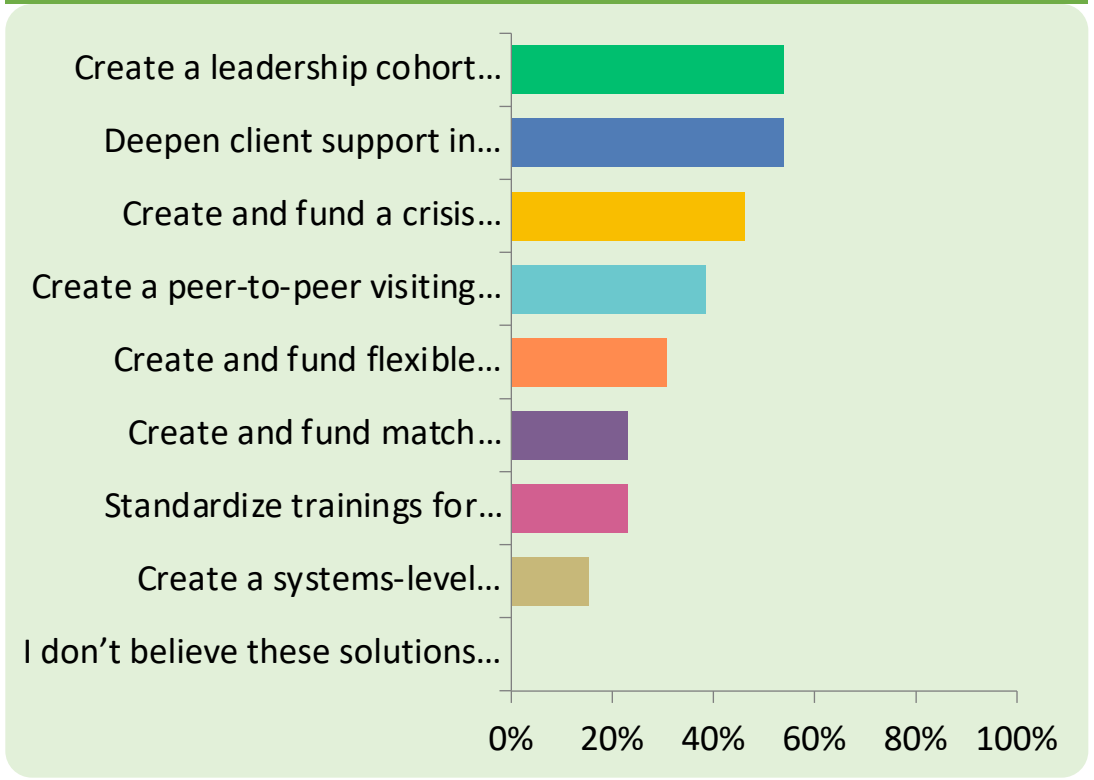
Answered: 51 Skipped: 14



Q6: Innovations: Staffing and Services. Please select up to three activities that you would prioritize to improve the homelessness system.

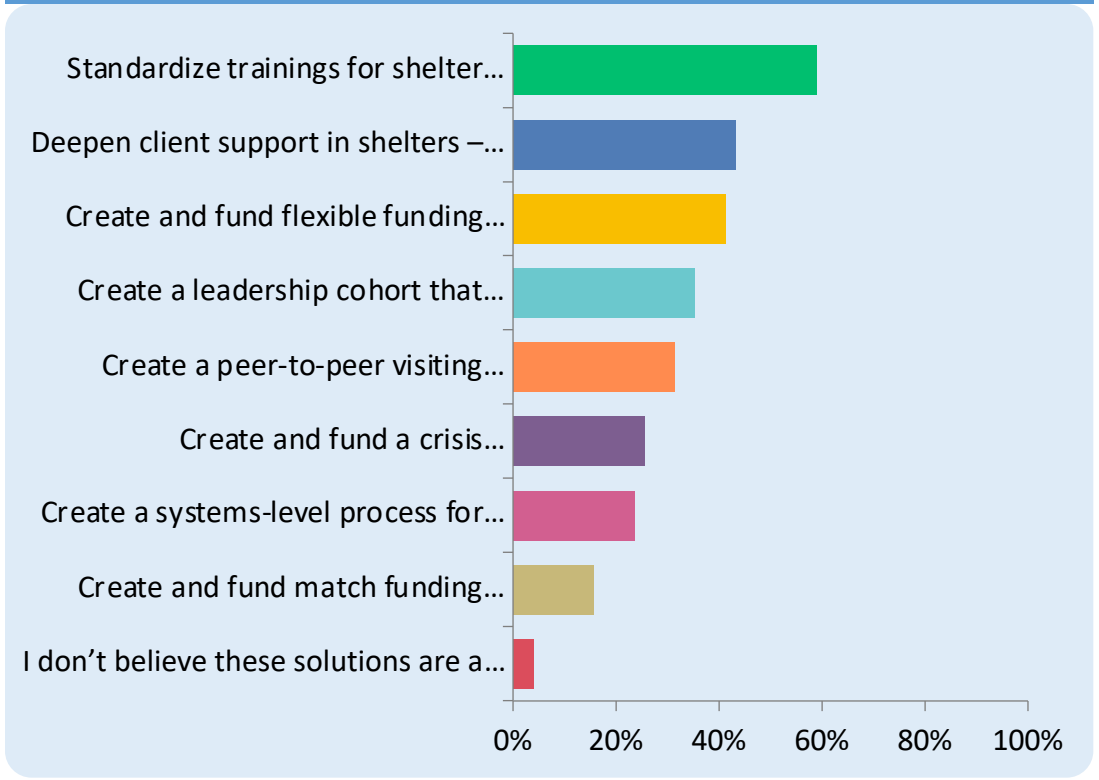
Respondents: People with Lived Experience of Homelessness

Answered: 13 Skipped: 4



Respondents: Other

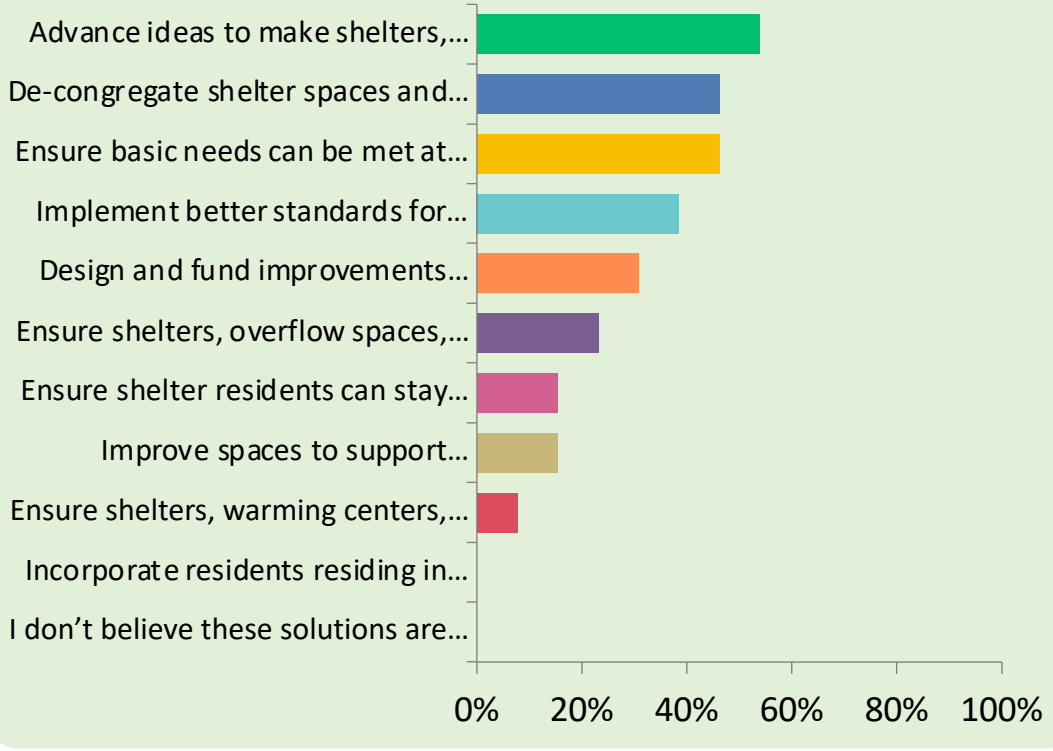
Answered: 51 Skipped: 14



Q8: Improvements: Facilities and Environments. Please select up to three activities that you would prioritize to improve the homelessness system.

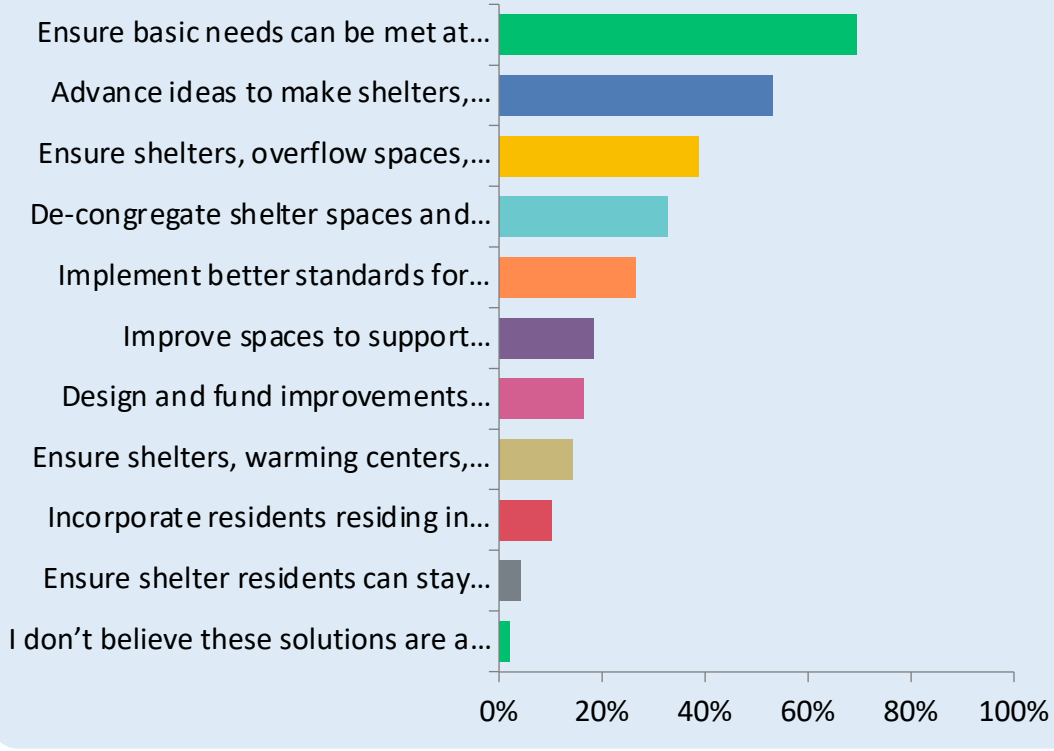
Respondents: People with Lived Experience of Homelessness

Answered: 13 Skipped: 4



Respondents: Other

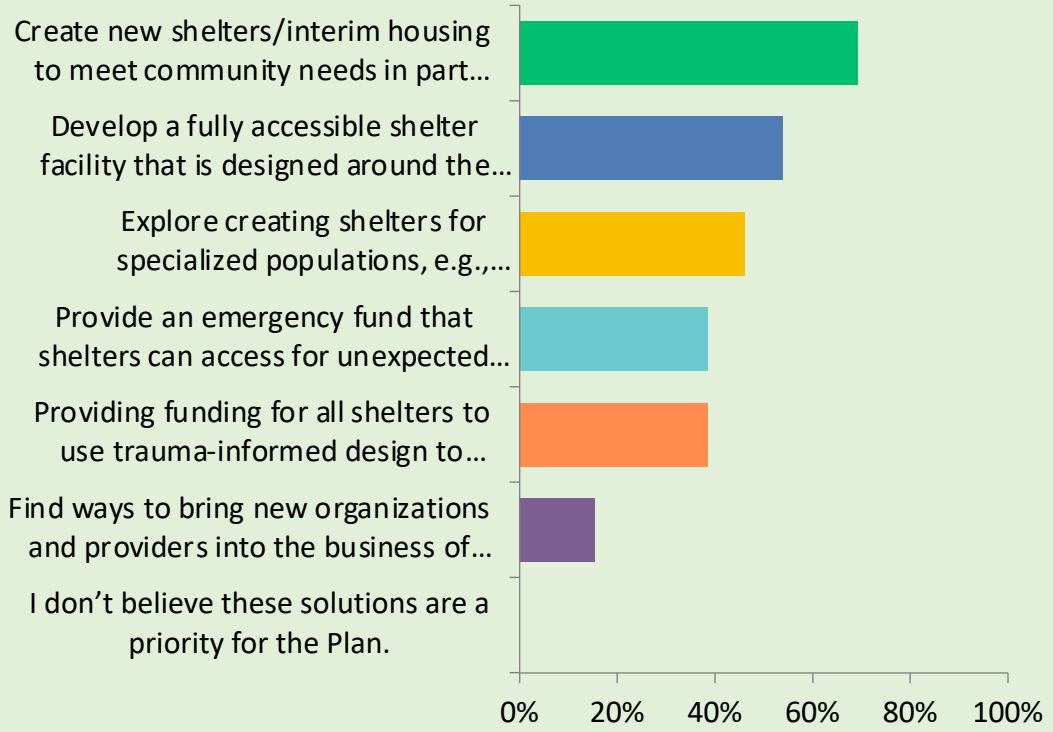
Answered: 49 Skipped: 16



Q9: Innovations: Facilities and Environments. Please select up to three activities that you would prioritize to improve the homelessness system.

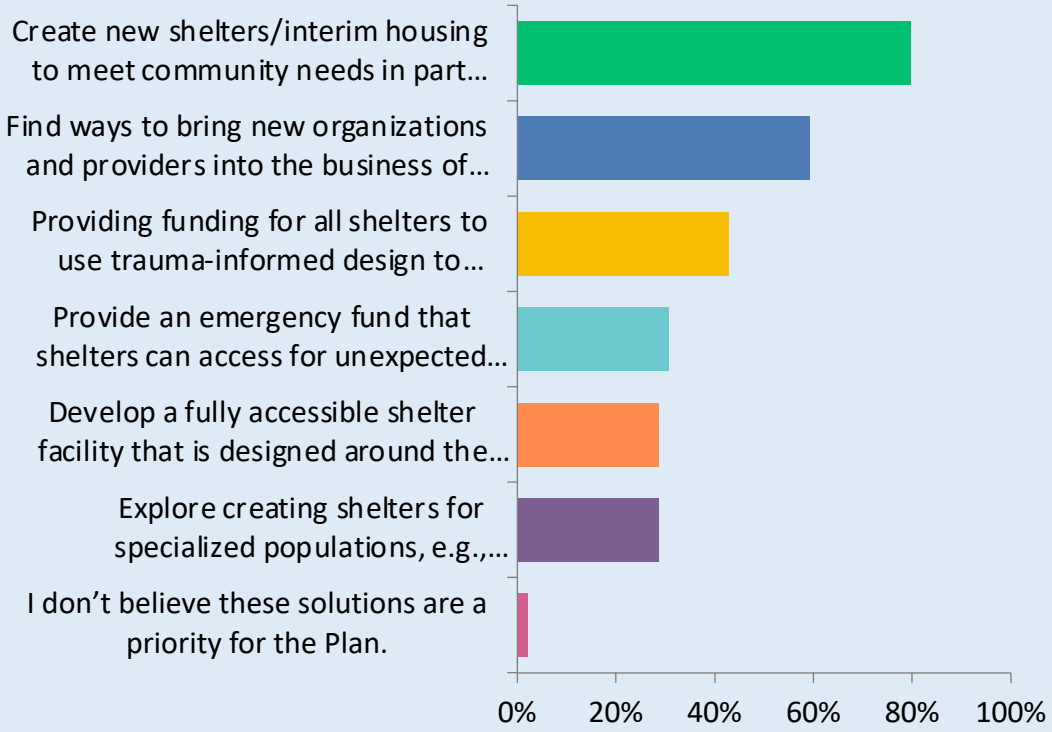
Respondents: People with Lived Experience of Homelessness

Answered: 13 Skipped: 4



Respondents: Other

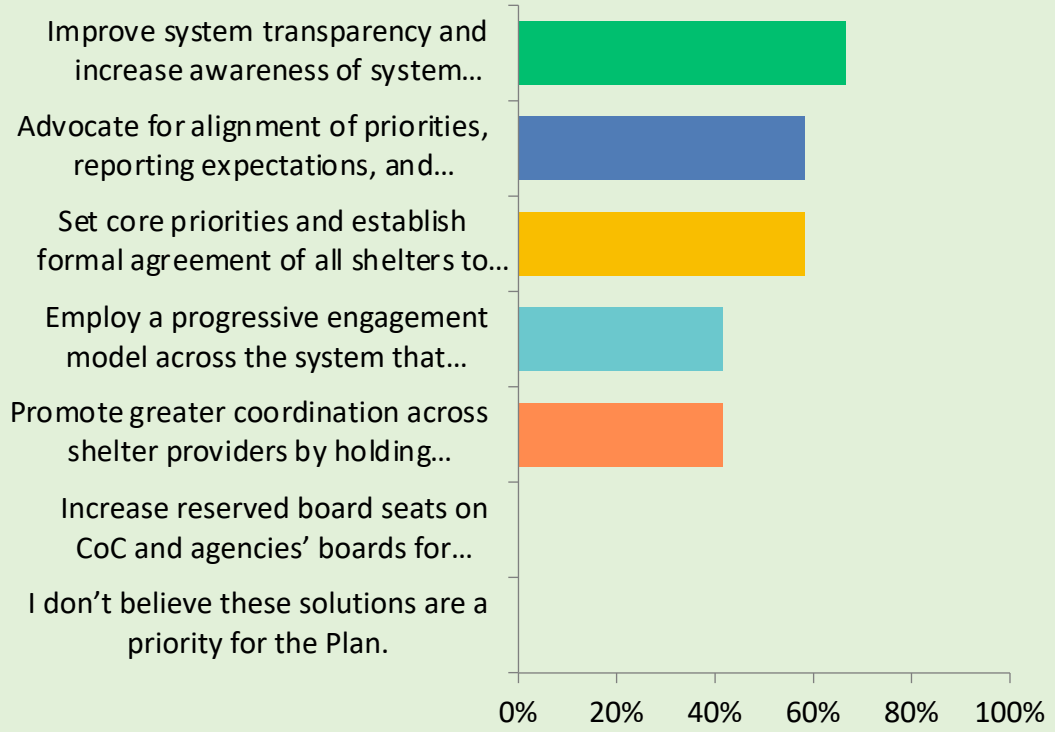
Answered: 49 Skipped: 16



Q11: **Improvements**: Integrating Programs within the Homelessness Response System. Please select up to three activities that you would prioritize to improve the homelessness system.

Respondents: People with Lived Experience of Homelessness

Answered: 12 Skipped: 5



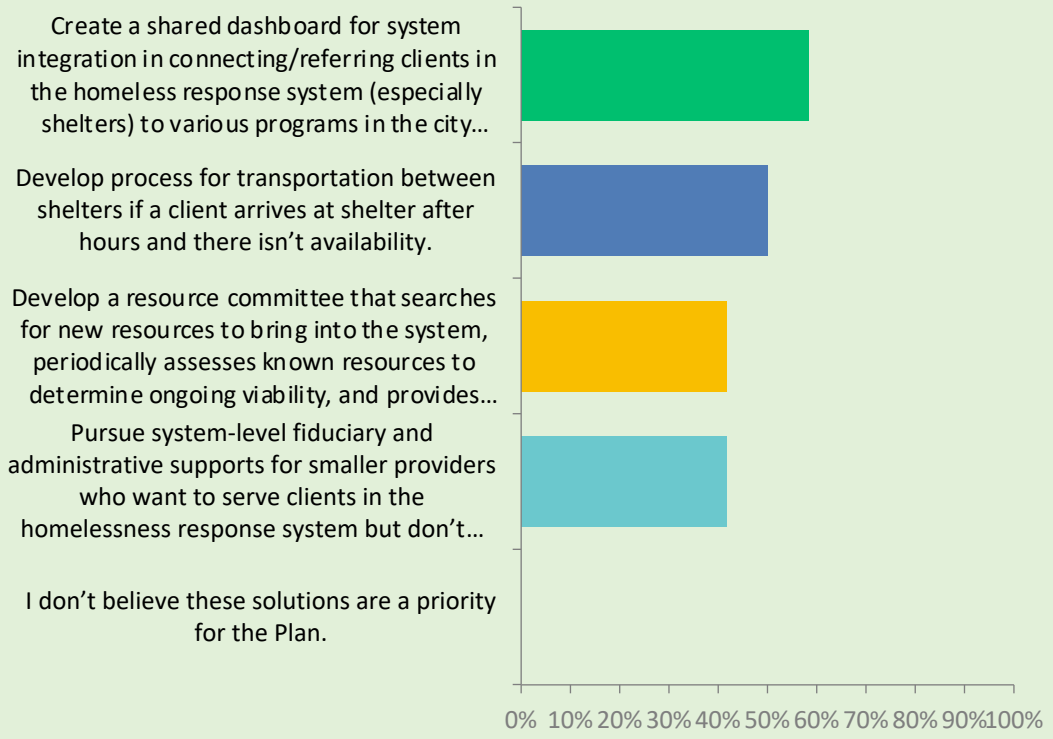
Respondents: Other

Answered: 49 Skipped: 16

Q12: **Innovations:** Integrating Programs within the Homelessness Response System. Please select up to two activities that you would prioritize to improve the homelessness system.

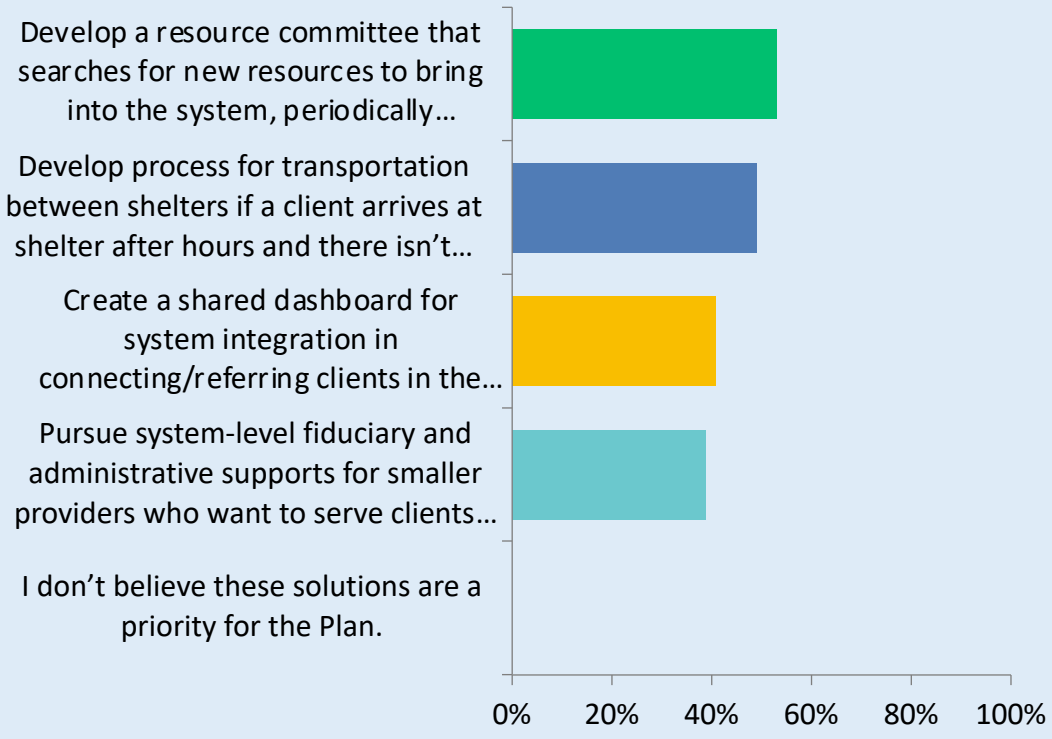
Respondents: People with Lived Experience of Homelessness

Answered: 12 Skipped: 5



Respondents: Other

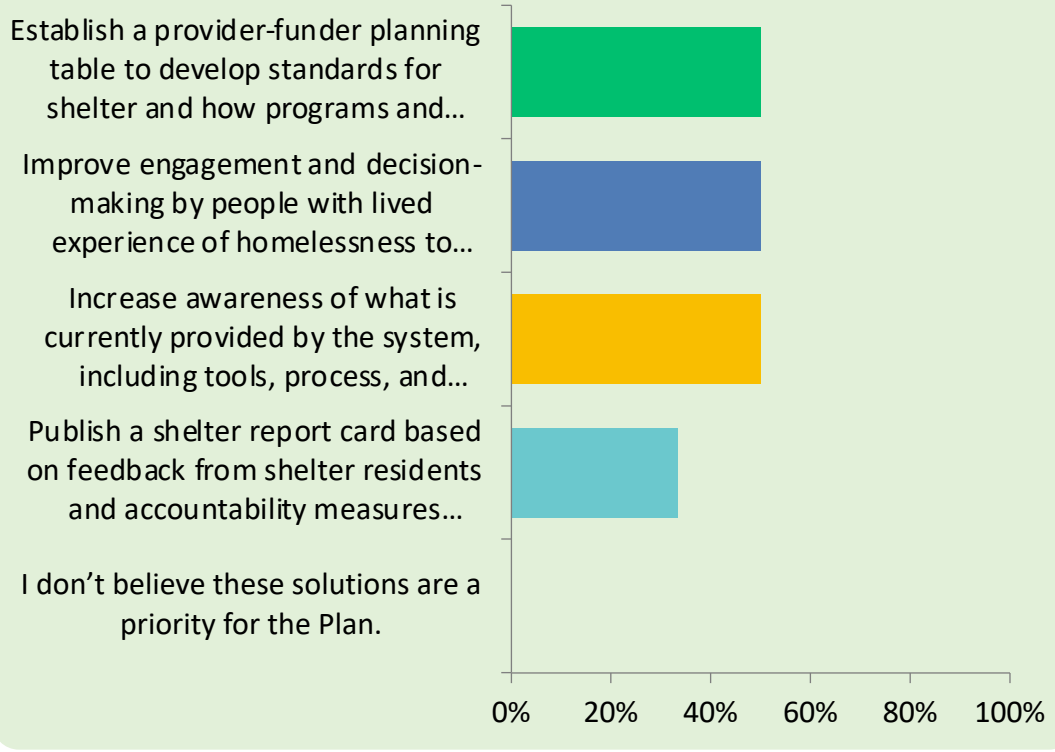
Answered: 49 Skipped: 16



Q14: **Improvements that affect and cut across all** or most aspects of reimagining and improving the quality and availability of shelter. Please select up to two activities that you would prioritize to improve the homelessness system.

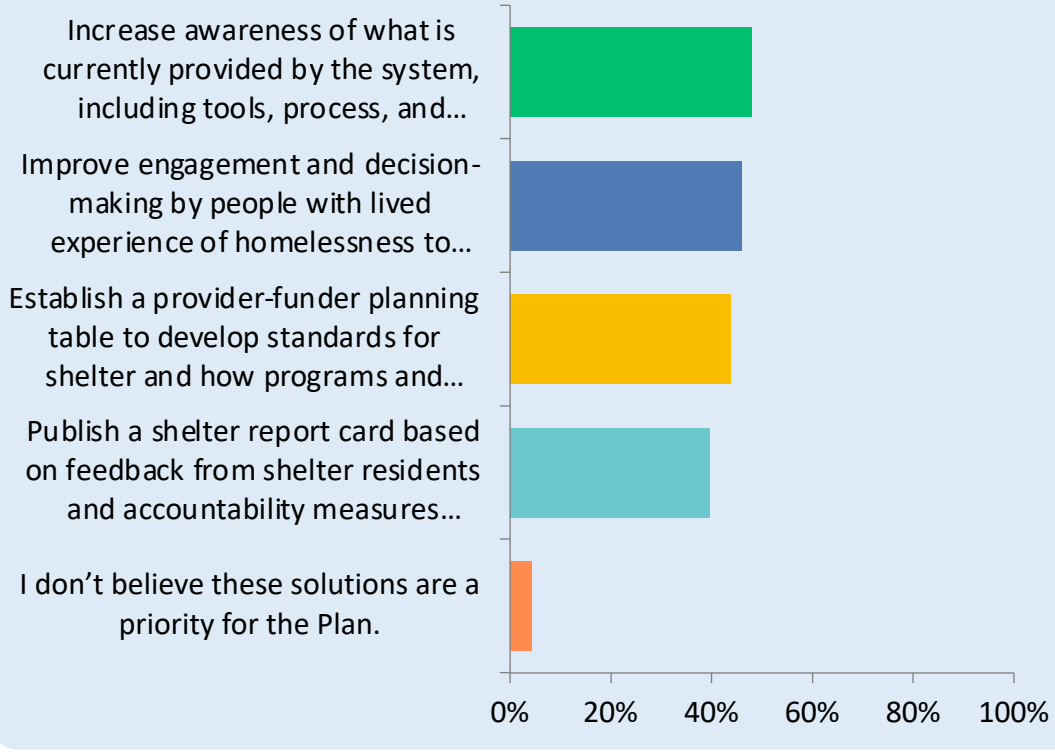
Respondents: People with Lived Experience of Homelessness

Answered: 12 Skipped: 5



Respondents: Other

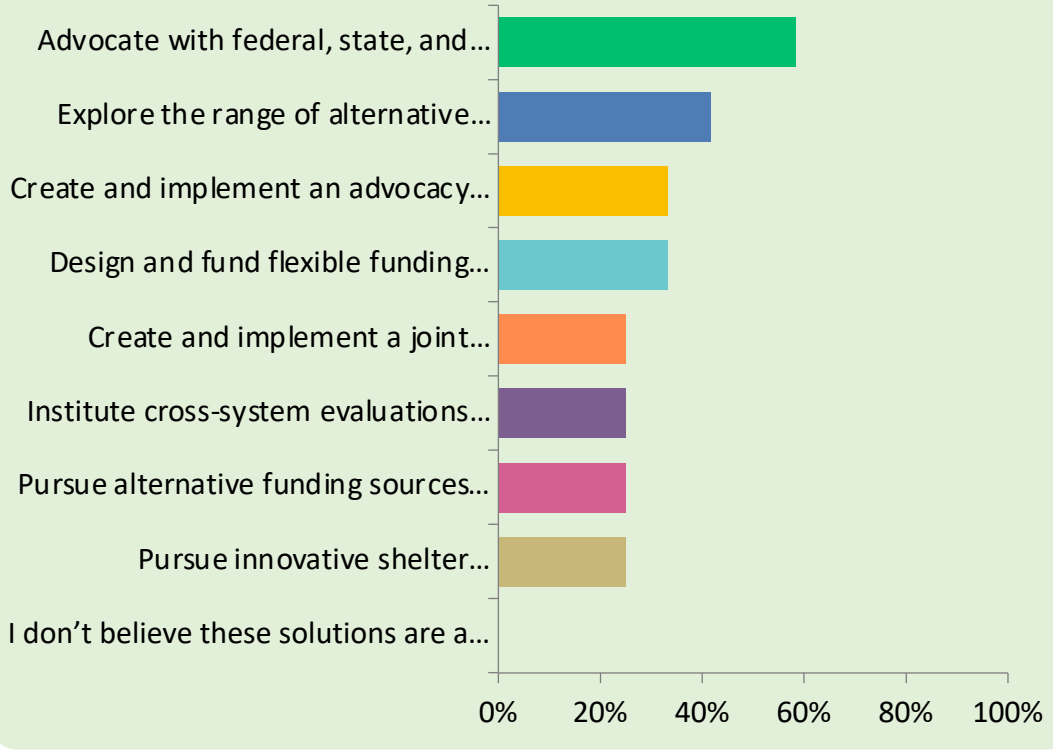
Answered: 48 Skipped: 17



Q15: **Innovations that affect and cut across** all or most aspects of reimagining and improving the quality and availability of shelter. Please select up to three activities that you would prioritize to improve the homelessness system.

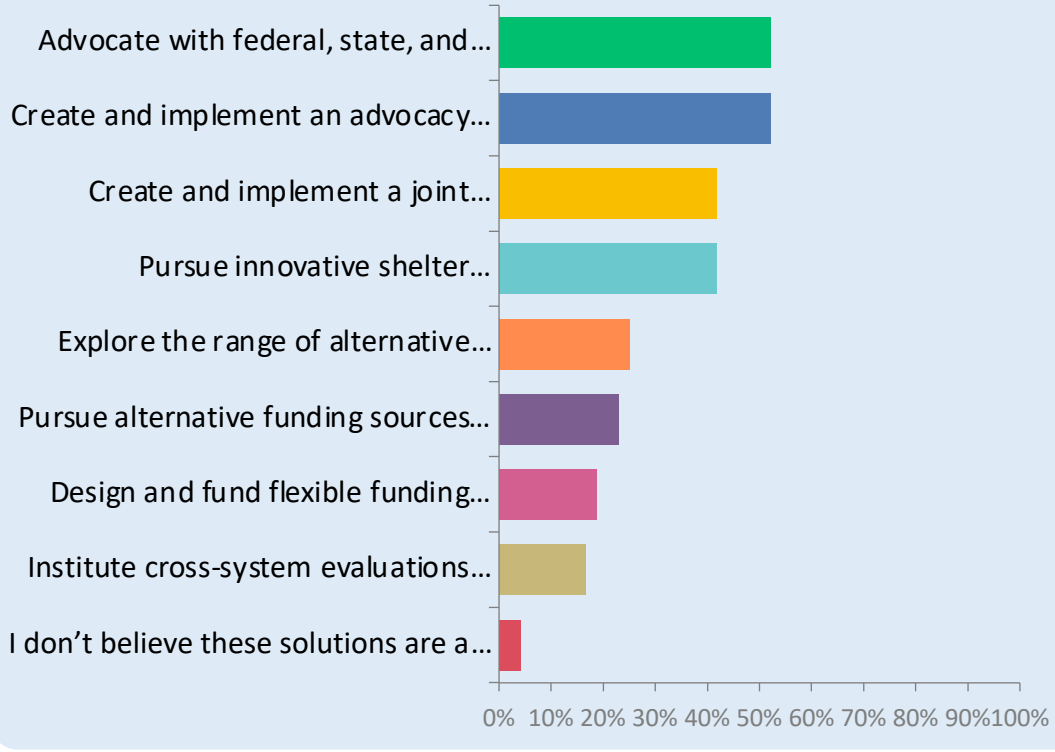
Respondents: People with Lived Experience of Homelessness

Answered: 12 Skipped: 5



Respondents: Other

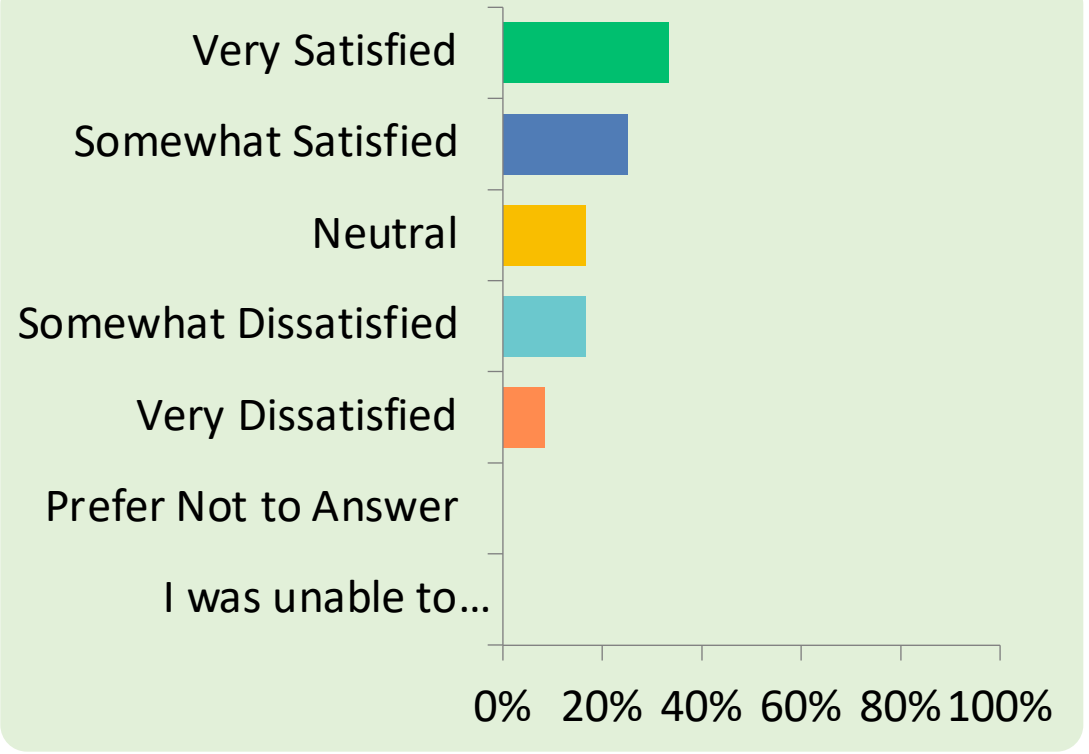
Answered: 48 Skipped: 17



Q26: How would you rate your participation in the Community Planning Sessions held during November?

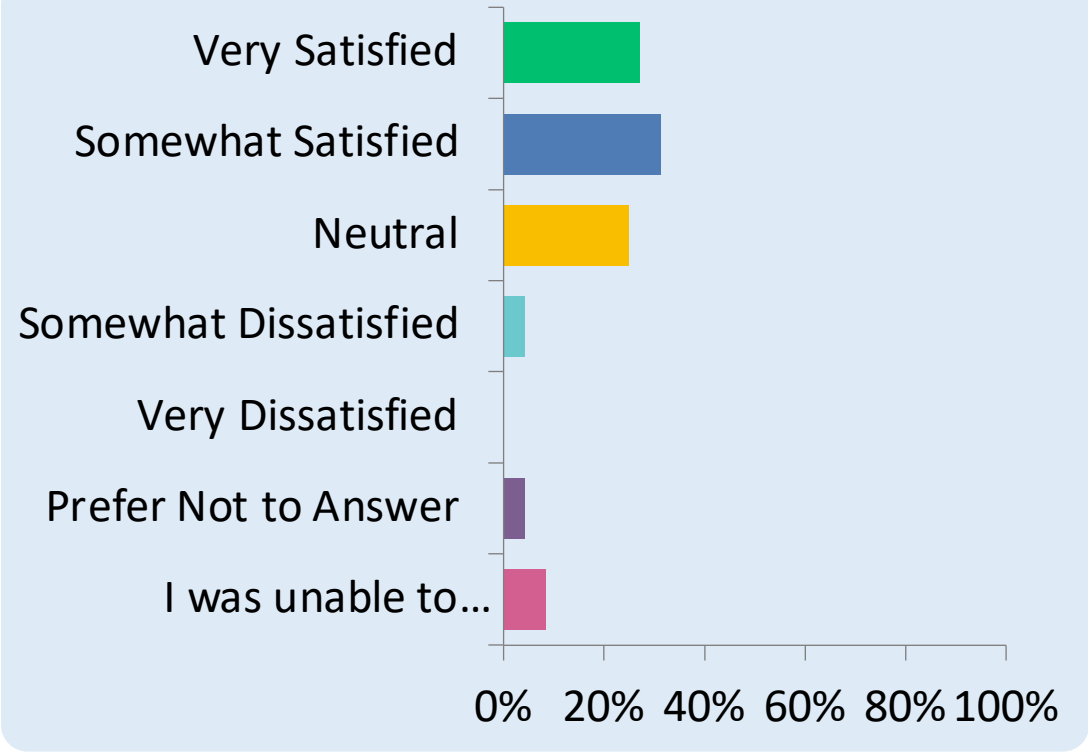
Respondents: People with Lived Experience of Homelessness

Answered: 12 Skipped: 5



Respondents: Other

Answered: 48 Skipped: 17



Top Priorities (most votes)

Respondents: People with Lived Experience of Homelessness

- ✓ 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.
- ✓ 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.

Top Priorities (most votes)

Respondents: Other People	
✓ Create new shelters/interim housing to meet community needs in part by evaluating how vacant spaces and neighborhoods can be used to develop these facilities.	**39**
✓ 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.	**36**
✓ 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.	**36**
✓ Ensure basic needs can be met at all shelters, warming centers, and overflow spaces, including appropriate heating/cooling/ventilation, security features like lockers for belongings, laundry needs, and food preparation amenities. Family serving programs should have childcare. Reduce use of chairs, mats, and bunk beds so people with disabilities and seniors can be better served. Shift to 24/7 facilities to support greater dignity and security.	**34**
✓ 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.	**33**

We look forward to conversation on Wednesday!

See also the open-ended comments

Reimagining Shelter
Prioritization Poll

Section 1: About Your Participation

Question 1 **Reimagining Shelter** Community Planning Sessions. Please select each session that you attended:

- Clients' Basic Needs, Experiences, and Rights on 11/14
- Services and Staffing on 11/15
- Facilities and Environments on 11/16
- Integrating Programs within the Homelessness Response System on 11/16
- I was unable to attend any of the sessions.

Section 2: Your Recommendations

Question 2 **Improvements: Clients' Basic Needs, Experiences, and Rights.** Please select one or two responses.

- **Broaden the continuum of services** provided by homelessness response system to include services to people who are not eligible for or accessing shelter, prevention and aftercare as well as strengthening cross-system partnerships to promote holistic supports for clients. This would include those who are unsheltered as well as those who are couch-surfing, living in abandoned buildings, etc.
- **Deepen trauma informed care practices** across all shelters at the systems level. Provide supports to ensure common understanding, sufficient training, and monitor implementation. Provide support to shelter staff who have experienced trauma (current or past) and how to navigate second-hand trauma.
- **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.
- **Monitor and enforce that all shelters provide basic rights protections for clients.** Including not separating families; not requiring religious or spiritual participation to receive shelter, food, or other basic needs; safe and accessible storage of client belongings; and being open 24/7 to residents.
- **Standardize procedures that impact access.** For example, exclusion and exit procedures, CAM procedures that prioritize people who can call back later in the day to receive shelter.
- **Strengthen client and provider understanding of how the entire system works.** Create a handout and/or class that show clients how to access all parts of homelessness response system. Provide public information about what services are provided at each shelter. Implement training for residents in shelters, including "Know Your Rights" training, training on how to navigate the homelessness and housing systems, etc.
- **Strengthen efforts to identify/work with privately funded programs** who offer emergency/short term aid and pair with navigation to provide support until we have space in a shelter.
- **Update the grievance processes at each shelter and system wide, including CAM system,** to protect shelter residents' ability to grieve without fear of retaliation and to ensure a meaningful and fair investigation into grievances. Simply the process and incorporate a 3rd party investigator. Consider using online process. Incorporate new HAND client support liaison into the process. Explore how peer ambassadors or other outside support could be used to help

clients file grievances and participate in the process. Publish the results of grievances with organization names (protect shelter resident confidentiality).

- **I don't believe these solutions are a priority for the Plan.**

Question 3 **Innovation: Clients' Basic Needs, Experiences, and Rights.** Please select one or two responses.

- **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.
- **Create and fund innovative diversion programs** like host homes for youth and other more robust diversion options.
- **Develop a shelter voucher program** where clients can be temporarily sheltered in scattered locations with funding to cover housing costs and navigation/case management (especially for families).
- **Develop and provide a systematic screener** that shelters can use with shelter residents to identify unmet social needs and adjust services accordingly.
- **Establish a Shelter Medical Corps**, drawn from area health systems, that has physicians, physician assistants, nurses, and navigators, etc., who go directly to shelters and provide trauma-informed care and practice harm reduction principles. They would coordinate on-site care with directions for shelter staff and connect clients with an off-site clinic when necessary.
- **Explore establishing a "Right to Shelter"** and ways that these communities are creatively filling the gaps for shelter capacity to honor the right to shelter.
- **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.
- **I don't believe these solutions are a priority for the Plan.**

Question 4 **Comments**

Question 5 **Improvements: Staffing and Services.** Please select one or two responses.

- **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.
- **Ensure shelters are connecting to and providing key resources to households in several areas**, including employment, legal services, education, childcare, transportation, healthcare, public benefits, etc.
- **Ensure shelters are providing holistic services** to clients that address their mental/emotional needs and identities, including mental health counseling, art programs, grief counseling, yoga and meditation, child-friendly amenities, gardening, supports specific to domestic violence and sexual assault survivors, etc. Strengthen aftercare supports.
- **Foster intentional pathways to hire people with lived experience** into system and programmatic positions.
- **Improve and standardize the way client needs and progress** is documented in homelessness data systems, including reasons related to service termination.
- **Incorporate more mobile models** for shelter service and resource delivery to help those who do not want to be in shelter.
- **Increase funding for shelters to hire more case managers.** Set a standard for client to case management ratios and for minimum client engagement across all shelters.

- **Provide clinical supervisory support to all shelter staff** for their professional development and resources for their mental health and well-being.
- **Streamline access to recovery supports and harm reduction services**.
- **I don't believe these solutions are a priority for the Plan.**

Question 6 **Innovations: Staffing and Services.** Please select one or two responses.

- **Create a leadership cohort** that helps guide the CoC and City in researching additional funding streams and lobbies/organizes for that funding so that the Detroit CoC has more funding to support services. Ensure that any new funding comes with communicated standards of care and the consequences of failing to provide that level of care.
- **Create a peer-to-peer visiting program for homelessness system providers** so that they can learn from other shelter programs, both locally and elsewhere in the country, that are using best practices or innovative strategies.
- **Create a systems-level process for hiring shelter staff** that can be leveraged to fill capacity gaps at various shelters. Prioritize shelter clients and persons with lived experience for these positions.
- **Create and fund a crisis intervention team** that can support shelters when behavioral health and other crises arise.
- **Create and fund flexible funding programs (e.g., direct cash assistance)** so that households can use these funds to meet their needs however they choose.
- **Create and fund match funding programs** to help clients who are working and trying to move into housing.
- **Deepen client support in shelters** – particularly targeted support for special populations such as families, LGBTQ+, persons fleeing DV/HT, youth, chronically homeless, people who are actively using, people struggling with mental health, folks who are undocumented, etc. Expand the types of services that are provided onsite or through connections to community resource, e.g., legal services, transportation, workforce development, choice of mental health services, DV/HT/SV, senior sports, disability/SOAR, etc. Ensure child and youth services for families (e.g., field trips, art programs, opportunities for joy, game room, homework room, head start programs, case management for children, educational support services, parenting classes, "early on "services, youth support, and quiet spaces)
- **Standardize trainings for shelter staff** at the systems level to be more interactive and ensure capacity, consistency of training, and staff participation. Topics should cover sensitivity for specific populations, educational rights for parent, customer service, de-escalation, Housing First, case management, housing navigation, and other best practices. Improve and expand culturally specific training opportunities for staff system-wide on a variety of topics, including mental health, Housing First, dialectical behavior training, engagement and sensitivity training with diverse populations, equity and implicit/unconscious bias, domestic violence/human trafficking, and how to use HMIS and document.
- **I don't believe these solutions are a priority for the Plan.**

Question 7 **Comments**

Question 8 **Improvements: Facilities and Environments.** Please select one or two responses.

- **Advance ideas to make shelters, warming centers, and overflow spaces, more welcoming and less institutional**. These could be generated by people with lived experience.
- **De-congregate shelter spaces** and offer more private rooms, as much as possible.
- **Design and fund improvements** that provide recreational opportunities and other activities to provide stress relief.
- **Ensure basic needs can be met** at all shelters, warming centers, and overflow spaces, including appropriate heating/cooling/ventilation, security features like lockers for belongings, laundry needs, and food preparation amenities. Family serving programs should have childcare. Reduce use of chairs, mats, and bunk beds so people with disabilities and seniors can be better served. Shift to 24/7 facilities to support greater dignity and security.

- **Ensure shelters, overflow spaces, and warming centers are designed to meet the needs of all populations**, including children, seniors, residents with disabilities, bilingual speakers, and LGBTQ individuals. Ensure all facilities offer all gender bathrooms and shower options.
- **Ensure shelters, warming centers, and overflow spaces are designed in ways that support residents' emotional well-being, healing, and sense of home**. Increase private spaces for shelter residents.
- **Ensure shelter residents can stay connected to their pets**.
- **Implement better standards for cleaning, maintenance, and health/safety** and deploying more regular inspections by funders to ensure these standards are being met.
- **Improve spaces to support partnerships** between community resource providers and shelters.
- **Incorporate residents residing in shelters as partners** in shelter design and operations.
- **I don't believe these solutions are a priority for the Plan.**

Question 9 **Innovations: Facilities and Environments.** Please select one or two responses.

- **Create new shelters/interim housing** to meet community needs in part by evaluating how vacant spaces and neighborhoods can be used to develop these facilities.
- **Develop a fully accessible shelter facility** that is designed around the needs of residents with disabilities.
- **Explore creating shelters for specialized populations**, e.g., chronic, people who are medically fragile or required some type of rehabilitative support.
- **Find ways to bring new organizations and providers** into the business of opening and operating shelters in Detroit.
- **Provide an emergency fund** that shelters can access for unexpected maintenance or facility issues.
- **Providing funding for all shelters to use trauma-informed design to improve facilities.** Ensure more private spaces for case managers to meet with clients.
- **I don't believe these solutions are a priority for the Plan.**

Question 10 **Comments**

Question 11 **Improvements: Integrating Programs within the Homelessness Response System.** Please select one or two responses.

- **Advocate for alignment of priorities, reporting expectations, and timelines across different shelter funders** to minimize administrative strain on providers and allow them to prioritize their time to serve clients.
- **Employ a progressive engagement model across the system** that conducts multiple diversion opportunities throughout a household's shelter experience.
- **Improve system transparency and increase awareness of system processes** already occurring, knowledge about CAM and how to get access to the system, and opportunities for PWLEH to be a part of systems work and provide feedback.
- **Increase reserved board seats** on CoC and agencies' boards for people with lived experience.
- **Promote greater coordination across shelter providers** by holding regular (e.g., bi-weekly) check ins /meetings with all shelter leaders, creating shared contacts among shelter leadership, and developing a standard process for contacting shelter leadership in real time (during the day and after hours) when there is a need to coordinate overflow, transferring to another shelter, etc. Develop ways to actively work together in real time to solve unique client situations.
- **Set core priorities and establish formal agreement of all shelters** to those priorities. Use the priorities to develop standardized accountability expectations. Some of the priorities may include person centered, trauma informed, intersectional services, treating persons with dignity and respect, and inclusive practices for LGBTQ+, etc.
- **I don't believe these solutions are a priority for the Plan.**

Question 12 **Innovations: Integrating Programs within the Homelessness Response System.** Please select one or two responses.

- **Develop a resource 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.
- **Develop process for transportation** between shelters if a client arrives at shelter after hours and there isn't availability.
- **Pursue system-level fiduciary and administrative supports for smaller providers** who want to serve clients in the homelessness response system but don't have the administrative capacity or capital to operate on reimbursement basis.
- **Create a shared dashboard for system integration** in connecting/referring clients in the homeless response system (especially shelters) to various programs in the city (education, employment, SSI, legal, etc.).
- **I don't believe these solutions are a priority for the Plan.**

Question 13 **Comments**

Question 14 **Improvements that affect and cut across all or most aspects** of reimagining and improving the quality and availability of shelter. Please select one or two responses.

- **Establish a provider-funder planning table** to develop standards for shelter and how programs and funders will be accountable for meeting those standards. Ensure there is mutual accountability.
- **Improve engagement and decision-making by people with lived experience of homelessness** to inform program design, funding decision, program monitoring, etc. to improve the overall rehousing system and the programs within the system. Provide training and orientation to equip people to be effective in these roles.
- **Increase awareness of what is currently provided by the system,** including tools, process, and reports about programs and services. Also publicize that shelters are available 24/7 for walk-ins. Publicize shelter and CAM phone numbers more broadly. Publicize funding awards and what is being supported by that funding.
- **Publish a shelter report card** based on feedback from shelter residents and accountability measures tracked by funders. Implement a community-wide and publicly accessible survey where those who experience shelters can submit feedback.
- **I don't believe these solutions are a priority for the Plan**.

Question 15 **Innovations that affect and cut across all or most aspects** of reimagining and improving the quality and availability of shelter. Please select one or two responses.

- **Advocate with federal, state, and local leaders to require that other systems be mandated to collaborate with homelessness response system**. Would increase coordination, expand resources and services, and help prevent homelessness.
- **Create and implement a joint fundraising effort to increase private and philanthropic funding** for programs and the system. This could include pursuing donations from businesses to support multiple organizations in the homelessness response system rather than fundraising occurring solely at the agency level.
- **Create and implement an advocacy strategy** to engage with city, state and federal representatives around tenant rights, increased funding, and other related topics. Advocate for more funding for the homelessness response system. Standardize CoC Advocacy efforts by creating an advocacy committee or platform in which there is stronger organization and coordination and consistent messaging.
- **Design and fund flexible funding and program options** to enable shelters to provide services more creatively and flexibly.
- **Explore the range of alternative shelter models** to better understand the types of models being used in other communities. Develop a plan to test the most promising models for Detroit.
- **Institute cross-system evaluations with key partners**. An example from Philadelphia: childcare providers evaluated family shelters and then family shelters evaluated childcare providers. Grant funding then helped fund improvements.
- **Pursue alternative funding sources** at the systems level for shelters to leverage to increase pay for staff and increased shelter standards. This could include public sources like Medicaid.

- **Pursue innovative shelter evaluation and accountability mechanisms** including pathways for public inspection and undercover auditing/pop up inspections. Publish findings and require changes as needed. Conduct onsite reviews. Provide additional funding for high performing programs by transferring funding from poorly performing programs.
- **I don't believe these solutions are a priority for the Plan.**

Question 16 **What would success look like or how should we measure success?** [short answer]

Question 17 **What community partners should lead this work?** [short answer]

Question 18 **What community partners and resources should also be engaged?** [short answer]

Question 19 **Anything else you would like to share with the Planning Team?** [short answer]

Section 3: About You

We are committed to providing a chance for all community members to participate in the Strategic System Improvement Plan. We would like to understand something about the community members who participated in this survey so the Planning Team would appreciate your answers to these additional questions. All responses will be confidential and only aggregated data and anonymous comments will be shared.

Question 20 **In what ways do you participate in the homelessness response system?** [select all that apply]

- Person with lived experience of homelessness within Detroit
- Service providers
- Shelter providers
- Housing providers
- Community leaders
- HAND and HRD staff
- CoC member
- Advocate
- Other
- Prefer not to answer

Question 21 **What is your age?** [categories]

Question 22 **What is your gender identity?**

- Female
- Male
- Trans Female
- Trans Male
- Non-Binary or Gender Non-confirming (I.e., not exclusively male or female)
- Prefer not to answer

Question 23 **Which of the following best represents how you think about yourself?**

- Straight (or heterosexual)
- Gay/Lesbian
- Bisexual
- Asexual
- Pansexual
- Questioning/Unsure
- Other
- Prefer not to answer

Question 24 **What is your racial Identity?** (you may select more than one).

- White
- Black or African American
- Asian
- American Indian or Alaskan native
- Native Hawaiian or other Pacific Islander
- Hispanic/Latino
- Other
- Don't know
- Prefer not to answer

Question 25 **Are you a person living with a disability?**

- Yes
- No
- Prefer not to answer

Question 26 **How would you rate your participation in the Community Planning Sessions held during November?**

- Very Satisfied
- Somewhat Satisfied
- Neutral
- Somewhat Dissatisfied
- Very Dissatisfied
- Prefer Not to Answer
- I was unable to participate

Question 27 **Anything else you would like to share about you and your experience participating in the virtual community planning sessions?** [short answer]

Reimagining Shelter/Interim Housing Prioritization Survey Open-Ended Responses

People with Lived Experience

Comments

- 100% agree we should look into vacant spaces and neighborhoods for additional shelter options
- Call center
- I welcome the new opportunity for new facilities. However, the money that will be spent to invest in those could be used to improve the facilities and services that are already being provided. Updating buildings, furnishings, and expanding programs that will help improve the wellbeing of those being served .... like life skills, mental health access and care management, parenting, education, how to be a contributing citizen in your community.
- Know each person who need basic education
- Monthly inspection
- More homeless prevention is also needed
- Need more DV training & shelters
- need more shelters overall and more dv shelters
- Nothing except to say that you guys did a great job.
- Staffing one on one with each person concerned goals and solutions
- Stronger client privacy among shelter staff and other clients.
- We the CoC should not be limiting our chances of helping as many people as possible as quickly as we can by only choosing 2 or 3 of these ideas. Most of the ideas & innovations shown are deeply needed, and, all of the ideas shown need to be implemented as soon as possible. We are just putting a Band-Aid on the problems if we don't fix everything that needs the attention in order to lessen homelessness and returning to homelessness with in 2yrs of getting people/families into housing. To only choose 3 of these needed improvements and innovations is preposterous. Most of these ideas need to be addressed and adopted!
- Where outside agencies and churches are allowed to supply personal care items to shelter guests. Diapers, sanitary items, and especially clothing.

What would success look like or how should we measure success?

- Based on the number of individuals who receive assistance compared to the number of individuals who were turned away
- If we don't have people die from the elements or overdose before we can get them shelter
- Shorter length of time in shelters, more access to HCV, connections to other supports, and more shelter spaces that are more inclusive of people with disabilities, orientations, and genders, elderly, etc.

- Success should be measured by how the individual progressively move throughout the aftercare process. Aftercare should be instated for a period to see what barriers occur that could cause chronic homelessness.
- Survey tracking system
- When evaluating shelters and other services or organizations in the homelessness system, there would be improvements in indicators, including those created by and for people with lived and professional experience.
- While the overall problem of homelessness is extremely complicated with many variables and intricate facets. The measure of success is rather simple. It is creating an all-inclusive system that lessens the wait time for all programs/services and sees the homeless individuals/families permanently housed and not returning to homelessness in the future. But this notion that homelessness will ever end at any time, let alone in five years, is ridiculous. There will always be house fires, flooding, domestic violence, abuse, landlords that lose a property that is being rented for many various reasons regarding people unexpectedly unhoused, people with addictive personalities that lead to drug use or gambling problems, mental health problems, excess financial burden on those with extremely low income rendering them unable to save for unexpected future financial burden etc. Accepting this fact and working diligently to lessen these program and service times, cut out unnecessary requirements, lighten the mental strain of of the homeless going through the process, and just get people into housing quickly with services to help them keep that housing and maintain and/or regain their dignity and self-respect should be the foremost focus of any homeless rehousing system.
- With childcare support, parents must be accountable. May not place in childcare just to get away from their children. They must have documentation for childcare.

What community partners should lead this work?

- All those in the community that are involved in moving housing to the next level.
- COC
- Detroit Health Department, Local Shelters, City of Detroit, Detroit Fire and Police Department, Local non-profits who work with homeless, Lead Team, individual with lived experiences
- HAND, shelter providers, and housing providers who directly interact with the homelessness system or populations, especially those that serve "special" or marginalized populations, such as LGBTQ+, DV/IPV survivors, people with disabilities, veterans, women, and families, etc.
- I believe the partners that should lead this work are already in place. System improvements need to be implemented to allow for better communication between these partners.
- I'm not sure yet
- People with lived experiences, harm reduction workers, individuals, possibly people from out of state that have experiences and ideas for implementing recourses related to homelessness example like Colorado they ranked the top state a few years back for housing assistance.
- The CoC

What community partners and resources should also be engaged?

- Anyone with money

- Churches, social justice organizations, and community persons.
- Community school
- Detroit Health Department, Local Shelters, City of Detroit, Detroit Fire and Police Department, Local non-profits who work with homeless, Lead Team
- HMIS, specifically increasing staff training and competency, creating more streamlined or accessible processes in the management system, creating, and implementing Detroit CoC-specific and population-specific measures in the management system to track progress, etc.
- Other national and international partners with more financial resources could be engaged on a case by case basis such as the National Multiple Sclerosis Society that has programs to pay deposits, first month rent, medical supplies, and will pay for and make a home accessible & safe for people with MS (I mention because I have MS and am homeless). As well The International Jewish Fund to list a couple of the many other organizations that could be tapped to ease the financial burden on our local organizations
- Possibly looking into owners of these vacant buildings to donate for shelters. Mental health workers to help with the mental health crisis going on while engaging with people.
- The church community

Other People

Comments

- A resource committee that would work on behalf of the entire homeless system would be awesome, not just for shelter.
- Accountability for currently funded shelters is only possible by incentivizing the opening of new shelters to compete for funding. We need to EXPAND shelter given that currently there are not enough shelter beds for the number of individuals seeking shelter, while simultaneously shelter beds are being turned over due to poor conditions and individuals choosing to stay on the street rather than staying in unsafe, unclean shelters. These conditions will not improve because the system will continue to fund these failing programs in order to utilize grant dollars. Conditions will only improve when there is more competition for those dollars, and currently there are few incentives to open new shelters.
- DEI Training may be helpful for providers and leadership
- Develop partnerships with various community orgs to ensure folks are able to obtain food, clothing, school supplies, coats, gas/bus tickets, childcare
- Emphasize need for funds to hire more case managers to prevent burnout
- Every organization/ city of Detroit/ should know what's going on. Communication 24 hours a day, reporting system.
- Hold shelters to basic standards of habitability; increasing shelter beds HAS to happen. Overcrowding happens because staff doesn't want anyone to freeze to death- its an impossible situation- we can’t do anything until we get more shelter
- I believe all of these improvements and ideas are important and it was hard to select just 3. I think most of the improvements in shelter space needs to happen in the single male shelters. There currently isn't a non-congregate single male shelter and most of the buildings are very old and run down.
- I ran out of "priorities" but am a big fan of doing something similar t the report cards model

- I support Clients' Rights. Respect all residents unhoused.
- I think you have to look at safety and violence in shelters in a broader spectrum. Safety has to include staff and residents. Most of the situations that occur are between residents.
- Instead of the housing first model we should implement a person-centered planning model that allows client to set goals for themselves and how they want to end their homelessness. Success looks different for everyone.
- Just ensuring that all service providers, funders, and resource providers have the same understanding and definition of youth basic needs and rights
- More funding needs to go towards staff support, wages, and training. Period. Millions of dollars going toward another strategic plan is not the way to make change. Supporting and compensating the people currently doing the work is. Too much many gets corrupted at the top and this is why we have a multi million-dollar homelessness support network with less than 800 available shelter beds.
- Much of the phrasing around creating a culture shift within the shelter system does not mention working with shelters, but rather monitoring and enforcing efforts to center and enhance client rights, dignity, autonomy, and safety-- as we should. The emphasis on protecting and enhancing the client experience should remain the top priority. Additionally, I would recommend a more collaborative approach with shelter leadership and staff to preserve and strengthen the working relationship with these entities, prevent burnout, and identify the internal barriers within shelter admin and structure to meeting community standards. In order for this work to be successful and sustainable, we must reinforce the values of inclusion and community on all levels and in all efforts.
- Pay increase & training had to be essential
- RESPECT!!!
- Shelters for residents who are disabled seniors with walkers. Elders unhoused individual cannot get up in a bulk bed!!!!
- Shelters will not improve unless we can change the culture in our current shelters. There is still a mindset in shelters of folks not being the "deserving poor" if they are not working, have substance use, or mental health. And it is hard to get new shelters online because there is not enough government funding available to cover the costs of just operations. The City will have daily conversations with shelters about treatment of clients and we often see little changes in the culture of the agency as a whole.
- The CoC and the City need to consider joining together to seek additional funding for all Homeless Services.
- The session was very helpful and is we do them again we should encourage more people experiencing homelessness in these discussions.
- There needs to be a system put in place for Consumers before they are housed to ensure that they are ready to be housed so that they do not repeat the cycle of homelessness.
- Under "improvements" I believe that the "providing holistic services" option encompasses the one before it "connecting to and providing key resources".
- We appreciate Barb Poppe and Associates/ Team members. We must elect the right people who will understand our agenda. To assist the unhoused HRD, the mayor does not prioritize. This lack of suitable shelters and affordable housing for 30% or lower. ! Help the lower-income residents

NOW!!!!! Detroit could be a model city for decreasing unhoused residents. I have no faith in this administration or staff. THEY DO NOT CARE or HEAR US!!!

- Without additional funds, the systems cannot grow.
- Would like to explore how funders can require shelters hire the appropriate staff when making grants. This would be easy with additional $$$, but how can we do it with the limited resources currently available?
- Would love to see standardization across shelters. The services you get at one shelter are almost never the same as the services you get at the next shelter.

What would success look like or how should we measure success?

- 80 percent or more of the homeless population seeking shelter obtain emergency housing. Households spend limited time; 180 days or less in emergency housing before moving to permanent housing.
- A smoother, kinder, more accessible, understood, holistic and dignified experience with homelessness for those who face it with coordination amongst many community partners.
- A system that benefits each other.
- Clients know where to go when they are experiencing homelessness. We are able to prevent persons from needing shelter through other resources (this may manifest with our shelter numbers going down). When shelter is the only option, persons feel supported, safe, respected, and empowered in shelter. Stays in shelter are short. Programming is adaptive and responsive to the expressed needs of clients. Clients express that they feel the system is working and meeting their needs.
- Documented outcomes and multiple scales of measuring
- Evaluate shelter related grievances, increase random inspections, conduct focus groups with current shelter residents to see how strategies are working.
- Every family or individual that comes into shelter will have an opportunity for housing.
- Homeless episodes must be rare and brief.
- If a person becomes homeless tonight, they should be able to access some type of shelter for safety right away without going through multiple phone calls and or being transported from place to place.
- Minimizing the amount of tie in shelter. Clients receiving a person centered, whole person approach.
- More PWLE involved in the work
- No unhoused residents in Detroit! We need to vote in administration and HRD who really care for unhoused disabled residents!!! Enough money and training to deceased unhoused by the year 2025.
- Reduction in exposure related deaths -Less turnover of shelter beds because individuals have a better experience in shelter than being on the street -Everyone who seeks shelter can find a bed for the night - NO MORE OVERFLOW -More accurate reporting
- Residents have access to safe, trauma-informed shelter when they need it. Residents themselves evaluate and tell us the quality of the services being provided, and whether those services fit their needs, and we fund accordingly.

- Shelters would be a place for the people living there (including children) to heal. Where they can feel safe, respected, and seen, and where they feel that they have control and agency in their lives.
- Success can be seen in the safety and how secure clients feel in the shelter.
- Success looks like more programs and organizations working with the homelessness response system receive the funding and awareness they need to start making a positive impact and change for the youth in the community.
- Success should be measured by client outcomes. Who is getting housed, where are they being housed, what assistances/services contributed and what didn't work.
- Success will look like an agreement on how to move forward and buy-in for the plan. This could mean having agreement across as many shelters, housing partners, and community partners as possible. Success will also look like tangible changes to the shelters where there is a noticeable improvement in quality of services and the number of beds/resources available.
- Success would include people being able to access shelter when they need it, short stays in shelter, leaving shelter to a stable/permanent housing placement, and a decrease in substantiated shelter grievances. This can be measured through existing data collection systems.
- Success would look like shelter's being held responsible for the conditions of their facilities, so many reports of inhumane conditions.
- That everyone that is homeless has access to services and clean temporary shelter until they are permanently housed.
- The accomplishments
- The system flowing well. by using client feedback.
- We should measure success by how many individuals successfully become self-sufficient with the development of long-term life skills.
- When every resident who wants to be sheltered is sheltered; and all residents in shelter feel supported, safe, and respected.

What community partners should lead this work?

- Cam Hud advisor board
- City of Detroit, MDHHS (including Salvation Army), CoC, HAND, Advisors Group
- City of Detroit; Detroit CoC, private industry leaders
- CoC Executive Board and experienced Detroit residents must lead this work!
- CoC lead agency.
- Continuum of Care partners along with the City of Detroit
- dv providers, homeless, shared vision with Hand
- Existing shelters/homelessness service providers, and the City of Detroit.
- Funders (City, HAND) in combination with CoC partners interested and committed to the work.
- Hand, CAM and the City of Detroit.
- HAND/CAM, city, all shelter programs, PWLE

- I think community organizations like the Detroit phoenix center that are youth centered or youth led and funding providers like HAND that work closely with programs like DPC. Community partners like these two will ensure that proper funding is being distributed evenly to all the necessary resources needed to spread awareness and give support.
- It depends on what priorities are decided on.
- It should be led by all service providers.
- MSHDA, the Detroit Housing commission and other housing voucher providers in the metro Detroit area,
- People with lived experience, CoC Lead (HAND), Shelter Funders (MDHHS and CoD), and CoC Board
- PWLE, as well as highly trained trauma informed staff.
- Shelter funders (City, State of Michigan), CoC Lead Agency, shelter providers, PWLEH
- Social service agencies, health-care systems, legal systems, housing specialists, finance specialists, and faith leaders.
- The City of Detroit, MDHHS, MSHDA
- The ones that have the staffing or ability to increase staffing.
- The partners who are funding the shelters
- The Shelter Providers. They are the ones that know what is working and what is not working and what their individual needs are to make things work.
- Those that center experience of homelessness to see what systemic changes can be made
- We should all lead this work.
- YHDP, Committee of Youth Homelessness, YAB, Detroit Advisors, CoC

What community partners and resources should also be engaged?

- City of Detroit has to commit general fund dollars
- COC and City of Detroit
- DWIHN
- Education. Transportation. Landlords. Court system.
- Entire system. All stakeholders.
- Food banks, diversion programs.
- food networks, SUD providers, DWIHN
- Foundations and universities should assist with research and funding
- funders, community leaders, and community partners.
- Health related resources i.e., Counselors. Childcare/education resources.
- Landlords, housing agencies and other programs that offer housing for populations that require standard living assistance such as AFC homes.
- Legal services, long-term housing providers, DV/SA/HT agencies.

- Local Universities and Hospitals
- Not sure
- Partners who are outside of the shelter system who can provide insight on the needs of specific groups (people with disabilities, DV survivors, children, LGTBQ+ individuals, veterans. They can provide a different lens to look through that is not limited by what is already accepted as the norm.
- Perhaps person with lived experience.
- Resources- Detroit City Council should approve the line item budget 2024-25 to be increased by 50%. Community partners- experienced individuals must lead to success.
- Same answer for question 17
- Shelter Providers, Cross System Partners, Politicians, Private Funders, Local Grassroots Orgs, the General Community, Consultants from other Communities, CoC General Membership.
- State (ESP, MSHDA), mental health services in particular (DWIHN)
- Their should be scheduled inspections on these shelters
- Those with enough housing and staff to help
- We should all be engaged
- Youth community advocates