Reimagining Shelter: Integrating Access Meeting Summary

Reimagining Shelter: Integrating Access Solutions Jam Session

Definitions

- **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.)

The following strategies and priorities to improve the Detroit shelter system were developed by Detroit community members present during the session:

#	Description of solution	Improvement or Innovation?	Impact of solution
	How do we create a system of providers versus just a collection of providers?		
1	We need to have bi-weekly check ins /meetings with all of the shelter leaders. This could lead to more real time attendance, open communications regarding troubled clients moving around, how we can further assist veterans (male and female)		
2	•Standardize programming in a way that providers and the unhoused know they will receive the same services in varying facilities •Increased coopetition		
3	• Have a way to be able to contact shelter managers/directors in real time (during the day and after hours) when we need to coordinate		

	overflow, potential exclusions, etc.		
4	Those who are employed by the shelter system should be allowed to work at each other's shelters. Can we have some employee exchange program? Would create more continuity in the system.		
5	If we could incorporate daily number of beds available in a dashboard instead of sending clients to a place to find out they are full, that would be a good improvement		
6	Have all partners agree to person centered, trauma informed, intersectional services

This would show up in how coordinated entry and referrals take place. We need all community partners to agree to warm hand offs and making sure we aren't sending someone across town for a service that we know is at capacity at this time. | | |
| 7 | Transparency across shelters with space available, and ability to move clients to shelters with provisions better suited to the unique needs of the household even after entering a shelter (if the household is interested and eligible) | | |

8	Make sure we aren't harming and retraumatizing folks when they interact with systems. If one partner is not welcoming to all identities and is not treating people with respect that creates distrust in the entire system		
9	Centralized training program for all interim housing workers prior to their start date		
10	Can we agree to a base level of dignity? Intentional acknowledgement of all identities, mental health, substance use, documentation/immigrant status. If we can agree to a baseline level of respect and dignity, that would go a long way		
11	A resource committee to check and make sure that resources are continually viable and also allocating new resources to integrate into the system as they come online.		
12	There are often times when households or individuals become homeless after hours and the CAM is not available to assist. Yes, these clients possibly can approach a shelter for a one night stay, but how do they get to the shelter after hours, how do they connect with the systems? So, do we have any connections to the Public Safety Systems in the		

	community that could assist with transportation to shelter or temporary access to a space just to get folks off the streets? Particularly for DV/HT victims.		
13	I think learning more about each shelter is important. but before that shared case conferences would be great for everyone to hear how each shelter process information. With our program servicing 4 populations including minors we have stipulations and staffing criteria to follow.		
14	There is a daily count of beds reported to the CAM. We need to increase awareness of some of the system processes already happening. You are supposed to be allowed entry at night at every shelter. We have to make sure people are compliant with these expectations.		
15	An oversight field task force to physically go into shelters and programs that receive grant funding through the CoC to make sure of current and continuous compliance instead of relying on just reading data points and paperwork turned in.		
16	Progressive engagement across the system as it relates to diversion opportunities at any point in a household's		

	shelter experience. The dashboard suggestion would help here to have access to a list of available resources that may have alternative options for diversion or support for a household to end their homelessness outside of CoC housing resources or MSHDA vouchers, etc.		
17	We need to make sure that even though there are different funding structures, confidentiality agreements, etc., the housing system is still creating partnerships with culturally specific orgs, DV/SA/human trafficking providers, because they are often filling in the gaps in the system		
18	Lot of clients do not have awareness about CAM. The shelters do not tell a number at times to reach the CAM		
19	That concept (being allowed in at night) is in place and has not changed, but the challenge is how does the community know that they can actually go to a shelter and then be assessed the next day? How do we get the word out about these expectations?		
20	There should be signage clearly visible on the front of each shelter with CAM information and phone number, as well as billboards		

	in various areas to create awareness		
21	As a system, we are still struggling to find the resources to truly enact some of these processes as well. Walk-ins become long-term stays and we are struggling to provide them resources.		
22	I've come across many clients who have no idea what CAM is or why they need to call or why they ask the questions they do. Most don't even know they are being assessed and provided a VI-SPDAT score and it does affect how they are provided housing resources.		There should be hotel/motel vouchers available for individuals and families when there is no shelter space available.
How do we promote shared accountability?			
23	We need intentional plan that shows gaps in funding. Plan of what we want in shelters. We need a conversation of priorities. We need to integrate non-funded shelters in the system, like people who do grassroots work		
24	Ongoing training and engagement of frontline staff and supervision to ensure ongoing understanding of the processes and standards.		
25	I think there needs to be a portal created about human service providers to be reported for harmed behavior not just social workers. That way when staff is reported it is on their		

	professional record and there is a sense of consequence.		
26	Making the dash board idea in such a way as to allow the data to be changed in real time along with integrating contact information with a dedicated individual or team at each program so that programs can contact each other; creating a system that allows each program to actively work together in real time to solve unique client situations in a more timely manner		
27	We need more money, more space, more training. More training on mental health. Disciplinary actions are needed, shelter staff are put in danger all the time.		
28	We keep talking about accountability of the shelters, but we also need to discuss accountability of the funders. Shelters are often over capacity and do not have the space or funding to take on a certain level of overflow (i.e. food, staffing as it pertains to safety, additional utilities, etc.). Shelters are left to figure it out way too often.		
29	We need other resources with funding to support and fund our system. Hospitals for example see many of our clients because they come there for service or to be warm; then hospitals try to		

	get them to shelter. How do we connect with hospitals or other resources that see our same clients and who can provide greater supports with the same mission or purpose to serve. You only get so much funding through the state, City. You continuously write grants and every grant you write, you have more accountability standards. More quarterly reports, more annual reports, which requires more staffing. There needs to be more accountability from state/city. The state/city should think: this is what the need is and we have to fulfill these needs. Turnover in shelters is prevalent because of burnout.		
30	Lots of our clients suffer from schizophrenia and other mental disorders who don't take meds regularly. We definitely need more security and trained mental health staff on site		
31	Possibly increasing capacity by way of providing additional funding for high performing agencies (by transferring funding from poorly performing shelters)		
32	Combined advocacy from the CoC and the City for this community with our politicians to understand that		

	their is a need for additional funds.		
33	We used to get per diem funding where we would get funding for each individual each night and we no longer get that. We get a flat rate for our contracted capacity		
34	NPM management training and more admin funds is super important. Less restrictions on funding would be amazing so we can use the dollars as we need them, not as proscribed. Food dollars are important as well as flexible funds.		
35	A committee that helps organizations create new funding strategies like organizations starting for-profit businesses that dedicate a portion of their profits to the organizations. Making sure such businesses donate to more than one organization to avoid certain tax situations.		
36	We are getting less funding per client than we did before		
	How do we incorporate PWLEH?		
37	We have a gap in our human services. Every human services provider says I don't have enough employees. Why don't we better conduct outreach to PWLEH and connect them to jobs? We talk about gift cards and low value mindset.		

38	Go to the shelter and talk to them		
39	To the previous point: Consider innovation- scattered site shelter voucher options when funding is available (or make funding available for this purpose)		
40	I've seen clients actively volunteering their time to help clean the shelters and help in the kitchen. Rarely if ever do they get hired on.		
41	Another associate of mine had the idea of the creation of subcommittees that anyone including those with lived experience can join and make recommendations to boards so that we can keep new young minds with innovative ideas engaged and allow them to be and stay involved		
42	Community listening sessions for only PWLEH to make it more accessible and less intimidating		
43	Include more people, more board members with lived experience. More opportunities because some of these reviews you have to be on the board. It should be more inclusive.		
44	Would like us to be more involved with the City, state, county.		
45	Removing the advanced degree requirements and elevate the lived experience		

46	Re-structuring City, State, etc (funder) positions to allow more time and responsibilities to be more involved in boots-on-the-ground work and involvement with providers, clients, communities. Too many administrative tasks for a position that needs more involvement considering the work we are doing		
47	Improvement can be made by going to the institutions to see that the application information can be corroborated		
48	Understanding these are important job roles to understand internal processes, but job responsibilities could be revised		
49	A couple of things that we have done on the YHDP side and recently integrated into the CoC Competition is to have extra trainings around the funding process, how to complete a review, etc. And then hold office hours for folks to come and ask questions and get support as they complete their independent review. Both of those practices have seemed extremely helpful and could be useful as we expand to including PWLEH into other funding processes.		
50	System monitoring happens twice a year on the state		

	level. Could you do pop up monitoring and scheduled monitoring? How does this information get reported out from monitoring?		
51	I would like more equal partnerships between the internal city partners		
52	How do we address retaliatory behavior between providers and funders?		
53	Our reporting, evaluation, and requirement and timelines need to be more aligned.		
54	I don't think this belongs here, but I missed a few sessions. I would like to bring in more providers- especially for shelters. However, because it is federal funding (that comes with lengthy and strict regulations) and funding is provided on reimbursement only, it is difficult for smaller non-profits to manage the grants. I would like to look at ways to make grants work for a broader range of non-profits. Like maybe have larger non-profits partner with smaller ones that don't have the admin capacity to oversee all the regulations.		
55	Better marketing in areas where people are experiencing homelessness that are about the opportunities to provide feedback. (Public comment,		

	listening sessions, paid consultation)		
56	Provide scholarships or direct aid assistance for education and certification to people experiencing homelessness that work in the Homeless Services.		
57	Transparency around how funding is used?		
58	Funds that are raised in Detroit that are not for a non profit provider must give 10% to Emergency Housing.		
59	How can we make sure that donations are actually connected to clients? Clients need basic resources		
60	Provide homeownership opportunities to people that are experiencing homelessness with down payment assistance up to 15,000 if you work in this industry.		
	An overall theme from these meetings seems to be there needs to be more awareness of the system overall, both internally and externally. It sounds like everyone is in the same room feeling their way through the dark.		
Is there an appetite to fully reimagine sheltering people? If not, why not?			
61	Learned about this shelter in Miami the other day in the low-barrier training. If we could have every shelter operate in this way and with the services such as this		

	place I would love it https://www.camillus.org/		
62	Change the whole process for Shelters and SROs and barrack style		
63	The South Bend Center for the Homeless in South Bend Indiana has a locally broadcast tell-a-thon every year collaborating with the city, local television broadcasters, and celebrities to increase funding. An event like this could be set up to divide the funds among all programs signed up. This might work well in Detroit with its treasure chest of great celebrities in and/or from the Detroit area		
64	There are not enough shelters for the population in need.		
65	There is not enough training to shift bias. Orgs get infused by staff bias. We get shelters with the same beliefs as systems. Staff provide services based on their own individual opinions. Looking at the way there is training and purposeful way to look at intrinsic biases and understanding how those biases affect the quality of services.		
66	I think there is work needed to cultivate a true culture shift for many organizations. Shifts in expectations and design will only go so far if we		

	don't address the underlying biases.		
67	Is there an emergency fund or some on call services for shelter? For example emergency maintenance, emergency cots that facilities can use in the event a facility has to shut down for a night or two? Or even just transportation for clients between facilities?		
68	More Equity and Bias training for the entire system, not just frontline staff. The administration needs this to so they can make informed and judgment-free decisions in our system.		
69	I think there is a big desire to diversify how we provide shelter in Detroit. There are so many intersecting factors happening with the population we serve so trying to develop a housing perspective that includes disproportionality of HIV status, children in systems, domestic violence, etc. This needs to be incorporated into how we deliver housing.		
70	If we transform, what happens in the interim? If we don't have funding for hotels right now, how can we do something different?		
71	Bills become extremely exorbitant when you are taking care of lots of people. Can we have central		

	facilities? Like four or five and nonprofits get funded to run those facilities? They would be responsible for programming but City/State fund the overhead/facility. Different ownership structures.		
72	I think there is definitely appetite among the community at large and those being served by the system. I don't know if there's as much appetite among the providers. But I don't say that as a critique. I think many of our providers are overwhelmed and so it can be hard to look towards transformation when you're struggling to keep your head above water as things currently are. To get to that collective appetite, I feel like we have to figure out a way to release the pressure valve on the providers first so that they have capacity to lean in to innovation and consider new ways of doing things and pursue that innovation.		
73	I would like to see more accountability on the system level, the executive management level. If you are a system partner, you need to have some experience of the city.		
74	Uplift the perspective that having large communal living facilities replicates		

	housing projects and the challenges we have with housing projects. There is a risk of using a one size fits all mentality. Does not account for seniors, women who may be DV survivors. It becomes a replication of the problems of the City.		
75	In the business community, you have start up incubators. Prop management companies pay for overhead and business pays rent to be in the incubator. You could do similar model for homeless shelters. You could separate areas of a facility by client need. You can have public ownership and then providers can test out ways of caring for folks.		
76	The court system is one of the biggest problems with the homeless system. Landlords have unsafe properties, run to court to put people out. Ensuring the right to sever contract with landlords who do not do repairs but protecting clients at the same time. You also need a management company that Is not profit-driven and respects client dignity and rights		
77	Utilize the SROs and churches for emergency assistance		
	Are there different models of sheltering residents the community should try?		

79	Can we figure out a way to provide emergency housing assistance to clients in programs (treatment centers?) whose time is ending in these programs		
80	I get concerned about people living in their car. Can we have areas where people can be in their cars overnight? Apartment living, having homes or apartments that people are renting out. Having smaller venues would be helpful for families. There was a program for folks who would rent out a room to youth aging out of foster care.		
81	Model for shelter of overcrowding is because of the court system and landlord /management engagement		
82	One thing that I think could be helpful is to have a session where we get overviews of some of the alternative models that other communities are doing and discuss what we think may best translate to our own community. I think this brainstorming is helpful, but a targeted session to make sure we all understand some of the various innovation options and discuss their feasibility in Detroit.		
83	Follow up care and prevention care		

84	Making sure we think about culture, even at the neighborhood level		
85	Clients struggle to get connected to resources, even after they are housed. Shelters being community hubs but also allowing people in the community to have access to those resources, even if they are not needing shelter. This could be a form of prevention.		
86	Finding a way to integrate aftercare for all of our formerly homeless clients. Can we have agencies or an agency dedicated to aftercare?		
87	Shelter staff should have access to more and better wellbeing resources. Maybe free access to meditation apps, lower cost of gym or yoga studio memberships. Access to student loan forgiveness programs if your shelter is not a non-profit. A rotating 4-day workweek that still pays what a 5-day workweek does. When you're not cared for it is harder to provide care for other people.		
88	Yes. I would like to see more Transitional Housing come back. Since the 90 days shelter stay went away, we have so many issues and this has brought about many		

	components that need to be reevaluated. Participants should stay for 90 days and then transition to TH and during the TH program they can wait on their voucher and do parenting classes, life skills and substance abuse, therapy and any other resource that can assist with the participant preparing them for Permanent Housing. Also the per diem should come back for the purpose of funding. I think the funders and HUD should compare now to back when that process was in place. It was actually giving the participant time to work on themselves as an individual.		