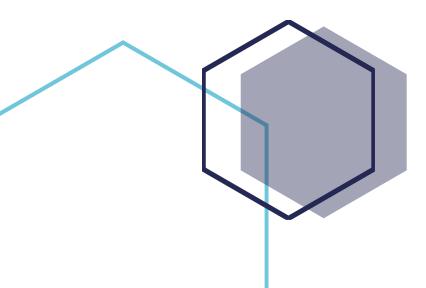
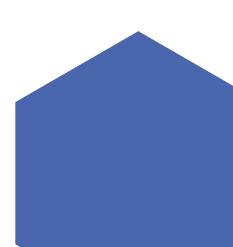
Community Collaboration to Confront Homelessness

Augustana Research Institute August 2019

A report on the development of the Sioux Falls and Minnehaha County Homeless Advisory Board with recommendations for building community collaboration to confront homelessness





This report presents the results of a study commissioned Minnehaha County and the City of Sioux Falls and conducted by the Augustana Research Institute (ARI). The study's objective is to provide information necessary to define the mission and vision of the Homeless Advisory Board (HAB) and to identify key research questions and ongoing needs for data tracking and analysis. The study identifies and recommends community-level metrics to measure progress in addressing homelessness and identifies and recommends an organizational structure and function for the future of the HAB.

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This project was commissioned by Minnehaha County and the City of Sioux Falls.

Executive Summary

In January 2019, Minnehaha County and the City of Sioux Falls commissioned the Augustana Research Institute (ARI) to undertake a study of the Homeless Advisory Board. The study's objective was to provide information necessary to define the mission and vision of the HAB and to identify key research questions and ongoing needs for data tracking and analysis. To do so, the study aimed to identify and recommend an organizational structure and function for the future of the HAB in order to best confront homelessness in Sioux Falls and Minnehaha County. The study also intended to identify and recommend community-level metrics to measure outcomes and progress toward alleviating homelessness.

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For the study's primary objective, ARI interviewed HAB members and community stakeholders about their perceptions of the HAB's current role and organizational efficacy and their visions for change to the HABs mission or form. ARI also collected information about HAB-like organizations in a set of comparison communities. Through review of documentation and interviews, ARI developed profiles of collaborative organizations in six comparison communities, focusing on their missions and objectives, organizational structure, membership, funding, authority, and policies and procedures.

Additionally, ARI reviewed community-level metrics and benchmarks adopted in comparison communities, recommended by national organizations and government, and required by major grant programs. Where existing data are available, this report presents selected community-level metrics, benchmarks, and comparisons to other communities.

This study was approved by the Augustana University Institutional Review Board (IRB #SP19.10).

Summary of Findings

The Homeless Advisory Board (HAB) was established on August 15, 2005, with a joint agreement of support signed between the City of Sioux Falls and Minnehaha County on March 21, 2006. A full-time coordinator, whose position was jointly funded by city and county, was hired in 2007.

Local creation of the HAB was part of a national trend launched under the Bush Administration. Sioux Falls, like communities across the country, developed a 10-year plan to end homelessness; the HAB was intended to oversee implementation of that plan. However, after 10 years, the HAB (like other similar organizations nationwide) had not ended homelessness. As the HAB attempted to pivot beyond its initial charter, it lost momentum.

HAB members attribute the board's stall to the lack of a shared vision and actionable strategic plan, meetings that had settled into a routine of overwhelming data presentation without strategic sifting or leadership to act based on data, lack of leadership from within the HAB, and lack of support from powerful champions in the community. The HAB's influence and public visibility declined.

People in the Sioux Falls area continue to experience homelessness. In 2018, the point-in-time count in Sioux Falls the number of people experiencing homelessness who were identified was 219 per 100,000 people in the general population. This rate is higher than nearly all Rural and Suburban Continuums of Care (CoC), higher than 75% of Other Urban CoCs, and higher than the median rate among Major Cities CoCs. Sioux Falls ranks near the middle in the number of veterans and chronically homeless identified by the point-in-time count. In 2016-17, the ratio of homeless students to enrolled students in the Sioux Falls School District was higher than the rate in more than 50% of LEAs nationally.

Compared to other communities, people experiencing homelessness in Sioux Falls are more likely to be sheltered than unsheltered. This finding is consistent with findings about the capacity of Sioux Falls to house people experiencing homelessness. Relative to other communities, Sioux Falls has a higher proportion of emergency or temporary shelter beds available than permanent housing options.

Consultation with six comparison communities reveals common factors for successful collaboration to confront homelessness. Among those common factors are focusing on systems thinking, equipping lead entities with necessary resources, convening a broad and inclusive membership, developing short and actionable strategic plans, using focal projects to spur action, clearly defining roles and responsibilities within collaborative groups, using large groups for high-level planning and delegating detailed tasks to workgroups, prioritizing local data collection and reporting, involving funders in collaboration, planning for communication and community education, and investing in relationships and trust.

Recommendations

Based on these findings, this report makes the following recommendations:

- 1. Identify and activate local champion(s).
- 2. Undertake strategic planning to establish a shared vision and set priorities for the next one to three years.
- 3. Create a structure that supports the type of work the community wants accomplished.
 - a. Invest in capacity building by designating a point person to coordinate collaborative work and building relationships.
 - b. Locate the coordinator within an organization with sufficient bandwidth.
 - c. Broaden board membership.
 - d. Define member expectations and distribute responsibilities: charge the board with high-level planning and accountability and delegate details to workgroups.
- 4. Extend collaboration and coordination beyond the board.
 - a. Integrate with other collaborative organizations as possible.
 - b. Connect to mainstream housing and community development activities as possible.
- 5. Prioritize local data collection and reporting.
- 6. Communicate strategies and raise public awareness.
 - a. Communicate the strategic plan and progress toward goals to the public.
 - b. Communicate priorities to funders and philanthropists.
- 7. Explore available opportunities for technical assistance.

Organization of the Report

The body of this report is divided into four sections. The first section provides background on the Homeless Advisory Board. It begins with a history of the HAB, then presents findings from ARI's interviews with community stakeholders about the HAB's efficacy and role in the community.

The second section presents data regarding homelessness in the Sioux Falls area, in comparison communities, and in the United States as a whole. It begins with a description of the types and sources of data available, then presents comparative estimates for Sioux Falls and other communities of the number of people experiencing homelessness, the number and types of beds available in programs that serve people experiencing homelessness, and the allocation of federal funding streams. This section also presents a summary of available economic and housing trends in the Sioux Falls area that could be collected as leading indicators of homelessness. This section concludes with recommendations for future data collection and outcomes measurement.

The third section describes how collaboration around addressing homelessness is managed in six comparison communities. This section distills lessons from the experiences of those communities about organizational structures that lend themselves toward effective collaboration.

The fourth and final section of this report makes recommendations for the future of the HAB.

Contents

Executive Summary	2
Summary of Findings	2
Recommendations	3
Organization of the Report	4
Background: The Homeless Advisory Board's Origins and Development	9
Data Collection and Analysis	9
The Homeless Advisory Board's Origin	9
The Intended Purpose of the HAB	10
Momentum Stalls	12
Strategic Plan	12
Leadership Vacuum	15
Power and Authority	16
Collaboration and Public Awareness	17
Board Management	
Conclusion	19
Data: Comparisons, Benchmarks, and Trends	20
Data Collection and Analysis	20
Population Experiencing Homelessness	21
Total Number of People Experiencing Homelessness	24
Number of People Experiencing Homelessness Who Are Sheltered	
Number of People Experiencing Homelessness Who Are Unsheltered	27
Number of Veterans Experiencing Homelessness	
Number of People Experiencing Chronic Homelessness	30
Children and Youth Experiencing Homelessness	31
City-based Estimates of the Number of People Experiencing Homelessness	32
Community Capacity to Address Homelessness	33
Distribution of Bed Types	34
Federal Awards by Purpose and Activity	37
Local Trends in Homelessness and Leading Economic and Housing Indicators	

. . .

Discussion: How Sioux Falls Compares44	4
Leading Indicators	4
Unemployment Rate	6
Fair Market Rent	7
Housing (Homeowner) Affordability Index 48	8
Cost-Burdened Households	9
Evictions	0
Foreclosures	1
Requests for Assistance	2
Benchmarks and Performance Metrics for Ending Homelessness	2
Comparison Communities	4
Data Collection and Analysis	4
Community Profiles	5
Summary of Findings: Designing Successful Collaborative Organizations	6
1. Work to foster systems thinking, identify a shared vision, and communicate with a unified voice	
2. Effective lead entities have local champions and resources	7
3. Membership should be broad and diverse	8
4. Strategic plans should be short and sweet	9
5. Use focal projects to spur action	0
6. Clearly define roles and responsibilities	0
7. Delegate to workgroups	1
8. Prioritize local data collection, management, and reporting	2
9. Money talks, so involve funders in the collaboration	2
10. Plan for communication and community education.	4
11. Invest in relationships and trust	4
Recommendations	
Recommendation 1: Identify and activate local champion(s)	5
Recommendation 2: Undertake strategic planning to establish a shared vision and set priorities for the next one to three years	
Recommendation 3: Create a structure that supports the type of work the community wants accomplished	

3A: Invest in capacity building by designating a point person to coordinate collaborative work and building relationships
3B: Locate the coordinator within an organization with sufficient bandwidth
3C: Broaden board membership66
3D: Define member expectations and distribute responsibilities: charge the board with high-level planning and accountability and delegate details to workgroups
Recommendation 4: Extend collaboration and coordination beyond the board
4A: Integrate with other collaborative organizations as possible
4B: Connect to mainstream housing and community development activities as possible. 69
Recommendation 5: Prioritize local data collection and reporting
Recommendation 6: Communicate strategies and raise public awareness
6A: Communicate the strategic plan and progress toward goals to the public70
6B: Communicate priorities to funders and philanthropists
Recommendation 7: Explore available opportunities for technical assistance71
References
Appendix
List of Comparison Community Interviewees and Organizational Affiliations74
Detailed Community Descriptions75
Institute for Community Alliances75
Boise, ID75
Fort Collins, CO
Madison, WI
Omaha, NE
Des Moines, IA
Cedar Rapids, IA92
Rapid Results Institute95
Interview Protocol
Supplementary Documents

•••

List of Tables

Table 1. Median number of people experiencing homelessness per 100,000 general pa	pulation
by CoC type and subpopulation	
Table 2. Median number of people experiencing homelessness per 100,000 general pa	pulation
by subpopulation for Sioux Falls and selected comparison communities	23
Table 3. Bed type availability by CoC type (2018)	
Table 4. Bed type availability for Sioux Falls area housing programs (2019)	
Table 5. CoC grant awards by purpose for comparison communities and Sioux Falls	
Table 6. HUD awards for comparison communities and Sioux Falls (2018)	
Table 7. Leading economic and housing indicators	45
Table 8. Comparison communities by organizational structure	54

List of Figures

Figure 1. Total PIT count per 100,000 general population by CoC type (2018)	24
Figure 2. Sheltered PIT count per 100,000 general population by CoC type (2018)	26
Figure 3. Unsheltered PIT count per 100,000 general population by CoC type (2018)	27
Figure 4. Veterans PIT count per 100,000 general population by CoC type (2018)	29
Figure 5. Chronically Homeless PIT count per 100,000 general population by CoC type (2018)	30
Figure 6. Homeless students per 10,000 enrolled students by LEA (2016-17)	32
Figure 7. Housing type as % of total housing inventory count per CoC (2018)	35
Figure 8. Permanent and temporary housing as % of total housing inventory count per CoC	
(2018)	37
Figure 9. Total PIT Count for Minnehaha County, 2005 - 2019	40
Figure 10. Sheltered PIT Count for Minnehaha County, 2016 - 2019	41
Figure 11. Youth, veterans, and chronic PIT count for Minnehaha County, 2016 - 2019	42
Figure 12. Homeless students identified by the Sioux Falls School District, 2004/05 - 2017/18	43
Figure 13. Monthly unemployment rate for the Sioux Falls MSA, 1/2009 - 6/2019	46
Figure 14. Fair market rent for the Sioux Falls MSA, 2007 - 2019	47
Figure 15. Monthly housing affordability index for the Sioux Falls area, 7/2018 - 7/2019	48
Figure 16. Cost-burdened households by tenure in the city of Sioux Falls, 2005 - 2017	49
Figure 17. New forcible entry and detainer (eviction) cases for Minnehaha and Lincoln	
Counties, 2010 - 2017	50
Figure 18. Monthly foreclosures in Minnehaha County, 7/2018 - 6/2019	51

Background: The Homeless Advisory Board's Origins and Development

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This section presents an overview of the Homeless Advisory Board's (HAB) history, from its founding to present circumstances. The history presented here is based on a review of documents related to the HAB's founding, documents produced by the HAB, and interviews with current and former members of the HAB as well as representatives from other organizations working on homelessness in the community.

Data Collection and Analysis

ARI conducted semi-structured interviews with 13 community stakeholders, primarily current and former members of the Homeless Advisory Board as well as representatives from homelessness-focused organizations and local government. Interviews were conducted during April and May 2019. To help ensure complete and open responses, interviews were conducted individually and identities have been kept confidential. Most interviews lasted between 30 and 90 minutes. A copy of the interview protocol used for this study is available in the appendix. Interviews were recorded and transcribed, then thematically coded for qualitative analysis. ARI also reviewed historical documents related to the HAB's founding and work.

The Homeless Advisory Board's Origin

In March 2004, Sioux Falls Mayor Dave Munson appointed a Blue-Ribbon Task Force to develop a plan to end homelessness in the Sioux Falls area. The task force outlined a 10-year plan to end homelessness. Among the task force's recommendations was a proposal to create a Homeless Advisory Board (HAB), which would be charged with carrying out the 10-year plan to end homelessness (Blue Ribbon Task Force 2005, p. 6). From that recommendation, the HAB was established on August 15, 2005, by city ordinance #86-05. On March 21, 2006, the City of Sioux Falls and Minnehaha County committed to a joint cooperative agreement to be involved with the HAB. In 2007, a full-time coordinator position was created and jointly funded by the City of Sioux Falls and Minnehaha County.

These local efforts were part of a national trend. In 2001, under President George W. Bush, the federal Department of Housing and Urban Development (HUD) had launched an initiative to end chronic homelessness. In 2003, the U.S. Interagency Council on Homelessness (USICH) challenged cities to embark on 10-year plans to end homelessness.

Sioux Falls was one of hundreds of communities that answered the call. Local conversations began in early 2003. Four community-wide meetings were held between February 27 and June 26, 2003, to discuss ending homelessness. Presentations were made by more than 24 service providers. Out of these presentations and subcommittee work emerged a focus on "chronically addicted homeless."

In November 2003, the Corporation for Supportive Housing (CSH) gave a presentation at a Supportive Housing Conference in Sioux Falls. In that presentation, which was called "Blueprint Planning to End Homelessness Changing Systems," CSH recommended aspiring towards systems change by ensuring the following factors were in place:

- power (people with formal authority and responsibility for activities) and funding are available,
- collaboration is a habit,
- data and communication are available and used effectively,
- champions and leaders exist,
- there is collaborative planning, integration, coordination, and streamlined funding,
- there is quality assurance and monitoring following industry standards, and
- an intermediary is designated to act as a neutral catalyst.

In that presentation, CSH also suggested that, in order to be effective, the neutral catalyst (i.e., what would become the HAB) should

- be independent of old systems (new or outside forces with no long-standing alliances to existing factions),
- have a clear point of view and a map forward,
- and be able to draw from experience.

The Intended Purpose of the HAB

The HAB's initial charter was shaped by USICH's call for 10-year plans, CSH's recommendations for fostering community collaboration, and the local Blue-Ribbon Task Force report on local conditions around homelessness. The HAB's charges were myriad. According to the Blue-Ribbon Task Force's 2005 10-year plan, the HAB was intended to do the following:

- Carry out the 10-year plan to end homelessness.
- Assist governments and service providers in addressing (a) housing and (b) services.
- Hold open meetings that include participation by people experiencing homelessness, governments, churches, service providers, and interested citizens.
- Facilitate and encourage common protocols and procedures among service providers (e.g., common intake, shared reporting).

- Recommend programmatic and operational changes to maximize efficiency among service providers.
- Lead immediate and long-term planning regarding homelessness.
- Compile an annual list of community-level goals and objectives.
- Measure and monitor data on outcomes of service providers.
- Issue an annual report to inventory available resources, document progress toward goals, and include (at least) the following data elements:
 - Change in number of unsheltered homeless;
 - Number of chronically homeless moved to permanent housing;
 - Change in costs to provide emergency health, mental health, and shelter services;
 - Change in length of time homeless, hospitalized, or incarcerated; and
 - Rates of recidivism in homeless assistance system.
- Establish annual priorities for city, county, state, federal, and private funding; recommend and guide funding; and have such influence that funders solicit the consensus, endorsement, and approval of the HAB. The 10-year plan envisioned HAB's influence extending to a range of public funding sources, including
 - City public health funds and additional discretionary funds;
 - Community Development Block Grant (CDBG) funds and HOME Investment Partnership Program (HOME) funds;
 - HUD Continuum of Care (CoC) grants;
 - County poor relief;
 - State first time home buyers and mortgage assistance programs; and
 - Federal housing vouchers and Community Reinvestment Act (CRA) credits.

Despite this hefty load of responsibilities, the HAB--as originally envisioned by the Blue-Ribbon Task Force--was not to have its own funds or direct oversight or regulatory control. Instead, it was to operate in an advisory capacity and make recommendations. The task force also suggested that the HAB would require only very light administrative duties to be covered by existing staff at the City of Sioux Falls. It would not, the proposal claimed, require a new hire (Blue Ribbon Task Force 2005, p. 8). HAB members remember the HAB as first focused especially on super utilizers with a high risk for recidivism into the system of homeless services, jail, and detox. With that focus, HAB helped pull together collaborators for Safe Home, a housing first initiative designed for that target population. Board members judged Safe Home a success, both in terms of its intended purpose and as a focus for collaboration.

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Momentum Stalls

But in the following years, board members reflected, little additional progress was made. In interviews, current and former HAB members described structural programs that eventually stalled the momentum that had launched the HAB. As they saw it, the HAB lost focus. Members had no agreed upon role and no shared vision, and a leadership vacuum emerged. The board became a passive recipient of information rather than an active leader in setting strategic priorities around homelessness.

Strategic Plan

Board members described the HAB as directionless, lacking clearly defined and accessible priorities, goals, or objectives. Meetings came to consist primarily of reports from the coordinator to board members, and members took on a passive listening role. The combination of receiving an overwhelming amount of information with the lack of clear priorities for action or a well-defined way for board members to push projects forward left many feeling like the HAB lacked a purpose. As one board member put it:

I'm not really sure what that mission or vision looks like. I think years ago when the 10year plan was created there was more of a direction and there was a mission, there was a vision, and there were different things that were happening that the board was either involved in or else they were encouraging or that they were seeking out. Over the last maybe four years I think it's become a little more stagnant. I think the board members themselves, including myself, are a little confused about what is our actual mission, what are our goals, what is our role within the community, and trying to better define that and also questioning do we have a role in the community or are we duplicating some other services? Because that's not necessary either.

Several board members corroborated the timeframe, saying this state developed over the last four or five years, after the first 10-year plan had expired. Under the first 10-year plan, they reported, the HAB had a few major wins, including work on Safe Home (a housing first initiative) and Bishop Dudley Hospitality House (a shelter for individuals and families). Even without any formal legal authority or funding, the board was able to broker partnerships to accomplish goals laid out in the first 10-year plan.

But problems became apparent as the HAB tried to pivot beyond the first 10-year plan--which, though it led to certain accomplishments, had not ended homelessness. The board lacked leadership capacity to move forward. The HAB coordinator position itself was not vested with

12

decision-making power, and leadership did not emerge among members or outside community leaders to prioritize the HAB's work.

Further, the new 10-year plan was adopted without first establishing community buy-in. Board members reported that the first 10-year plan (the Blueprint) was put together by "a lot of very key lead people, powerful people," so it had a lot of buy-in--both in process and in the people who were involved. The second 10-year plan lacked that buy-in. According to board members, the board came together for a brainstorming session, but the strategic plan was largely put together by the HAB coordinator. That may have contributed to a lack of investment in the plan.

Additionally, the new 10-year plan set goals that seemed beyond the scope of what the HAB could accomplish. The first 10-year plan had a clear focus and goal: house super utilizers of homeless and emergency services (which led to Safe Home). The next 10-year plan was broader; goals seemed unachievable and the purpose of the HAB--as compared to other organizations--seemed undefined. Without that focus, confusion arose among board members over what niche the HAB should serve as opposed to the Homeless Coalition, Thrive, or other collaborative organizations in the community. One board member summed it up:

It [the new plan] was way too broad an approach. If you target one or two things like, well, Safe Home, like they did [in the first 10-year plan], that's something people can get behind.

Some board members were discouraged by the loftiness of the new 10-year plan's goals. The ultimate goal--"ending homelessness"--seemed unrealistic, and even intermediary goals seemed beyond what HAB could hope to achieve. The new plan lacked tangible, short-term goals that could inspire action. As one board member put it:

I don't know that we're going to end homelessness to be real truthful. I think we can have a significant impact on homelessness, and I would hope that [the] time [that] families or individuals...spend homeless, we could have significant impact on that.

Some of the goals in the new plan were things that the HAB and its members had no power over. Some were ostensibly outsourced to other organizations in the community (e.g., the Thrive Housing Action Team), but without setting up organizational infrastructure to tie those to the HAB's 10-year plan (e.g., MOUs, regular reports from organizations, or shared board membership). Other goals, board members reported, were simply unrealistic--as, for example, a goal to build 1,600 housing units. One board member reflected:

[The goals] weren't reachable. The organization didn't have the horsepower to do it. It had to be done by local real estate and developers, nonprofit and for-profit real estate developers, and funded by the state housing authority, and it took expertise that the Homeless Advisory Board didn't have.

Ultimately, board members agreed, the HAB's primary purpose over the past few years had become compiling data about homelessness. But data was not collected or reported in a strategic way. Board members described "drinking from a firehose" and being overwhelmed by the quantity of data. Without a strategic vision and tangible goals driving data collection, HAB members were unable to sift through all of the information they received. One board member, recalling the copious amounts of data presented, recalled:

How many beds were available at all the different shelters, what the occupancy percentages was, how many beds were open--all of those things. But there never seemed to be that, what are you going to do with it? Like, what do we need to do with those numbers? How do we make this number less, how do we make this number bigger? There was never a plan, or a strategy.

Board members generally agreed that collecting data is important, and that with the HAB on hiatus pending this report, the one thing they had missed was having that data available. However, they also agreed that if the only real purpose of the HAB was to collect and distribute information, it need not be a board. It could as easily be an email list, website, or other mechanism for posting and sharing information without the time commitment of a monthly meeting. As one board member put it:

You can give me information, but what do I do with that information? There really wasn't any leadership about what to do with that information. It was all about gathering information, but then nothing about what to do with that information.... I can just read this, you could just send me an email, and I don't need to go to a meeting.

Board members believed the HAB had become directionless, but they also recognized its unrealized potential to direct action to address homelessness. Board members generally agreed that addressing homelessness is important for the community and that collaboration for maximizing the impact of available resources is important, but they questioned whether the HAB in its current manifestation could accomplish those objectives. Several board members suggested a better use of the HAB would be reviewing information in order to offer strategic feedback about new programs or initiatives, new objectives. That is, the HAB had unrealized potential in pulling people together to identify a shared vision, set goals and objectives, and then work to achieve them. As one board member envisioned it:

If there was going to be a continuation of the board, I would see that there would be, maybe, an advisory board that could dissect information and look at the community stats and be able to offer directives or feedback--Gosh, have we tried...? Have we looked at what we considered...? Here may be options.--and do a collective approach such as that.

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Leadership Vacuum

Not only did the HAB lack a strategic plan; it also lacked the leadership to have carried it out. HAB members painted a picture of a rudderless ship without a captain: the HAB lacked a strategic plan with meaningful objectives, and it lacked the leadership capacity to carry out such a plan. Rather than seeing themselves as advocates or leaders, HAB members saw their role as receptive listeners. Meetings were frequent, but board members were unsure of their roles or responsibilities, beyond listening to presentations. They did not know what action to take based on the reports they head. Some said they felt more like a sounding board than a decision-making board:

At the end of the day I just thought we were there as a sounding board and to share information. We didn't really do anything.

Asked about the future of the HAB and what would be lost if the HAB folded, most board members said the biggest loss would be collection and distribution of information about community needs. They thought other organizations could probably fill the gap of collecting that information, agreeing it was a critical activity to continue. But the gap of *acting* on that information would remain whether the HAB folded or continued down its current path. As one board member put it:

I could never figure out what we were doing. I mean, information came in, which was helpful, but now that I'm not getting that information, I can see that was a bit of a void.... But there was no idea what you're supposed to do with that information and no discussion of how to move the needle on the problem.

Some board members perceived lack of leadership within the HAB itself. One board member reflected that, in the past, the HAB had a very passionate board chair who took on the role of local champion, but when that person left, no new champion emerged. Another board member acknowledged that the HAB's influence waxed and waned depending on whether sitting members saw it as their responsibility to take messages from the HAB and be an advocate back to their home institutions. In recent years, that was not the way board members understood their roles.

Others said that the leadership vacuum was external. City boosters, they explained, preferred to downplay homelessness and instead focus on the city's virtues, so they paid little attention to the HAB.

Lacking any other strong champion in the community, the HAB coordinator emerged as an advocate for people experiencing homelessness. That advocacy role is important for the community in general, members averred. But the HAB was intended to be a neutral catalyst to collaboration, and members perceived tension between advocacy and advisory roles. Growing advocacy efforts, they suspected, eroded trust in the coordinator's role as an impartial advisor to city and county government. One board member summed it up:

[E]everything dies without nurturing, and so I think there was some lack of leadership, lack of investment, lack of direction and I think in all of that [the coordinator] just felt so tied.... I think there got to the point where it was just coast and try to be under the radar to not upset people.

A few interviewees attributed this tension to having a board that primarily consists of government employees and wanting that board to take on an advocacy role. One suggested looking to the Sioux Empire Homeless Coalition, a 501c3, for the advocacy piece since it could be more of a provider and citizen forum. But at this point in time, the Coalition's board is likewise made up mostly of government employees, who feel tension between their official capacity and advocacy.

Structurally, some board members believed, the fact that the HAB coordinator's position was housed within Minnehaha County offices led to the perception that the county was more invested in the HAB than the city. Over time, the city appointed different liaisons to the HAB, changing from the mayor's direct involvement to the Director of Community Development, then to the Housing Director. According to several HAB members, that change reinforced the perception of the city's disinvestment. A few board members suggested that new leadership in the mayor's office might be an opportunity to restructure the board for greater impact. One board member recalled:

We were all concerned about it [ending homelessness] and how to do it, but there was just no push from the people needed to make the push. And I'll lay a lot of fault on that to the city. Not the people that were working on it from a city standpoint--I think they all were committed and they knew and understood what was going on, and maybe even had an idea of how we could fix it. But at the mayor's level, it was let's just not talk about it because we're such a great city.

Power and Authority

Problematically, without strong support from a champion in a position of power, the HAB was hamstrung. The board itself, as currently structured, has no formal power or authority. It does not directly control any funding or policy. As one board member put it, the HAB "has no authority, it has no budget, it has nothing but good intentions." One board member reflected that the HAB's lack of formal power actually contributed to its lack of influence on policy makers and the city's decreased involvement: "the thing was viewed as a toothless tiger and not a meaningful role." Yet the problem of leadership and authority was more fundamental than a lack of influence: the HAB had no strategic agenda for a leader to push. One board member returned to the problem of lacking a strategic plan:

It's very difficult to accomplish something anyway, and if you don't have--the only authority they had was the ability to influence decision makers.... That was an issue for HAB, and I recognize that. The roadblocks came earlier in my mind, so that never really became the roadblock because we never really had something we were trying to get

done and couldn't get done because we didn't have the authority or the power or the money to do it.

Collaboration and Public Awareness

Board members evinced some disagreement over the HAB's intended audience. Who was the HAB meant to speak to, influence, or advise? And how was that advising to take place? Was advising to be the role of the coordinator or of board members? Was the HAB meant to serve an advocacy role? Was part of HAB's mission to raise public awareness and educate the community about homelessness? Opinion varied.

Some board members saw the HAB as an advocacy organization. They thought the HAB needed to do more or "be more forceful" about communicating information to the public and holding leaders accountable for making progress toward ending homelessness. They wanted to see more public awareness around homelessness. Board members pointed to hunger and homelessness awareness month activities and the HAB's annual "pie party" as examples of public awareness activities, but said such activities were limited. They believed there was little public awareness of the HAB or its work--in part because that work settled into routine reporting of data rather than action. As one board member put it:

[The coordinator] was incredibly involved in the community, yet the community didn't know about it. That sounds so odd, but she was intimately involved with knowing the programs and problem solving and trying to be connected and understanding where some of the gaps were, yet the community at large really didn't know what she did.... Most often if things are kind of successful, you're doing different things, it's in the news and you hear about even periodically. When did you hear about HAB? You know, you really didn't.... [The HAB] was never really embarking on anything. There was no significant finding, there was no change.

However, for those who attended HAB meetings, they saw value in the awareness and education board members gained by bringing people together who might not normally sit at a table together (e.g., people knowledgeable about homelessness with city planners). They wanted to see more leadership and involvement outside of appointed HAB members--that is, have the business and nonprofit sectors as well as the public step up. Board members believed that would require more public education, awareness, and accountability. As one board member put it, "We have to have a stronger commitment. Now of course that takes money, but it also takes just an awareness for people to step up. You're never going to get the money unless people are aware."

Board members agreed that having city and county representatives to the board is important, but several suggested that the HAB should not be primarily composed of government representatives. Instead, they suggested, it should be made up of citizens and those knowledgeable about homelessness who can make informed recommendations about actions to take. Government representatives could then weigh in from the public sector

perspective, and all could work together on a solution. The HAB, they worried, may have been too heavily composed of government actors with only the coordinator to relay input from providers' perspectives, resulting in meetings that felt less like coming together to problem solve and more like being fed information.

Outside investment, board members believed, would build support and influence for the HAB; collaboration would also help refine goals and actions or innovate new solutions. One board member reflected on the value of broader collaboration:

I think we do need more from the outside sector. When I say outside, outside of the world of homelessness I think would be beneficial. Because I think sometimes when you're in that world, you tend to get so focused on that and you're kind of in the trenches, so to look beyond that, you kind of get tunnel vision. And so bringing in other people that all of a sudden start asking questions, you know that are, oh I haven't thought about that in years because that's just something that I work on a daily basis.

If the HAB were to continue and work to set and achieve strategic goals, board members believed, a broader, more inclusive coalition would be necessary. The HAB, they thought, could serve as the mechanism to foster collaboration around shared goals and objectives.

Several board members thought part of building that broader coalition might be coordinating available funding in the community by setting strategic priorities for funders, too, and communicating them to the public and individual philanthropists to get everyone on the same page. One board member drew a parallel to the way the Chamber of Commerce coordinates community appeals. Several saw an unrealized opportunity for the HAB to use funding as a carrot to advance strategic goals.

Similarly, board members identified a need for the HAB to better collaborate with other collaborative organizations, to build on collective impact initiatives rather than fight for turf. For example, when Thrive launched the Housing Action Team (HAT), the HAB tied sections of the strategic plan to the HAT. But rather than building on that synergy, allowing HAT to lead on those objectives and redirecting limited HAB resources elsewhere, some board members sensed, tension and competition arose between the HAB and Thrive HAT. One board member put it this way:

We can't let everybody stand in the way of each other. We've got to find one consortium that can make it happen.

Board Management

Overall, the challenges the HAB faced were structural. However, board members also pointed out some procedural concerns that exacerbated the HAB's lack of strategic focus. As several board members described it, the HAB would have benefited from more structured board management. They reported that, over the past few years, meeting attendance dropped off, some members stayed on the board without attention to terms or required board composition, and there was a lack of understanding even among some board members of who was a board member and who was just a member of the public who frequently attended meetings.

Several board members said they wished they had been through an orientation when they joined the board. They also suggested strict meeting agendas be sent in advance, supplemental materials be provided at least two or three days in advance, and meeting times and days be set well in advance. Most fundamentally, board members said, meetings and agendas need to focus on a strategic plan and driving forward specific projects or objectives.

We just couldn't get the momentum of the project management, if you will, to get those things moving forward and even keeping them on the forefront and top of mind with the board. We ended up talking so much about other things and kind of whatever's the bright shiny object to talk about...but not staying focused on the strategic plan.

Conclusion

For better or worse, the problems the HAB confronted were not unique to Sioux Falls. Stalled implementation was common across communities that developed ten-year plans. Most plans lacked clear goals, did not identify funding sources, did not include timelines for implementation, and did not identify entities responsible for implementation (Batko 2016: 254). Fortunately, other communities have made progress in overcoming these challenges. The rest of this report draws on the experiences of similar communities in reinvigorating collaboration around homelessness, and the final section presents recommendations for the Sioux Falls community.

Data: Comparisons, Benchmarks, and Trends

This section presents the results of comparative data analysis undertaken in order to put in perspective the number of people experiencing homelessness in the Sioux Falls area and the capacity of local housing programs. It compares the population experiencing homelessness in Sioux Falls to communities across the country using data from annual point-in-time counts. It also compares the allocation of housing program beds across different program types by community using annual housing inventory counts. The section concludes with a deeper diver on local trends in homelessness and leading economic and housing indicators for the community.

Data Collection and Analysis

ARI reviewed metrics commonly adopted as leading indicators of changes in homelessness, community shelter capacity and utilization, and performance outcomes. ARI reviewed these metrics against locally available data to select the recommendations made later in this report. In this review, ARI examined the following categories of sources:

- Academic and policy literature
- Federal agency recommendations and requirements
- Data dashboards and annual reports from comparison communities

In order to answer the question of how the level of homelessness in Sioux Falls compares to other places, ARI collected and analyzed data on the number of people experiencing homelessness and characteristics of the base population. The primary data sources used in these comparisons were the Point-in-Time (PIT) counts and Housing Inventory Counts (HIC) reported to HUD in 2018.

Each year, HUD prepares and submits to Congress its Annual Homeless Assessment Report (AHAR). The AHAR summarizes data reported from each CoC, particularly the results of the PIT count and HIC conducted in January. The PIT count data provide a snapshot of the number of people experiencing homelessness on a given night, while the HIC data show community capacity to address homelessness through shelters, temporary housing, permanent supportive housing, and other housing programs.

Because data collection around homelessness is driven by HUD requirements, most data are collected at the level of a Continuum of Care (CoC), which may be as small as a single city or county or as large as a state. In the case of Sioux Falls, the city is part of a statewide South Dakota CoC. In order to draw more accurate comparisons between Sioux Falls and other communities, ARI extracted local data for Sioux Falls where available and calculated relative rates using the methods described below.

Comparative data are presented as a snapshot. Data are drawn from the most recent time period available (in most cases, 2018). Trend data are given for local estimates of the population experiencing homelessness and for leading economic and housing indicators.

Population Experiencing Homelessness

HUD-mandated Point-in-Time (PIT) counts provide the most consistent available data on the number of people experiencing homelessness in communities across the United States. PIT counts are done by CoCs, whose geographies vary, encompassing a single city, a few counties, or an entire state. In order to compare the number of people experiencing homelessness across CoCs, ARI used PIT count data to calculate per capita rates. These rates take into account the vastly different sizes of communities, from sparsely populated rural areas to large, densely populated cities.

To find the total population living in each CoC, ARI used the total population estimates from the American Community Survey 2017 5-year file (Table B01003). American Community Survey data are not tabulated by CoC geography, so ARI mapped the data, overlaying American Community Survey boundaries with CoC boundaries. For American Community Survey data, ARI used county boundaries from the Census Bureau's 2018 U.S. County Tiger Line Files. CoC boundaries came from HUD's CoC GIS National Boundary file for FY2018.

In most cases, CoCs fully contain one or more counties, and the CoC boundaries align with the county boundaries. Where this was the case, county population characteristics were summed and assigned to the CoC so that the total population of the CoC was equal to the total population of the counties contained within that CoC.

In some cases, a CoC only contains part of a county that it intersects. Typically, this happens when a CoC's boundaries align with a city (e.g., Chicago) instead of a county (e.g., Cook County). Where county and CoC geography did not align, population characteristics were manually retrieved from the American Community Survey for the appropriate geography.

Once CoC total population had been calculated, ARI merged PIT count data for each CoC from HUD's report of 2018 PIT counts. PIT counts are annual counts conducted in each CoC during a 24-hour period during a designated 10-day window in January. They give a snapshot of the number of people experiencing homelessness on a given night. PIT counts include information about certain characteristics of people experiencing homelessness, such as whether they are in individual or family households, whether they are veterans, whether they are chronically homeless, and whether they are sheltered or unsheltered.

Using PIT counts and CoC total population, ARI calculated the number of people (and people per PIT category) experiencing homelessness per 100,000 people in the CoC's total population. For comparison, ARI calculated rates for Sioux Falls using PIT numbers from South Dakota Housing for the Homeless Consortium's local report for Sioux Falls / Minnehaha County, which is available online at http://www.housingforthehomeless.org/homeless-counts.html.

Rates are reported both for the city of Sioux Falls and for the Sioux Falls MSA, which comprises Minnehaha, Lincoln, Turner, and McCook Counties. The same numerator is used in both calculations (number of people experiencing homelessness per the Sioux Falls / Minnehaha County PIT report); only the denominator (total population) differs. Because the four-county Sioux Falls MSA has a larger base population in the denominator, its per capita rates are lower. In the Sioux Falls area, PIT count efforts focus on the city itself, not the larger MSA, so in that sense the city-based per capita rates may give a more accurate comparison. MSA rates are provided for comparison with multi-county CoCs where PIT counts may likewise be concentrated in central cities but standardized in this analysis over the CoC's larger total population. Per capita rates are not reported for youth because of inconsistencies in the way youth were reported in HUD PIT data (unaccompanied youth only) and Sioux Falls/Minnehaha data (all youth).

For displaying data, CoCs have been grouped by type: Major Cities, Other Urban CoCs, Rural CoCs, and Suburban CoCs. CoC type is based on HUD's designation. Although Sioux Falls is officially part of a Rural CoC (South Dakota Statewide), the city is most comparable in size to Other Urban CoCs.

Selected comparison communities are also highlighted in the charts below. The comparison communities in the charts include the six communities profiled later in this report as well as two additional nearby communities: the Sioux City/Dakota, Woodbury Counties CoC and the Lincoln (Nebraska) CoC. The Omaha/Council Bluffs CoC is among the Major Cities CoCs. Most other comparison communities are among Other Urban CoCs, except for comparison communities that are part of Rural Balance of State CoCs (i.e., Cedar Rapids, IA and Fort Collins, CO).

Tables provide a summary of the data presented in the following charts.

СоС Туре	Number of CoCs	Total PIT Count	Sheltered Count	Unsheltered Count	Veterans	Chronic Homeless
Major						
Cities	47	188.0	121.2	49.8	18.5	40.0
Other						
Urban	59	152.7	112.0	24.0	11.4	23.7
Rural	108	76.1	54.4	13.5	4.0	8.8
Suburban	171	106.6	76.4	15.2	6.3	12.9

Table 1. Median number of people experiencing homelessness per 100,000 general population by CoC type and subpopulation

Source: 2018 Point-in-Time Count (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>)

Community	Total PIT Count	Sheltered Count	Unsheltered Count	Veterans	Chronic Homeless
Colorado Balance of					
State CoC (Fort Collins)	234.3	87.0	147.3	18.5	46.8
Sioux City/Dakota,					
Woodbury Counties CoC	214.8	209.9	4.9	20.3	22.0
lowa Balance of State					
CoC (Cedar Rapids)	70.1	64.9	5.2	3.2	5.4
Des Moines/Polk County					
CoC	163.5	140.6	22.9	19.7	23.5
Boise/Ada County CoC	173.7	145.9	27.8	26.0	41.8
Omaha/Council Bluffs					
CoC	172.5	164.6	7.8	17.4	43.8
Madison/Dane County					
CoC	117.4	101.4	16.1	8.4	23.7
Lincoln CoC	162.6	146.4	16.2	5.8	26.3
City of Sioux Falls	219	184	35	13	29
Sioux Falls MSA	149	125	24	9	20

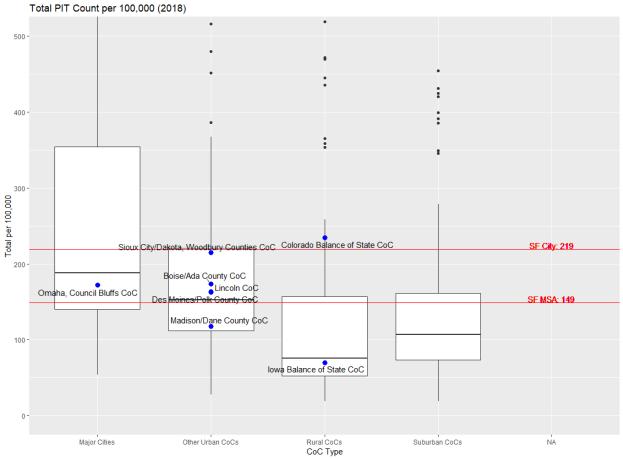
Table 2. Median number of people experiencing homelessness per 100,000 general population by subpopulation for Sioux Falls and selected comparison communities

Source: 2018 Point-in-Time Count (https://www.hudexchange.info/resource/3031/pit-and-hic-

data-since-2007/) and 2018 Sioux Falls Homeless Count

http://www.housingforthehomeless.org/homeless-counts.html)





Total Number of People Experiencing Homelessness

Figure 1. Total PIT count per 100,000 general population by CoC type (2018)

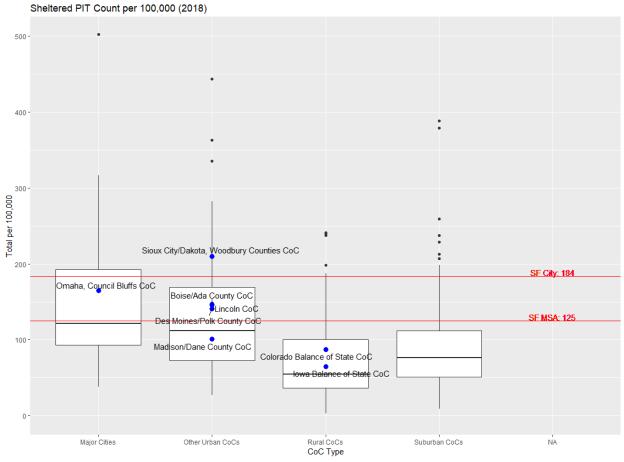
Source: 2018 Point-in-Time Count (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>), 2018 Sioux Falls Homeless Count

(<u>http://www.housingforthehomeless.org/homeless-counts.html</u>), and American Community Survey 2017 1-year estimates

Figure 1 compares the total number of people experiencing homelessness per 100,000 people across CoC types. In 2018, the city of Sioux Falls total PIT count per 100,000 people was 219, higher than the rate in all comparison communities except the Colorado Balance of State CoC (which includes Fort Collins). The Sioux Falls rate was also higher than nearly all Rural and Suburban CoCs, higher than 75% of Other Urban CoCs, and higher than the median rate among Major Cities CoCs.

Interpreting Boxplots

Boxplots show the median rate and variation around that median. To read a boxplot, start in the middle of the white box. The horizontal line marks the median for that group. For example, the median total PIT count for Major Cities CoCs is 188. The top of the white box shows the 75th percentile for the group: 75% of CoCs in that group fall below that value. The bottom of the white box shows the 25th percentile for the group. The whiskers that extend from each box show the minimum (lower whisker) and maximum (upper whisker), excluding outliers. Outliers are indicated by black dots above the upper whisker or below the lower whisker. A value is considered an outlier if it is equal to 1.5 times the range between the 25th and 75th percentile. For readability, charts do not show values higher than 500.



Number of People Experiencing Homelessness Who Are Sheltered

. . .

Figure 2. Sheltered PIT count per 100,000 general population by CoC type (2018)

Source: 2018 Point-in-Time Count (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>), 2018 Sioux Falls Homeless Count

(<u>http://www.housingforthehomeless.org/homeless-counts.html</u>), and American Community Survey 2017 1-year estimates

Figure 2 compares the number of people experiencing homelessness who are sheltered per 100,000 people across CoC types. In 2018, the city of Sioux Falls sheltered PIT count per 100,000 people was 184, higher than the rate in all comparison communities except the Sioux City/Dakota, Woodbury Counties CoC. The Sioux Falls sheltered rate was also higher than nearly all Rural and Suburban CoCs, and higher than about 75% of Other Urban and Major Cities CoCs.

PIT counts divide the total count into sheltered and unsheltered populations. Two factors can drive up sheltered rates: a higher overall number of people experiencing homelessness, or a relatively high sheltered as compared to unsheltered rate. Both factors are in play for Sioux Falls. The city has a relatively high total PIT count for its population size, and it has a relatively low proportion of people experiencing homelessness who are unsheltered. In Sioux Falls, most people experiencing homelessness are sheltered.

Number of People Experiencing Homelessness Who Are Unsheltered

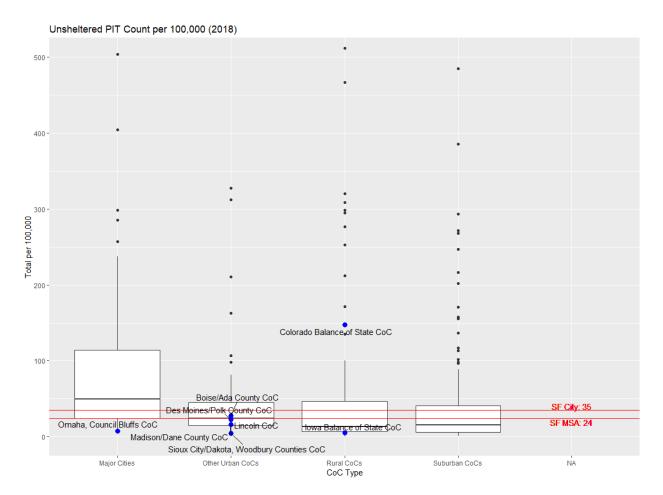


Figure 3. Unsheltered PIT count per 100,000 general population by CoC type (2018)

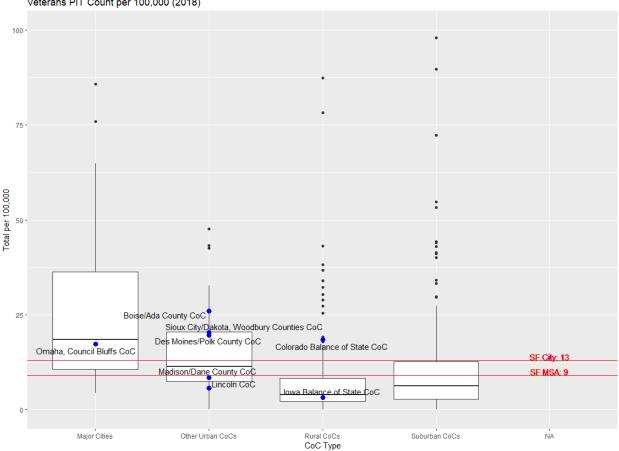
Source: 2018 Point-in-Time Count (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>), 2018 Sioux Falls Homeless Count (<u>http://www.housingforthehomeless.org/homeless-counts.html</u>), and American Community Survey 2017 1-year estimates

Figure 3 compares the number of people experiencing homelessness who are unsheltered per 100,000 people across CoC types. In 2018, the city of Sioux Falls unsheltered PIT count per 100,000 people was 35, higher than the rate in all comparison communities except the Colorado Balance of State CoC (which includes Fort Collins). The Sioux Falls unsheltered rate was lower than the median for Major Cities CoCs, but higher than the median for Other Urban, Rural, and Suburban CoCs.

PIT counts divide the total count into sheltered and unsheltered populations. Two factors can drive up unsheltered rates: a higher overall number of people experiencing homelessness, or a relatively low balance of sheltered as compared to unsheltered rate. As an example, the Colorado Balance of State CoC displays both of these factors: the CoC's total PIT count is higher than nearly all other Rural CoCs, and just over one-third of people experiencing homelessness in the CoC are sheltered.

PIT count methods can also affect unsheltered counts. Because PIT counts are conducted in January, communities in northern climates with cold winters typically have lower unsheltered counts than communities with more temperate winters. Unsheltered counts may also depend on the willingness and ability of people conducting the PIT counts to find and count people who are unsheltered.

Number of Veterans Experiencing Homelessness



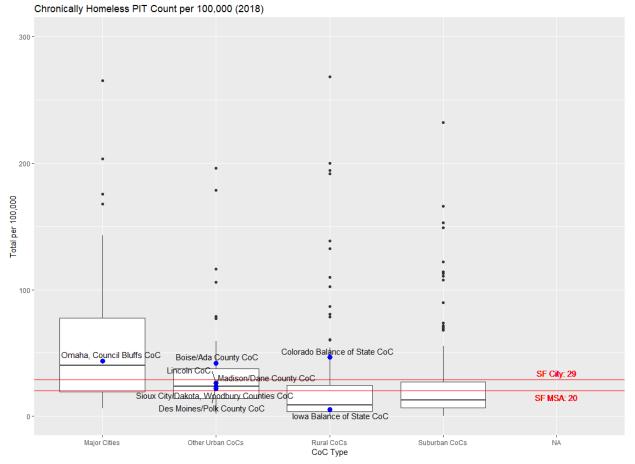
Veterans PIT Count per 100,000 (2018)

Figure 4. Veterans PIT count per 100,000 general population by CoC type (2018)

Source: 2018 Point-in-Time Count (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>), 2018 Sioux Falls Homeless Count (<u>http://www.housingforthehomeless.org/homeless-counts.html</u>), and American Community Survey 2017 1-year estimates

Figure 4 compares the number of veterans experiencing homelessness per 100,000 people across CoC types. In 2018, the city of Sioux Falls veteran PIT count per 100,000 people was 13, lower than the rate in all comparison communities except the Madison/Dane County CoC, Lincoln CoC, and Iowa Balance of State CoC (which includes Cedar Rapids). The Sioux Falls rate was also lower than the median rate among Major Cities CoCs, but higher than the median for Other Urban CoCs, higher than the 75th percentile for Suburban CoCs, and higher than the rate in nearly all Rural CoCs.

When it comes to veterans experiencing homelessness, Sioux Falls compares favorably to similar communities. The total number of veterans experiencing homelessness on a given night in January in Sioux Falls is 13 per 100,000 people, or a total of 23.



Number of People Experiencing Chronic Homelessness

Figure 5. Chronically Homeless PIT count per 100,000 general population by CoC type (2018)

Source: 2018 Point-in-Time Count (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>), 2018 Sioux Falls Homeless Count (<u>http://www.housingforthehomeless.org/homeless-counts.html</u>), and American Community Survey 2017 1-year estimates

Figure 5 compares the number of people experiencing chronic homelessness per 100,000 people across CoC types. For HUD's definition of chronic homelessness, see https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule.

In 2018, the city of Sioux Falls chronic homeless PIT count per 100,000 people was 29, higher than the rate in all comparison communities except the Omaha/Council Bluffs CoC, Boise/Ada County CoC, and Colorado Balance of State CoC (which includes Fort Collins). The Sioux Falls rate was also lower than the median rate among Major Cities CoCs, but higher than

the median for Other Urban CoCs, and higher than the 75th percentile for Suburban and Rural CoCs.

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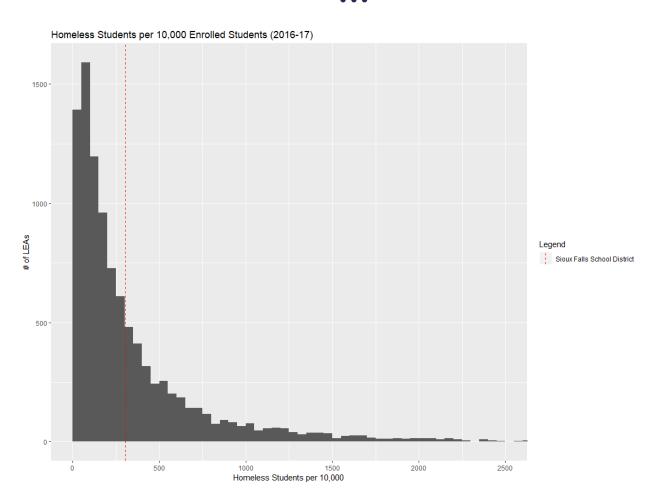
When it comes to people experiencing chronic homelessness, Sioux Falls looks similar to comparison communities. The total number of people experiencing chronic homelessness on a given night in January in Sioux Falls is 29 per 100,000 people, or a total of 50.

Children and Youth Experiencing Homelessness

Point-in-Time counts give a snapshot of the population experiencing homelessness on a single night in January. As an alternative measure of the number of people experiencing homelessness, McKinney-Vento counts collected by school districts provide a cumulative measure of the number of children experiencing homelessness at any point during one year.

The U.S. Department of Education reports McKinney-Vento data by local education agencies (LEAs). Data are collected by LEAs and reported to the U.S. Department of Education. As of this report, the most recent data available were from the 2016-17 academic year. The figure below shows the 2016-17 distribution of LEAs according to how many homeless students per 10,000 enrolled students they reported. For readability, the chart does not show LEAs with more than 2,500 homeless students per 10,000 enrolled students (about 8% of LEAs).

In 2016-17, the median number of homeless students per 10,000 enrolled students by LEA was 197. In other words, half of LEAs had a lower rate of homeless students and half had a higher rate. That year, the number of homeless students per 10,000 enrolled students reported by the Sioux Falls School District was 303 (shown by a dashed red line on the chart). The rate of homeless students in Sioux Falls was higher than the median rate across LEAs; in other words, more than 50% of LEAs had fewer homeless students per 10,000 enrolled students than Sioux Falls.





Source: U.S. Department of Education National Center for Education Statistics Common Core of Data (CCD) "Local Education Agency (School District) Universe Survey" 2016-17 v.1a. Homeless Student Enrollment Data by Local Educational Agency- School Year 2016-17 EDFacts Data Documentation, U.S. Department of Education, Washington, DC: EDFacts. Retrieved from https://www2.ed.gov/about/inits/ed/edfacts/data-files/school-status-data.html.

City-based Estimates of the Number of People Experiencing Homelessness

Neither CoCs nor LEAs align directly with city boundaries, and there is no comprehensive public data available for the number of people experiencing homelessness city by city. However, some limited survey data are available. In December 2016, the United States Conference of Mayors published a 38-city survey of hunger and homelessness. The cities surveyed for the report spanned 24 states and were diverse in geography and population size. Although these cities make up a much smaller and more limited sample than the CoC data provided above, they offer some insight into the way city-level populations may differ from CoC populations. The full report can be found online at

https://endhomelessness.atavist.com/mayorsreport2016.

For the estimates of homelessness, the United States Conference of Mayors report relies on the January 2016 Point-in-Time count, which was conducted two years prior to the 2018 PIT count used above. Therefore, the two datasets are not directly comparable.

Among the 38 cities surveyed for the Mayors Report, the rate of homelessness was 510 per 100,000 in the general population. Rates among participating cities ranged from 110 in Wichita, KS to 1,240 in Washington, DC. Two-thirds of the surveyed cities reported decreases in homelessness between 2009 and 2016.

With regard to homeless assistance, the report found a shift toward permanent housing solutions (rapid re-housing and permanent supportive housing). From 2009 to 2016, the number of permanent supportive housing beds increased while the number of transitional housing beds decreased, both nationally and in the 38 study cities. Permanent supportive housing was the bed type with the most capacity across study cities, and rapid re-housing capacity more than tripled in study cities between 2013 and 2016.

Community Capacity to Address Homelessness

As a measure of community capacity to address homelessness, ARI compared 2018 Housing Inventory Counts (HIC) for each CoC. For Sioux Falls, ARI used the subset of South Dakota's 2019 HIC for Sioux Falls - based housing programs.

HICs report the number of beds available in a CoC by bed types. The types of beds reported include the following:

- Emergency, Safe Haven, and Transitional Housing
 - Emergency Shelter
 - o Safe Haven
 - Transitional Housing
- Permanent Housing
 - Permanent Supportive Housing
 - Rapid Re-Housing
 - Other Permanent Housing

HICs report each of these bed types in total and by intended population or seasonal variability according to the following subsets:

. . .

- Family units
- Family beds
- Adult-only beds
- Child-only beds
- Total year-round beds
- Seasonal beds
- Overflow/voucher beds
- Chronic beds
- Veteran beds
- Youth beds

In order to draw comparisons across CoCs of different sizes, this analysis focuses not on the raw number of beds available but on the relative distribution of bed types. That is, it looks at the mix of available housing programs across communities. This analysis compares only total beds by type; it does not consider detailed breakdowns by population or seasonal subset.

Distribution of Bed Types

The charts below show the number of CoCs according to the percentage of different types of housing program beds in each CoC. For each CoC, the percentage of beds of each program type was calculated. CoCs were grouped into bins according to the percentage of beds of a given type. Bins are five percentage points wide. The height of each bar indicates the number of CoCs that fall within that bin. The higher the bar, the more CoCs fall into that five-percentage point range. In each chart, the vertical dotted line shows where Sioux Falls would fall based on the percentage of beds in that type of housing program.

Housing Type as % of Total HIC per CoC (2018) 75 ES.pct 50 25 0 75 TH.pct 50 Housing Type (All CoCs) Emergency Shelter 25 Transitional # of CoCs Rapid Rehousing 0 PSH 75 Sioux Falls RRH.pct % of 2019 SF HIC 50 25 0 75 50 B 25 0 10 30 20 60 40 80 50 70 90 100 % of Total HIC



Source: HUD Exchange PIT and HIC Information Since 2007

(<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>) and South Dakota 2019 HIC for Sioux Falls, from South Dakota Housing for the Homeless Consortium

In Figure 7, the top chart shows where CoCs fall according to the percentage of beds that are in emergency shelters. Most commonly, CoCs have 20 to 25% of their beds in emergency shelters, but in Sioux Falls, 36% of available beds are in emergency shelters such as the Union Gospel Mission.

The second chart shows where CoCs fall according to the percentage of beds that are in transitional programs. Most commonly, CoCs have 10 to 15% of their beds in transitional housing, and Sioux Falls is also in that range, with 10% of available beds in transitional housing programs such as St. Francis House.

The third chart shows rapid rehousing. Most CoCs have 20% or less of their available beds in rapid rehousing programs. Sioux Falls has relatively more beds dedicated to rapid rehousing, with about 22% of available beds in rapid rehousing programs such as Interlakes Community Action's Heartland House.

35

The fourth chart shows permanent supportive housing (PSH). For PSH, CoCs vary in the proportion of their beds in PSH programs. Most commonly, CoCs have 30 to 45% of their beds in PSH programs. Sioux Falls has slightly less, with 29% of available beds in PSH programs such as the Veterans Affairs Supportive Housing (HUD-VASH) program.

For readability, Safe Haven beds and Other Permanent Housing (OPH) beds have been excluded from this figure. They make up relatively small proportions of available beds across all CoCs (0.3% and 4% respectively). For reference, the table below shows the percentage of available beds by program type nationally (summed across all CoCs) and the percentage of CoCs with at least one bed for each type.

Table 3. Bed type availability by CoC type (2018)

Bed Type	% of beds nationally	% of CoCs with this type
Emergency shelter	32%	100%
Transitional housing	11%	97%
Safe haven	0.3%	23%
Rapid rehousing	12%	91%
Permanent supportive housing	40%	97%
Other permanent housing	4%	40%

Source: HUD Exchange PIT and HIC Information Since 2007 (https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/)

The table below shows the proportion of beds by program type for the Sioux Falls area.

Bed Type	% of Available Beds
Emergency shelter	36%
Transitional housing	10%
Safe haven	0%
Rapid rehousing	22%
Permanent supportive housing	29%
Other permanent housing	3%

Table 4. Bed type availability for Sioux Falls area housing programs (2019)

Source: South Dakota 2019 HIC for Sioux Falls, from South Dakota Housing for the Homeless Consortium

Figure 8 shows the distribution of bed types aggregated into temporary versus permanent housing programs. Temporary housing includes beds in emergency shelters, safe haven programs, transitional housing, and rapid rehousing. Permanent housing includes beds in permanent supportive housing, and other permanent housing. Note that in some contexts, rapid rehousing is considered permanent housing. Rapid rehousing has characteristics of both temporary and permanent housing: programs provide time-limited assistance but typically place people in housing units where they can continue to live after the assistance period if they are able to take on the payments themselves. In order to measure the success of people

exiting to or retaining permanent housing, the system performance measure proposed later in this report group rapid rehousing with temporary programs since the assistance is time-limited. For consistency, this chart does the same.

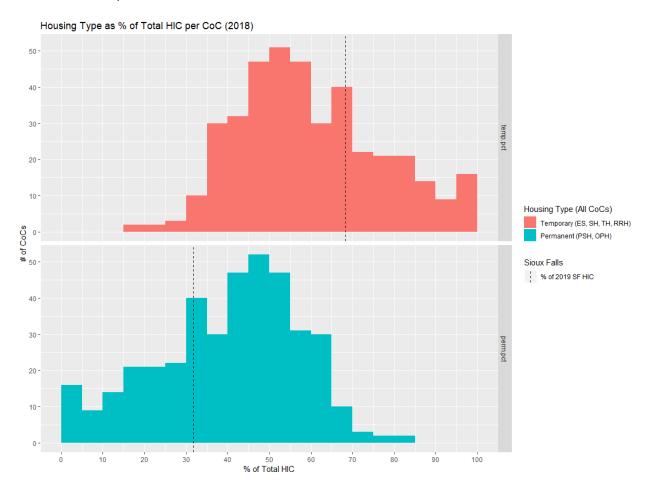


Figure 8. Permanent and temporary housing as % of total housing inventory count per CoC (2018)

Source: HUD Exchange PIT and HIC Information Since 2007 (<u>https://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007/</u>) and South Dakota 2019 HIC for Sioux Falls, from South Dakota Housing for the Homeless Consortium

Most commonly, CoCs have 50 to 55% of beds in temporary housing programs and the other 45 to 50% in permanent housing programs. By comparison, the balance in Sioux Falls has relatively more temporary beds and fewer permanent housing bed: Sioux Falls has 68% of beds in temporary housing programs and 32% in permanent housing programs.

Federal Awards by Purpose and Activity

The table below shows the 2018 CoC grant awards from HUD for the CoCs to which the comparison communities belong. Total awards range from \$1,073,322 to \$5,206,206. Like Sioux Falls, some comparison communities belong to statewide or balance of state CoCs that

encompass a geographical area much larger than the city itself. The table indicates the CoC to which each community belongs and notes those that are statewide or balance of state.

The table also shows the portion of the 2018 CoC award allocated to permanent supportive housing (PSH), rapid rehousing (RRH), joint transitional housing - rapid rehousing (TH-RRH), transitional housing, supportive services, HMIS data systems, and planning grant. Often, planning grant allocations are used to fund a CoC director or board coordinator position.

	Total Award for CoC	PSH	RRH	Joint TH - RRH	Transitional	Supportive Services	HMIS	Planning Grant
Fort Collins,								
CO - CO 500								
(Balance of State)	\$3,079,312	\$1,556,478	\$1,233,327		\$47,989		\$143,129	\$98,389
Boise, Idaho	•							
- ID 500	\$1,073,322	\$824,109	\$222,516					\$26,697
Cedar Rapids, IA - IA 501								
(Balance of								
State)	\$5,206,206	\$1,274,841	\$2,386,201	\$150,792	\$499,745	\$307,748	\$346,578	\$240,300
Des Moines,				· · ·	· · · ·	· · · ·		· · ·
IA - IA 502	\$3,537,981	\$2,262,780	\$621,930	\$297,501		\$147,882	\$108,419	\$99,460
Rochester,								
MN - MN 502	\$2,230,636	\$1,652,369	\$208,537	\$109,179		\$134,047	\$62,480	\$64,020
Omaha, NE - NE 501	\$4,692,702	\$2,721,594	\$1,596,168			\$58,975	\$179,660	\$136,300
Lincoln, NE -	ψ+,072,702	ψΖ,/ ΖΤ,0/ Η	φ1,070,100			400,770	\$177,000	φ100,000
NE 502	\$2,372,628	\$742,503	\$954,598		\$480,011	\$34,793	\$93,039	\$67,600
Fargo, ND -		· · · ·	· · · ·		· · · ·			
ND 500								
(Statewide								
CoC)	\$1,876,781	\$1,178,511		\$241,862	\$329,500		\$74,072	\$52,800
Sioux Falls,								
SD - SD 500 (Statewide)	\$1,316,523	\$631,074	\$484,039			\$105,144	\$39,684	\$56,500
Madison, WI	φ1,310,323	ູ ງ031,074	J404,UJ7			្វាប្រ,144	န ၁ 7,004	900,0UU
- WI 503	\$3,572,436	\$2,668,002	\$444,423		\$54,000	\$267,611	\$44,500	\$93,800

Table 5. CoC grant awards by purpose for comparison communities and Sioux Falls

Source: HUD Exchange 2018 CoC Awards by Program Component (https://www.hudexchange.info/programs/coc/awards-by-component/)

Communities also receive funding for work to address homelessness through other federal grant programs. The table below shows 2018 grant awards through the Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), and HOME Investment Partnerships Program. Grant amounts shown are those made directly to a city. States may also receive funds through these grant programs, and those amounts are excluded from this table.

	CDBG	ESG	HOME
Fort Collins, CO	\$1,073,2140		\$846,700
Boise, Idaho	\$1,365,826		\$809,234
Cedar Rapids, IA	\$1,068,395		\$381,448
Des Moines, IA	\$3,692,162	\$306,430	\$1,035,653
Rochester, MN	\$602,500		
Omaha, NE	\$4,771,095	\$390,026	\$2,296,294
Lincoln, NE	\$1,831,192	\$150,536	\$1,157,936
Fargo, ND	\$713,369		\$479,938
Sioux Falls, SD	\$973,147		\$506,786
Madison, WI	\$1,876,219	\$154,219	\$1,499,232

Table 6. HUD awards for comparison communities and Sioux Falls (2018)

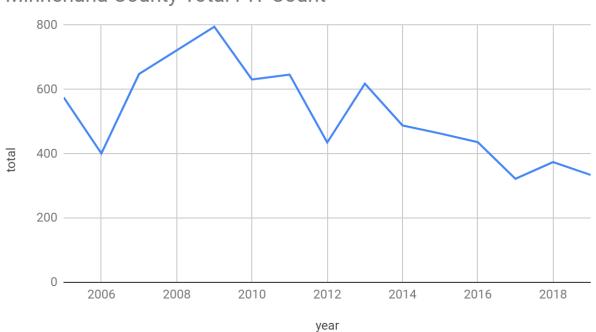
Source: HUD Exchange 2018 Awards and Allocations

(https://www.hudexchange.info/GRANTEES/ALLOCATIONS-AWARDS/)

Local Trends in Homelessness and Leading Economic and Housing Indicators

The figure below shows the total Point-in-Time (PIT) count for Sioux Falls / Minnehaha County from 2005 to 2019. PIT counts are aggregated at the CoC level, which in South Dakota is statewide. However, historically, local count coordinators have recorded local numbers before passing them on to the state, and since 2012, the South Dakota Housing for the Homeless Consortium has made available local data for Minnehaha County. More detailed count data are available online at http://www.housingforthehomeless.org/homeless-counts.html.

It should be noted that the way in which the PIT count is conducted and the definition of homelessness used for the count have changed over time. Before 2014, the count was conducted in September and January, and summer (September) numbers were reported. Beginning in January 2014, it became a winter count conducted only once per year. The definition of homelessness has also been clarified to exclude people who are doubled up (i.e., temporarily sharing a home with another household) or staying in an institution such as detox, jail, or a hospital. Consequently, apparent trends should be interpreted with caution. The evident decline in the number of people experiencing homelessness is likely due in part to changes in methodology and the adoption of a narrower definition of homelessness.



Minnehaha County Total PIT Count

Figure 9. Total PIT Count for Minnehaha County, 2005 - 2019

Source: South Dakota Housing for the Homeless Consortium (http://www.housingforthehomeless.org/homeless-counts.html)

The figure below shows trends in the number of people experiencing homelessness identified during the annual PIT count who were sheltered versus unsheltered.

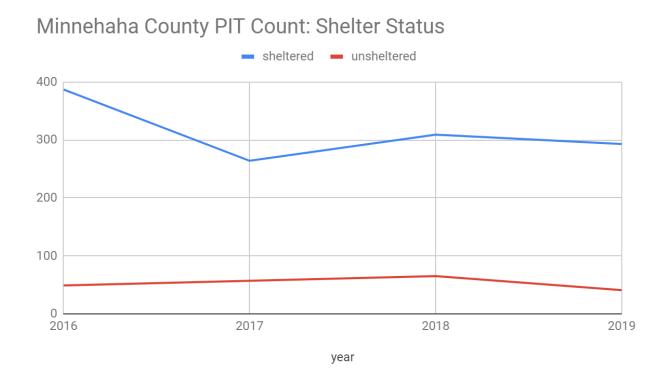
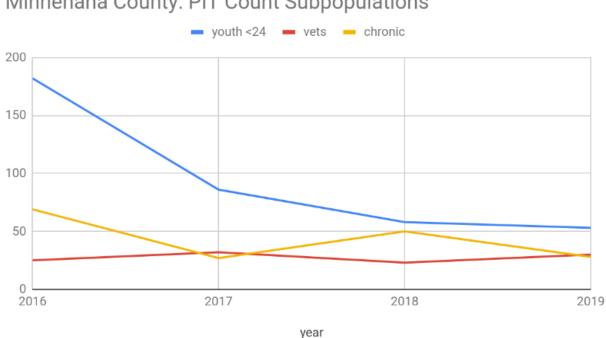


Figure 10. Sheltered PIT Count for Minnehaha County, 2016 - 2019

Source: South Dakota Housing for the Homeless Consortium (http://www.housingforthehomeless.org/homeless-counts.html)

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The figure below shows change over time in the number of people experiencing homelessness who belonged to different subpopulations: youth (under age 24), veterans, and chronically homeless.



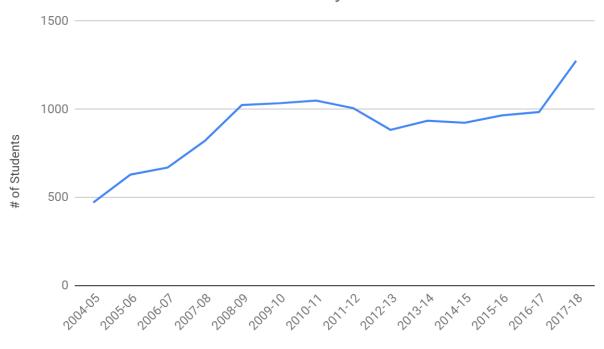
Minnehaha County: PIT Count Subpopulations

Figure 11. Youth, veterans, and chronic PIT count for Minnehaha County, 2016 - 2019

Source: South Dakota Housing for the Homeless Consortium http://www.housingforthehomeless.org/homeless-counts.html

The declining PIT count numbers could indicate a decrease in the number of people experiencing homelessness or could be due to changes in methodology. One indication that the decrease has more to do with methodology than a decrease in homelessness is the countervailing trend seen in McKinney-Vento data collected by the Sioux Falls School District.

The figure below shows the number of Sioux Falls School District students identified each year as experiencing homelessness for at least part of the year. Unlike the PIT count, which is a snapshot for a single night in January, the McKinney-Vento count is cumulative: the number for a given year reflects the total number of students who were known to have been homeless at any point during the year. The McKinney-Vento count rose rapidly between 2004 and 2008, leveled off until 2016, then increased sharply from 2016 to 2017.



Sioux Falls School District McKinney-Vento Count

Figure 12. Homeless students identified by the Sioux Falls School District, 2004/05 - 2017/18

Source: Homeless Advisory Board 2017 Annual Report

(<u>https://www.minnehahacounty.org/hab/2017AnnualHAB_Report.pdf</u>) and Sioux Falls School District

The numbers in the figure above differ somewhat from the McKinney-Vento numbers used in the previous comparative analysis. For comparison across LEAs, this report used McKinney-Vento numbers as reported by the U.S. Department of Education. For local trend analysis, numbers are based on direct report from the Sioux Falls School District using a more inclusive count: The district counts all youth experiencing homelessness from birth to age 18 (and to 21 if they are enrolled in school). They also count those youth experiencing homelessness who leave town before enrolling, and they count youth who attend school in surrounding communities but reside in Sioux Falls.

Discussion: How Sioux Falls Compares

There are difficulties inherent in comparing the number of people experiencing homelessness in Sioux Falls with other communities. Geographies, general populations, and methods of counting differ. This section has attempted to adjust for these problems where possible (e.g., by calculating relative rates), but readers should keep in mind that inconsistencies remain.

With that caveat in mind, how does Sioux Falls compare to other communities? Overall, Sioux Falls has a higher relative rate of people experiencing homelessness, and those people are more likely to be sheltered than unsheltered. When it comes to subpopulations, Sioux Falls ranks near the middle in the number of veterans and chronically homeless, but ranks above the median for students experiencing homelessness.

Sioux Falls's comparatively high rate of sheltered homeless is consistent with the distribution of housing programs available in the community. Relative to other communities, Sioux Falls's housing programs consist of more emergency shelter beds and fewer permanent housing beds. Shifting this balance toward more permanent housing could reduce the sheltered homeless population by creating more opportunities for people experiencing homelessness to move out of temporary programs and into permanent housing.

Leading Indicators

The causes of homelessness are diverse. Some are individual, such as job loss, untreated addiction or mental illness, eviction, and domestic violence. Others occur at the community level, such as rising housing costs, stagnant or low wages, inaccessible healthcare, and lack of social safety net programs. Tracking data on individual and community-level factors related to homelessness can give insight into how changes in the community affect the number of people experiencing homelessness.

Where up-to-date data are available rapidly, they may even serve as leading indicators that could forecast expected changes in the number of people experiencing homelessness. Such forecast models have, in fact, been developed on a state-by-state basis by the Homelessness Analytics Initiative (HAI). HAI is a collaboration between the U.S. Department of Veterans Affairs (VA) and HUD. Its aim is to empower communities with information on trends in homelessness, factors related to homelessness, and services in place to prevent and intervene. It does so by linking and leveraging data across federal agencies. Although some of those data sources are available down to the county level, many are available only for CoCs or states. The HAI and available forecasts can be found online at http://homelessnessanalytics.org/.

Although not all of the data used by the HAI forecast models are available locally, many indicators of economic conditions and housing affordability are. The table summarizes recommended local indicators, the geography for which they are available, the frequency with which they are updated, and the lag before updates are released. Further description of each indicator, along with trend data where available, are provided below.

. . .

		Update	
Indicator	Geography	frequency	Lag
Unemployment rate	Sioux Falls MSA	Monthly	One month
Fair market rent	Sioux Falls MSA	Annually	Nine months
Housing affordability	Sioux Falls MSA plus Lake		Less than one
index	County	Monthly	month
Cost-burdened	Sioux Falls City (MSA and		
households	county also available)	Annually	Nine months
Evictions	County	Daily	As agreed*
			Less than one
Foreclosures	County	Monthly	month
Requests for	Sioux Falls City or Minnehaha		
assistance	County	Daily	As agreed*

Table 7. Leading economic and housing indicators

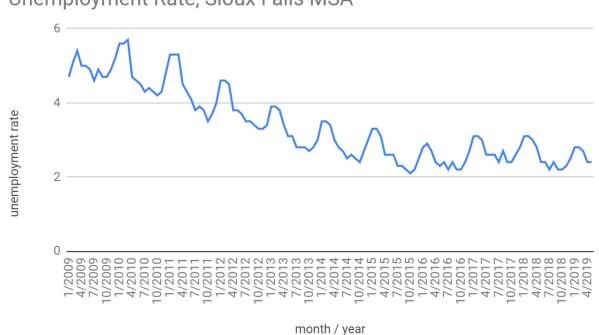
*No easily accessible public system exists for accessing these data, but reports could be received by agreement and with minimal lag.

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Unemployment Rate

The relationship between employment and homelessness is complex. On the one hand, unemployment can contribute to homelessness when people are unable to afford or maintain housing due to job loss. On the other hand, people experiencing homelessness face barriers to finding and maintaining employment. With regard to community coordination around homelessness, the unemployment rate is a useful leading indicator because it is updated frequently and with minimal lag. An increase in unemployment could signal increased need for housing assistance or homelessness.

The U.S. Bureau of Labor Statistics publishes the monthly unemployment rate for the Sioux Falls MSA. Data are available back to January 1990 and updated monthly with a one-month lag.



Unemployment Rate, Sioux Falls MSA

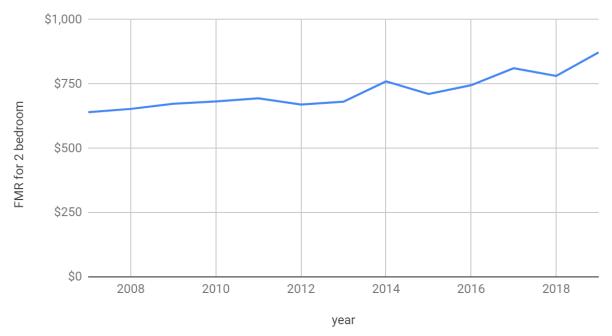


Source: Bureau of Labor Statistics Local Area Unemployment Statistics (<u>https://www.bls.gov/eag/eag.sd_siouxfalls_msa.htm</u>)

Fair Market Rent

Housing affordability is related to homelessness. As housing becomes less affordable for more people, the risk of experiencing homelessness increases. Fair Market Rent (FMR) offers one way of tracking rental costs.

FMR is determined by HUD for the Sioux Falls MSA. The measure is based on American Community Survey estimates of gross rent and corresponds roughly to the 40th percentile of rents in the MSA. In addition to tracking increases in rental costs, FMR is also used to set payment standards, or the amount of rental assistance certain housing programs can provide. The figure below shows FMR for two-bedroom units in the Sioux Falls MSA.



Fair Market Rent, Sioux Falls MSA

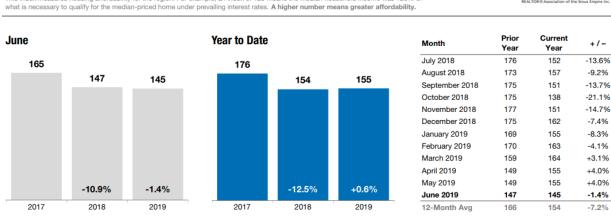
Figure 14. Fair market rent for the Sioux Falls MSA, 2007 - 2019

Source: HUD Fair Market Rent Documentation System (https://www.huduser.gov/portal/datasets/fmr.html)

Housing (Homeowner) Affordability Index

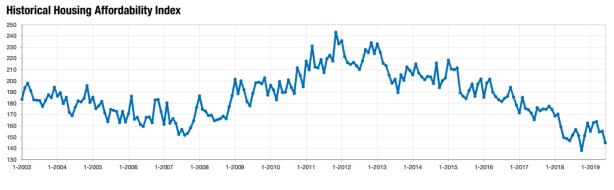
Rising prices for home buyers may make it more difficult for households to afford homeownership and increase pressure on the rental market. The Housing Affordability Index reported by the Realtor Association of the Sioux Empire (RASE) measures housing affordability in the region. The index calculates the ratio between median household income and income necessary to qualify for the median-priced home under prevailing interest rates. Index numbers above 100 indicate that the median income is greater than the income necessary to gualify for the median-priced home. Index numbers below 100 would indicate the median income is too low to afford the median-priced home.

The Housing Affordability Index is updated monthly and available historically back to 2003. A drop in the index could signal a growing affordability problem.



Housing Affordability Index

rdability for the region. For example, an index of 120 means the median household income was 120% of



All data from the RASE Multiple Listing Service. Provided by the REALTOR® Ass on of the Sioux Empire. Inc. Report © 2019 ShowingTime

Figure 15. Monthly housing affordability index for the Sioux Falls area, 7/2018 - 7/2019

Source: RASE Housing Market Indicators (https://rase-inc.org/rase-members/monthly-rase-mlsstatistics/

48

Cost-Burdened Households

Cost-burdened households are households spending more than 30% of their income on housing. The American Community Survey annually reports the number of cost-burdened households among renters and homeowners, and the data are available for a wide range of geographies, including both the Sioux Falls MSA and city of Sioux Falls.

The figure below shows cost-burdened households as a percentage of homeowner and renter households in the city of Sioux Falls. Renters are more likely than homeowners to be cost burdened, with around 40% of Sioux Falls renters paying more than 30% of their income in rent.

Cost-burdened Households (%) by Tenure, City of Sioux Falls

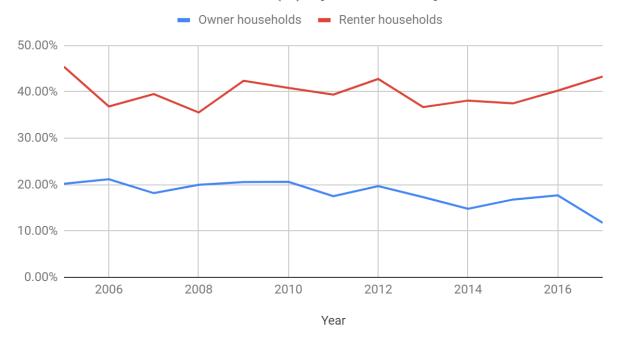


Figure 16. Cost-burdened households by tenure in the city of Sioux Falls, 2005 - 2017

Source: American Community Survey 1-year estimates

American Community Survey data are reported annually with a roughly nine-month lag. Because of that longer reporting period, these data may be less useful as a leading indicator of homelessness, but remain an important long-term trend to consider.

Evictions

Eviction is a major risk factor for homelessness. Informal evictions--instances that never make it to court but result in a tenant's moving out--also put households at risk of homelessness. They have been found to occur far more frequently than formal evictions (Desmond 2016).

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The figure below gives a rough accounting of the number of evictions in Minnehaha and Lincoln Counties since 2010. The chart shows the number of new forcible entry and detainer case numbers in the court system in those years. Not all of the cases counted in the chart necessarily led to a formal eviction, but all had progressed far enough to be assigned a case number. These data include all forcible entry and detainer cases, which may include commercial cases in addition to residential cases.



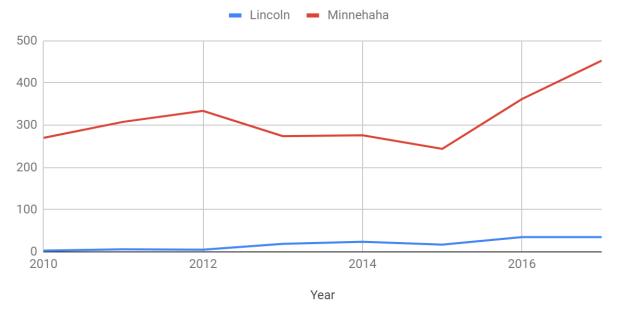


Figure 17. New forcible entry and detainer (eviction) cases for Minnehaha and Lincoln Counties, 2010 - 2017

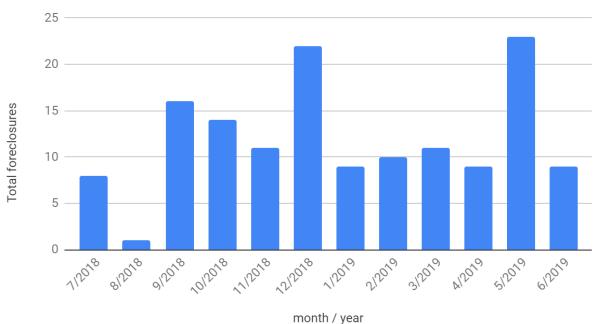
Source: South Dakota Unified Judicial System Odyssey Report of Forcible Entry and Detainer Case Events

Eviction is an important leading indicator to track: it is a proximate cause of homelessness that can be tracked in nearly real time. Court records offer one means of tracking evictions, though they undercount informal evictions that result in tenants' moving out but never go to court. An alternative measure would be sheriff's records of notice to quit service. A notice to quit, also known as a three-day notice, is served to initiate the eviction process. Some tenants may move out after receiving a notice to quit, in which case the eviction case would not proceed through court. During the 12 months prior to this report (July 2018 - July 2019), the Minnehaha County Sheriff's Office served 302 three-day quit and vacate notices and 252 lockouts (evictions).

Foreclosures

Foreclosures can also contribute to the risk of experiencing homelessness, not only for homeowners facing foreclosure on their primary residence but also for tenants whose landlords are in foreclosure.

Monthly foreclosure activity reports are available by county from RealtyTrac, a real estate information company. More detailed foreclosure case information may be available from the court system.



Floreclosure Activity for Minnehaha County

Figure 18. Monthly foreclosures in Minnehaha County, 7/2018 - 6/2019

Source: RealtyTrac Foreclosure Trends Report for Minnehaha County, https://www.realtytrac.com/statsandtrends/foreclosuretrends/sd/minnehaha-county/

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Requests for Assistance

As a real-time measure of the level of economic need in the community, consider tracking requests for assistance for food or housing. These data are available directly from providers and from the Helpline Center Network of Care, which collects data from multiple providers in a single system. For example, food pantry visits could be a useful leading indicator of changing levels of economic insecurity and homelessness. Most people who visit food pantries are not homeless, but they are generally experiencing economic insecurity; changing numbers of food pantry visits could indicate changing levels of economic insecurity and changing risk of experiencing homelessness.

Benchmarks and Performance Metrics for Ending Homelessness

Comparing Sioux Falls to other communities offers one approach to setting benchmarks around homelessness. Another approach is to set the goal of ending homelessness.

The United States Interagency Council on Homelessness (USICH) has set the goal of ending homelessness. In USICH's definition, ending homelessness means that "every community will have a systematic response in place that ensures homelessness is prevented whenever possible or is otherwise a rare, brief, or non-recurring experience."

Some communities have adopted an operational definition of ending homelessness that was developed by Community Solutions, a nonprofit organization that has led the Built for Zero (formerly Zero:2016) campaign to end homelessness. Community Solutions defines ending homelessness as reaching functional zero, when the number of people experiencing homelessness is no greater than the regular housing placement rate. In other words, the number of people experiencing homelessness at any one time represents churn, or people who are briefly homeless but quickly housed.

Ending homelessness in the community may be the ultimate objective, and measures of progress toward that goal help monitor and improve performance. Since 2009, the HEARTH Act has required CoCs to measure the performance not only of individual programs but of communities as a whole. These system performance measures track community-level progress toward making homelessness brief and rare. They measure how long homelessness lasts, how frequently people who exit homelessness return, reductions in the total number of people experiencing homelessness, and improvements in employment and income for people experiencing homelessness.

An advantage of adopting the HEARTH Act metrics is that they would provide consistent data to compare Sioux Falls with other communities. A disadvantage is that the data needed to calculate these metrics is not currently readily available for the local area.

For CoCs, HMIS data can be used to track and report on system performance measures. For Sioux Falls, compiling these data would require local providers to participate in the statewide HMIS and the state HMIS lead to extract and create local reports. Alternatively, local providers could form a local HMIS, building perhaps on the Helpline Center Network of Care infrastructure or another shared system. However, this approach would require double entry for local providers who are CoC grant recipients and already participate in the statewide HMIS. A third possible solution would be to develop data integrations and sharing agreements between the statewide HMIS and a local system so providers could participate in one but

Following is a brief summary of HEARTH Act System Performance Measures. Additional information about HEARTH Act System Performance Measures is available online at https://www.hudexchange.info/programs/coc/system-performance-measures.

Measure 1: Length of time persons remain homeless

system performance measures could be calculated across both.

Measure 2: The extent to which persons who exit homelessness to permanent housing destinations return to homelessness within 6 to 12 months or within 2 years

Measure 3: Number of people experiencing homelessness

Measure 4: Employment and income growth for homeless persons in housing programs

Measure 5: Number of people who become homeless for the first time

Measure 6: Returns to homelessness within 6 to 12 months or within 2 years and rate of successful housing placement by exiting to or retaining permanent housing (this measure is for families with children and youth defined as homeless under other federal laws)

Measure 7: Percent of people experiencing homelessness who exit to or retain permanent housing

Comparison Communities

This section presents the results of consultation with selected comparison communities. The purpose of the consultation was to learn more about whether and how other communities approach collaboration around homelessness.

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Data Collection and Analysis

ARI consulted six comparison communities as well as the Iowa-based Institute for Community Alliances (ICA) and a technical assistance provider with the Rapid Results Institute (RRI). In total, ARI conducted 11 interviews with representatives from comparison communities, ICA, and RRI during May and June, 2019. The findings presented below are based on interviews conducted with representatives from each community as well as a review of available documents for each community.

Comparison communities were selected for their demographic and geographic similarity to Sioux Falls. They were also selected to represent a diverse set of organizational arrangements for collaboration around homelessness. The table below shows the type of Continuum of Care (CoC) to which each community belongs and whether the community's collaborative coordinator is housed with a government agency or a nonprofit organization. By comparison, Sioux Falls is part of the South Dakota statewide CoC (analogous to a balance of state CoC) with the Homeless Advisory Board housed with local government, most organizationally similar to Cedar Rapids/Linn County, IA.

Brief community profiles are provided below, followed by a summary of findings from the comparison community consultations. More detailed findings from each community, as well as a list of interviewees and their organizational affiliations, can be found in the appendix.

		Where is the collaborative's coordinator housed?		
		Government	Nonprofit	
Continuum of Care membership type	Local CoC	Boise/Ada County, ID Madison/Dane County, WI	Omaha, NE Des Moines/Polk County, IA	
	Balance of State CoC	Cedar Rapids/Linn County, IA	Fort Collins, CO	

Table 8. Comparison communities by organizational structure

Community Profiles

Boise, ID - Boise/Ada County is a standalone CoC. The City of Boise is the lead agency and collaborative applicant for the CoC. CATCH, a nonprofit, is the lead agency for coordinated entry, which is branded as Our Path Home. ICA is the HMIS lead. Over the last three to four years, Boise has made a significant investment in addressing homelessness. They started much like Sioux Falls with no strategic plan or coordination around homelessness. Although they had a group charged with coordinating homeless services, it felt like they were just having meetings in order to have meetings, like they were wasting time. The city was then and still is the lead agency for the CoC in Boise/Ada County, so they are obligated per HUD/HEARTH Act to do some of this coordinating work. But that obligation neither forced them nor, at first, led them to do it well. Leadership from the mayor's office, local data reporting, and work on a new permanent supportive housing project brought the community together to reinvigorate efforts to address homelessness.

Fort Collins, CO - Fort Collins is part of the Colorado Balance of State CoC. With the other municipalities in Weld and Larimer Counties, Fort Collins has been experiencing rapid growth. The more urban environment, population change, and different economic conditions compared to the rest of the state have led Fort Collins and the surrounding areas to sense a need for more concerted, local collaboration around homelessness. To date, efforts have been led by Homeward 2020, a 10-year organization incorporated as a 501c3 to oversee initiatives and drive collaboration. United Way staff have also invested significant time in strategic planning and consultation with HUD and the Colorado Balance of State CoC to determine that forming a new Northern Colorado CoC would benefit the community. They are in the process of forming this new CoC.

Madison, **WI** - The Madison/Dane County CoC is headed by a city employee but serves the entire county. The coordinator position at the city was created two years ago. The City of Madison is the collaborative applicant for the Dane County CoC.

Omaha, **NE** - Omaha, NE is part of a three-county CoC, led by a 501c3 nonprofit organization. That nonprofit has recently grown to nearly seven full-time staff, giving it critical mass to support its own operations and fundraising. Previously, it was housed within an incubator program at the University of Nebraska - Omaha. The Omaha CoC is unusual in that it includes counties in two different states: Nebraska and Iowa (Pottawatomie County).

Des Moines, IA - The Polk County CoC is a 501c3 nonprofit that was incorporated in 2013, but the City of Des Moines remains the collaborative applicant for CoC funding. The city also works with HUD and does oversight of CoC providers. The coordinator is the only CoC employee. Her office is with the Polk County Housing Trust Fund, which gives her connection with community partners to work with. The Trust Fund also serves as fiscal agent for the CoC.

Cedar Rapids, **IA** - The Linn County Continuum of Care is not--despite its name--a HUD CoC. The group calls itself a local CoC, though it is part of the Iowa Balance of State CoC. The

group formed in 2000, and the current director, a Linn County employee, came on board in 2015 and has more recently assumed a leadership role. Linn County leads local collaboration efforts around homelessness, conducts a point-in-time count twice per year, and also conducts a more extensive survey of needs among people experiencing homelessness and low-income people in the community.

Institute for Community Alliances (ICA) - ICA is a Des Moines-based nonprofit organization that provides HMIS training and support in 13 states, including all of the states profiled in this report except for Colorado. ARI consulted with staff at ICA who serve as HMIS manager for Boise/Ada County, ID and the state of Alaska. More information about ICA, including reports and data dashboards from communities they support, can be found at <u>www.icalliances.org</u>.

Rapid Results Institute (RRI) - RRI is a Connecticut-based nonprofit consulting group that specializes in community development and systems change. ARI consulted Julie McFarland, who previously worked with the Corporation for Supportive Housing's (CSH) Consulting & Training team providing homeless system technical assistance on a national level.

Summary of Findings: Designing Successful Collaborative Organizations

The following section describes 11 recommendations distilled based on interviews and a review of available documentation from comparison communities.

1. Work to foster systems thinking, identify a shared vision, and communicate with a unified voice.

Community-level strategic planning should be the first priority of a collaborative group. Such groups add value to the community to the extent that they can bring together stakeholders from across systems to talk about homelessness and set priorities for reducing it.

In order to bring diverse stakeholders together in working toward a shared goal, a shared vision must be established. Stakeholders should be convened in order to agree on a shared vision, begin to think at a systems level, and set priorities. By establishing that basic agreement, members of the system can communicate clearly with a unified voice.

Homelessness intersects a wide range of institutions. To generate systems-level change, a broad cross-section of those institutions will need to work together. The list of institutions to invite should include both housing and homeless service providers as *well* as representatives from the courts and criminal justice system, county jails, hospitals and healthcare providers, and others who serve people experiencing homelessness. In Sioux Falls, outreach efforts could take advantage of existing collaborations, such as the planning group for a community triage center, the emerging Criminal Justice Coordinating Council, and Sioux Falls Thrive.

When building this coalition, initial meetings should focus on establishing a shared vision and priorities. A staff coordinator can assist by assembling relevant data and information about the community, but the process of developing a vision and priorities should be collaborative. Work to build consensus so that all members of the coalition feel bought in to the priorities that are

set. This strategic process should not only produce a list of priorities on paper, but should also be seen as an opportunity for participants to network and begin thinking of themselves as part of a larger system.

In addition to setting priorities, the group should be charged with communicating them clearly and developing a unified voice around homelessness. Communities report that establishing credibility, expertise, and a unified message are essential to gaining influence in the community; the group must be seen as *the* authority when it comes to homelessness. An indicator that the group is gaining influence is that external entities consult the group before implementing policies or pursuing initiatives that may affect people experiencing homelessness.

Designating a staff coordinator or board chair creates a single point of contact that external groups can easily find. That person facilitates communication in three major ways:

- Coordinating internal communication to keep stakeholders working together toward shared goals,
- Serving as a single point of contact to communicate points of consensus with external groups, and
- Serving as a broker to check in with stakeholders as new issues arise.

2. Effective lead entities have local champions and resources.

Across communities, successful collaborative efforts to address homelessness were led by local champions. In Boise, that was the mayor and his staff; in Fort Collins, a real estate attorney and United Way employee. The identity and specific position of the local champion is less important than the fact of having an individual or small core team pushing for collaborative work to happen. Local champions who are in positions of power and influence have a unique opportunity to pull together the community. Without that energy and commitment, no organizational structure can solve the problem of creating collaboration.

Once a local champion has been identified and there is community interest in and commitment to coming together to address homelessness, the next question is where to institutionalize that work. Local champions are unlikely to be able to commit to full-time organizing work. For sustainability and efficacy, communities need to invest in capacity building--someone whose job description (or part of it) is building systems, finding solutions, and weaving together data, funding, and stakeholders. Historically in Sioux Falls, the HAB coordinator was housed with Minnehaha County. However, in the communities consulted for this report, it was more typical to house a coordinator within city government or with a nonprofit organization. Coordinators should be housed where they can take advantage of shared resources (e.g., space, office support) and where they will find support for the work they are doing.

Collaboration requires resources and dedicated staff time. The consensus across communities was that the coordinator should be located within an organization that has the economy of scale necessary to provide administrative and back office support--larger, better resourced organizations will be better able to support the group's work. An advantage of locating a coordinator position within city government is that government has access to other resources--finance, backend support, and the like. In essence, the city provides a backbone for the enterprise. Several communities, including Boise and Madison, transitioned from a part-time or external coordinator to a full-time, internal city employee. They funded the positions with general funds and CoC grants. That city investment signaled interest and leadership around homelessness and helped bring other stakeholders to the table.

An alternative to housing a coordinator within local government is to establish a nonprofit organization to lead the collaborative. However, there are distinct challenges to this approach. First and foremost, smaller nonprofit organizations lack the resource support provided by being housed within a larger organization (e.g., space, infrastructure, administrative office support). A new nonprofit also must take on the work of governing the nonprofit itself, which can lead to confusion for board members who are asked to do the work of a typical governing board *and* the coordination work for which the organization was set up. Another option is to designate an existing nonprofit (e.g., a service provider) as the lead, but that may generate perceived conflicts of interest.

Those communities that housed coordinator positions in separate nonprofits typically did so for political reasons (i.e., the nonprofit was perceived as more independent and neutral), and they recognized the challenges and limitations incurred as a result. They also recognized that they were able to use a nonprofit structure only because they could realize economies of scale--in one case, because the nonprofit employed around seven people full-time to do administrative work and fundraising, and in another because the nonprofit was nested within a larger organization that served as fiscal agent and provided space and office support.

3. Membership should be broad and diverse.

Because homelessness and its effects cut across the community, collaboration must be crosscutting as well. Collaborative groups should be broad, diverse, and cross-sector. In identifying stakeholders to include, identify the strong systems in the community that have a mutual interest in addressing homelessness. Systems that are strong have the ability to bring resources to the table; systems with a mutual interest in addressing homelessness have the motivation to bring resources to the table.

In comparison communities, systems represented in collaborative groups included public housing authorities, city planners, healthcare providers, behavioral health providers, law enforcement, emergency services, property managers, housing developers, foundations and other funders, human services providers, K-12 and higher education, faith community leaders, and people with recent lived experience of homelessness. In choosing homeless services providers, aim to include a couple providers who represent vastly different populations. In

identifying individual representatives, recruit people at the leadership level--associate directors or the equivalent. The goal is to bring these individuals together for higher level planning work, set specific short-term goals, then delegate to workgroups for more targeted work.

4. Strategic plans should be short and sweet.

Common across comparison communities, collaborative groups lead strategic planning to address homelessness. Typically, they oversee a needs assessment and gaps analysis to identify community needs, bring stakeholders together to set priorities, then collect data and report on progress toward goals.

Strategic plans should be short, simple, and accessible. Aim for inspirational, not overwhelming. Too often, 10-year plans went unfulfilled because the goals seemed unachievable and distant or because the plans themselves were never read. Goals are only useful when they drive daily work. Instead of a 10-year plan, set one-year objectives and three-year goals. Identify three or four initiatives to focus on.

Although initiatives should be grounded in data and evidence, they should be presented simply. Boise, for example, uses a three-page plan to present four initiatives. Create documents that communicate strategic priorities in a concise and inspirational way. The language used to communicate goals should be inspirational, not doom-and-gloom. Plans are more likely to attract community support and investment when they seem achievable and when problems do not seem insurmountable. These documents not only commit the collaboration to a shared vision; they can also be used to communicate that vision to the community and to attract additional investment.

Efforts to address homelessness should be coordinated with other community plans and collaborative groups and tied to mainstream housing and community development activities. At a minimum, the collaborative group should be consulted on the Consolidated Plan for CDBG and HOME funds. If local government allocates general funds toward homelessness, the group should also be consulted on how those funds can be woven together with other available funding streams to support shared priorities around homelessness. In addition to helping direct funds toward strategic priorities, this consultative process can bolster other organizations' grant applications with data or letters of support. That advisory capacity could extend to advising on changes to local ordinances or policies where they could affect people experiencing homelessness.

Mechanisms to formalize these connections vary. Communities use shared board membership, reserved seats, and formal consultation, or periodic summits to connect diverse efforts. For example, in Madison, the coordinator's job description includes work on the Consolidated Plan; in Omaha, the collaboration group splits ESG administration costs with the city and helps evaluate recipients but consults on the Consolidated Plan pro bono out of shared interest in grant allocations. In Omaha, the collaborative group also has a standing bi-monthly meeting with the city planning department to discuss homelessness and housing. In Cedar Rapids, the

city designates a spot for a member of the collaboration group on all city boards related to housing. Annual summits can also bring together stakeholders and policymakers to keep all informed about existing initiatives. These linkages help ensure that the collaboration group's strategic plans align with other community plans related to housing and homelessness.

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5. Use focal projects to spur action.

Focal projects can focus attention and launch collaboration around homelessness. To inspire action, consider a project that can deliver an early win, demonstrating success from collaboration. A concrete project brings people together around clear goals and objectives. However, project-based collaboration is typically short-lived. For long-term sustainability, organizational infrastructure needs to be put in place.

Commonly, projects focus on a small defined population such as veterans, youth, or chronic homeless. In many places, that population is a small group of super utilizers--people who are frequent, well known users of emergency medical services, law enforcement, emergency shelters, or other community services. For example, in Boise, work on a permanent supportive housing (PSH) project for super utilizers of community services brought together city leaders with county and hospital leaders, all with a shared interest in reducing the cost of serving super utilizers. In Fort Collins, work on a housing first initiative reinvigorated collaboration. Several communities recommended the Corporation for Supportive Housing's FUSE (Frequent Utilizer System Engagement) program, which provides technical assistance and support in developing programs to serve this population.

Although projects were the most commonly cited spur to action, other things could also kickstart collaboration. Additional spurs to action include new group membership, new or renewed commitment from local government, new funding source, new champion in a position of power and visibility, or a new branding and messaging campaign.

6. Clearly define roles and responsibilities.

Several comparison communities had suffered disengaged boards with loose charters and voluntary membership. By revamping governance structure with more clearly defined expectations, communities like Boise were able to increase engagement and efficacy.

The collaboration group's founding documents should clearly outline roles and responsibilities for participating organizations, group members, and staff. Upon joining the group, members should be provided an orientation during which expectations for participation are made explicit.

Typically, comparison communities structured their collaboration groups as a single executive committee with several standing subcommittees or ad hoc work groups. The executive committee can be given flexibility to form additional advisory work groups as needed, for example, to oversee development of a new housing project. Sample governance charters and organizational charts can be found in the appendix.

The organization should be staffed for the level of work it needs to accomplish. Investing more in dedicated staff will enable the group to accomplish more, provided expectations and objectives are clearly defined. A staff coordinator's job description could be limited to minimally keep the board running and typing minutes or could include a range of responsibilities such as fundraising, leading strategic and community planning (though planning itself should be collaborative and inclusive), monitoring and reporting on progress toward strategic goals, researching and designing interventions, and external communications. Sample job descriptions have been included in the appendix.

7. Delegate to workgroups.

A well-designed subcommittee and workgroup structure allow the executive committee to focus on high level, strategic priorities and delegate more detailed work. The executive committee's membership should be broad and inclusive, cutting across community systems, not limited to housing and homelessness services providers. A broad group like that is well positioned to undertake strategic community planning, but not well equipped to work out the details of new interventions. Details are best left to workgroups.

The number and type of workgroups varied by community, but common examples include workgroups for data and HMIS, coordinated entry, a providers forum, public awareness and advocacy, healthcare, youth or other target population, or a funders forum.

Some workgroups may overlap with other collaborative efforts in a community. In that case, a collaboration need not duplicate efforts. Instead, shared workgroups can serve multiple community efforts. For example, in Des Moines, the collaboration group has a standing Housing Committee that is also a workgroup under the United Way's collective impact initiative. In Sioux Falls, several existing groups might be approached about their interest in integrating with a collaboration group (e.g., the CARE Team, CART, Thrive Housing Action Team, triage planning group, the Sioux Empire Homeless Coalition, Criminal Justice Coordinating Council, Sioux Empire Leadership Council, Sioux Empire Housing Partnership).

A providers workgroup should focus on networking and training. Information is a commodity, and meetings focused around sharing information make participation valuable and engagement more likely. Communities where providers actively participate tend to structure meetings around learning opportunities, collaborative time, and training. Participation can also be pitched to individual participants as a professional development opportunity to build personal leadership skills. Participating agencies might also consider amending job descriptions to include collaborative committee work as part of service providers' roles. In Madison, the CoC lead has encouraged this move to show employees that their employers value their time and effort spent on collaborative work.

The entire membership--executive committees and workgroups--can come together in periodic meetings. These large meetings are useful for workgroups to give updates, for sharing education and awareness about available resources and data, and to renew commitment to

areas of consensus and shared vision. However, such large meetings make detailed work difficult; agendas should focus on information sharing, approving proposals from committees, or strategic planning.

8. Prioritize local data collection, management, and reporting.

Prioritize local data access and reporting. Local data are necessary to tailor interventions and track performance on a local scale. Most homeless management information systems (HMIS) run at a state or Continuum of Care (CoC) level. For localities such as Sioux Falls that do not have their own local HMIS, obtaining local data can be difficult. Localities may choose to break up a statewide data system or develop a parallel local system. For example, Idaho had a statewide HMIS implementation, but when the HMIS lead failed to accommodate local reporting requests, the statewide system was broken up. In Fort Collins, which is part of Colorado's statewide HMIS, additional local data are being collected to augment what they are able to receive from the state. Alternatively, a locality such as Sioux Falls could work with the state to build capacity within a statewide system for local reporting. In Alaska, the Institute for Community Alliances (ICA) manages the statewide HMIS and provides local reporting for municipalities that are part of the Balance of State CoC.

Useful data reported clearly motivates action. Both bed use HMIS data and coordinated entry data provide real-time information about community needs and capacity. But in order for that data to be useful, it must be of high quality and communicated clearly. Data dashboarding and visualization can help communicate data clearly. Choosing a few high impact metrics can also keep reports focused. In reporting data, emphasize community-level outcomes, such as those required by the HEARTH Act: reduction in number of people becoming homeless, reduction in length of time people are homeless, increase in number of people exiting to permanent housing, reduction in number of people returning to homelessness, and increases in jobs and income. By adopting the HEARTH Act metrics, local data will be comparable to data from CoCs across the country. Any additional metrics should be focused on tracking performance toward strategic goals and maintaining accountability.

Regardless of whether data comes from a statewide HMIS or local data collection, receiving quality data from all providers is crucial. The collaboration group should monitor and benchmark data quality and completeness. Providers who receive federal funds are obligated to participate in an HMIS; for those who do not, collaboration groups need to create an alternative incentive to report data. Data reporting can provide that incentive. ICA uses data quality reports to give feedback on which providers are submitting complete and accurate data and which need to make improvements. In comparison communities that work with ICA, data dashboards and visualizations have proven to be a powerful incentive to get providers on the HMIS.

9. Money talks, so involve funders in the collaboration.

Across comparison communities, there was a general consensus that when it comes to securing commitment to collaboration, money talks. Funds can be used either as a carrot or a

stick to incentivize collaboration, data sharing, HMIS participation, or other desired outcomes. In some cases, collaboration groups have funds of their own that they can direct. More commonly, groups work with funders in the community to ensure funding priorities are in line with the group's strategic priorities.

Collaboration groups that exercise more-or-less direct control over funding typically tap CoC planning grants, city general funds, or federal grants. They may use these funding streams to help pay for operations and the data collection necessary to support collaboration. For example, in Boise, the city not only uses CDBG and general funds to incentivize collaboration; they have also allocated general funds to pay for HMIS startup costs and ongoing fees to get more providers on the system. This financial support makes it possible for providers to join and broadcasts the message that collaboration and data tracking are priorities.

Some collaboration groups engage in fundraising. To augment the capacity of local or federal government funds, they seek out grants, contributions, or corporate gifts in cash or in kind. Often, contributions are tied to specific projects. For example, groups in Boise and Fort Collins have worked to secure funding from hospital systems for permanent supportive house projects. The hospitals have committed funds to these projects in the hope that housing super utilizers will decrease unnecessary emergency department use and reduce costs to the hospitals. In Fort Collins, setting up a local collaborative and developing a branded identity for it has also helped appeal to donors, who like to know their dollars will stay local. In Des Moines, developing a strategic plan and means for data collection have helped the collaboration coordinator communicate funding priorities and plans for evaluation and accountability to major foundations in order to secure grant funding.

Collaborations can also leverage available community funding by advising funders on strategic priorities, without the collaboration group itself soliciting any funds. As a mechanism for doing so, some collaborations find success in involving funders on the collaboration's executive board or in a funders forum subcommittee. By bringing funders together, they keep them informed of community needs and gaps. Ideally, these efforts unify strategic priorities and funding priorities community-wide. For funders, coming together can be a more effective and streamlined way to achieve community impact than a piecemeal approach to grantmaking. In Boise, for example, funders forum for grant-funded work around homelessness. In Omaha, the collaboration group is in talks with funders not to create a single application but at least to agree on some standardized priorities, questions, outcomes, or formats for grant applications. In several large cities, such as Houston and Los Angeles, the funders forum idea has been implemented to wide acclaim under the Funders Together to End Homelessness model.

A collaboration group is uniquely positioned to braid together multiple funding sources. Collaboration groups have a more holistic view of needs and gaps across the community, and they can help providers and funders braid together federal, state, local, and private funding

for maximum impact. Across comparison communities, community efforts around homelessness are typically funded by the city, county, United Way, and federal grants (including Continuum of Care, ESG, and CDBG). In some communities, housing trust funds, special state funds (e.g., marijuana tax dollars in Colorado), or local foundations play a significant role. In several communities, the healthcare sector is increasing its investment in addressing homelessness, typically by contributing to permanent supportive housing projects by funding or providing in-kind services.

10. Plan for communication and community education.

Build public engagement through communication in a proactive, not reactive, way. Some communities face a vocal and oppositional advocacy community, whereas others have little advocacy around homelessness happening in the community. In either case, a collaboration group can drive the conversation around homelessness by taking on education and community engagement. Communication should be intentional and driven by a communication plan. That plan should center around points of consensus and a positive shared vision. In some communities, such as Boise, they have branded the Continuum of Care and coordinated entry (e.g., Our Path Home) and developed a unified message so that efforts are visible and recognizable in the community. Several communities incorporate annual community summits into their communication and education plan, and all report data (most through a dashboard).

11. Invest in relationships and trust.

Collaborative work requires relationships and trust. Across comparison communities, interviewees stressed the importance of investing in relationships. Preexisting relationships can help foster trust--for example, when a provider moves into a coordinator role and is able to effectively engage providers because of a longstanding relationship. Relationships can also be built deliberately through one-on-one coffees or happy hours, facilitated communication and trust building workshops, and frequent face-to-face meetings. Several communities said happy hours and coffees were major investments that led to identifying champions and knitting together a group of committed leaders around addressing homelessness.

Geographical nearness and preexisting relationships can bring social capital to a group, but collaborations must work intentionally to overcome group members' tendencies to bite their tongues during a meeting and wait for the meeting after the meeting to sow dissent. In Omaha, for instance, the group is in its second year of facilitated sessions to increase participation, reflection, and open disagreement to build trust and encourage communication. In Boise, transparency--posting minutes, sharing data dashboards--has been crucial to building trust.

Recommendations

This section presents seven recommendations for moving forward from the current Homeless Advisory Board. These recommendations assume that the community is committed to furthering collaboration to address homelessness. Recommendations are based on findings from a review of the literature, consultation with comparison communities, and analysis of local data, as presented previously in this report.

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Recommendation 1: Identify and activate local champion(s).

Identify an individual or small core team of local champions who can push for collaborative work and progress in addressing homelessness. Ideally, champions will be community influencers in positions of power who are bridge builders and can pull together the community. Champions may not necessarily come from the human services sector, and they may not necessarily be chairs or coordinators of a collaborative board convened to address homelessness. Rather, they should be individuals who can marshal support or resources from across community systems.

Recommendation 2: Undertake strategic planning to establish a shared vision and set priorities for the next one to three years.

Convene a broad, inclusive, cross-sector group (see Recommendation 3) for strategic planning around homelessness. The process of strategic planning should be collaborative in order to establish buy-in. The goal is not simply to produce a document but to work through the difficult process of reaching a community consensus on priorities. The strategic planning process might be facilitated by a coordinator or consultant, so long as the facilitator focuses on establishing consensus among participants.

Strategic planning should embrace these objectives:

- Establish a shared vision for addressing homelessness. Outline a focused mission around homelessness, recognizing that addressing this narrow mission requires broad involvement across sectors that touch homelessness.
- Set a manageable number of short-term goals and objectives: Identify three to four initiatives and set one-year objectives and three-year goals for those initiatives.
- Plan for accountability. Objectives and goals should be matched to performance measures, have timelines, identify bodies responsible for shepherding each strategy, and identify anticipated funding sources.
- Consider focusing on a specific population or developing a pilot project in order to spur collaboration around a tangible project. Data in this report suggest focusing on increasing the supply of permanent housing (versus emergency shelter). A pilot project might also build off current community initiatives (e.g., triage center).

Recommendation 3: Create a structure that supports the type of work the community wants accomplished.

In designing organizational structures for collaboration around homelessness, set up leadership, decision-making, and management structure that fit the community's anticipated goals and processes. The decision about the type and level of work that needs to be done is ultimately a political decision. The following recommendations assume that there is a desire for more robust collaboration to address homelessness.

3A: Invest in capacity building by designating a point person to coordinate collaborative work and building relationships.

Designate someone whose job is system change, a coordinator role. This person serves as the glue for collaboration. Their role should include facilitating, stimulating, reminding, organizing, assessing progress, bringing in new players, and keeping the many actors moving in the right direction. The coordinator's role is not to lead or direct as an individual, but to establish and move forward a shared vision and to keep diverse actors working toward goals and objectives set in the strategic plan. Together with local champions, the coordinator will need to invest time and resources in establishing relationships and building trust across the community.

The coordinator could be a full-time or part-time position that includes other duties related to housing and homelessness within a host organization. In designing the coordinator position, staff for the level of work the group needs to accomplish. Not only does the coordinator position itself provide support, but the investment into creating and maintaining that position signals commitment that can help bring others to the table.

3B: Locate the coordinator within an organization with sufficient bandwidth.

The coordinator position should be housed within an organization that has the economy of scale to realize resource efficiencies and provide back office support. The host organization should be perceived as neutral--that is, capable of advancing a community-wide agenda, not the agenda of a particular provider or subset of the community.

3C: Broaden board membership.

Homelessness intersects a wide range of institutions. To generate systems-level change, a collaborative board must bring together a broad cross-section of institutions: housing and homeless service providers, representatives from courts and criminal justice, hospitals and healthcare, businesses, education, local government, faith communities, and more. In identifying potential members to recruit, consider the following groups:

- Strong sectors with a mutual interest in addressing homelessness--those that are able and willing to bring resources to the table (e.g., healthcare, downtown businesses)
- County, city, or state agencies beyond homeless services (e.g., social services, labor). These agencies are already engaged in high-level, broader-scale planning and coordination that can help connect systems.

• Stakeholders beyond the "usual suspects"--consider business associations, business improvement districts, school districts and higher education, faith communities.

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- Members of the public, both people with lived experience of homelessness and volunteers
- Philanthropists and funders (either as general members or on a funders forum as described below)

Representatives should be leaders in organizations (e.g., associate directors) who have decision-making power.

3D: Define member expectations and distribute responsibilities: charge the board with high-level planning and accountability and delegate details to workgroups.

A large, inclusive board (as described above) is advantageous for developing a shared vision and strategic plan but unwieldy for the detailed work of implementing that plan. Charge the large board with strategic planning and accountability; delegate day-to-day work to workgroups or subcommittees.

Plenary meetings of the board should be reserved for making decisions on proposals sent up from workgroups, sharing workgroup updates and information about available resources, providing reports of data and performance metrics, and renewing commitment to areas of consensus and shared vision.

The work delegated to workgroups should be tied to the goals and objectives set forth in the strategic plan. Suggested workgroups or standing subcommittees might include one or more of the following:

- Providers Forum Focus on education and training to make the time meaningful for participants. Structure meetings around learning opportunities, collaborative time, and training or professional development. Consider coordinating with existing provider forums or coalitions.
- Data Collect and report on community needs and performance metrics. Work with existing data systems where possible (i.e., the Helpline Center Network of Care and South Dakota HMIS). Develop visualizations, dashboards, annual reports, or other mechanisms for sharing data with the public. Could be charged with overseeing the point-in-time count, annual needs assessment, or other data collection efforts as needed.
- Community Education and Awareness Lead public education and advocacy initiatives, such as hunger and homelessness awareness month. Could also be charged with working on policy review or recommendations at the local, state, or federal levels.

- Coordinated Entry Work to align local processes with South Dakota Statewide CoC coordinated entry system, and work with existing local teams focused on coordinating access to housing and services.
- Housing Focus on the intersection of homelessness and affordable housing, including landlord outreach, landlord-tenant mediation, or eviction prevention. Consider coordinating with existing housing-focused groups.
- Health Focus on the intersection of homelessness and health, including behavioral health. Consider coordinating with existing healthcare-focuses groups and initiatives, including the triage center.
- Funders Forum Convene funders--foundations, philanthropists, businesses, and others-to work on aligning funder priorities with the board's strategic priorities around homelessness. Could also work on a streamlined application or performance measurement process for grants related to homelessness.
- Ad hoc committees as needed for projects or initiatives identified in the strategic plan

Governing documents should clearly outline the roles and responsibilities for participating organizations, board and workgroup members, and coordinating staff. A coordinator or other designated person should carry out board management, including providing an orientation to new board members, keeping minutes, sharing agendas and materials ahead of meetings, and maintaining public-facing website or other means of sharing information with the public.

Recommendation 4: Extend collaboration and coordination beyond the board.

Convening a large, inclusive, cross-sector board is one mechanism to build collaboration across community systems. A second, complementary mechanism is to integrate the collaborative board's work with other collaborative organizations and with mainstream housing and community development activities in the Sioux Falls area.

4A: Integrate with other collaborative organizations as possible.

A collaborative board focused on addressing homelessness will intersect a wide variety of community systems. Though the board should maintain a focus on the shared vision and mission agreed to during strategic planning, some of its work and interests will necessarily intersect with the work of existing groups in the community.

To avoid duplication of effort, identify opportunities to weave together the board and other collaborative organizations. Where proposed workgroups overlap with other collaborative efforts in the community, for instance, consider approaching those collaboratives about connecting.

Building connections among collaboratives can happen in a variety of ways. The form that connection takes should be the form that works best for both groups. In some cases, each group might send a representative to the other to participate and share updates; in others, one group might double as a workgroup for another.

In the Sioux Falls area, potential collaborative partners include the Thrive Housing Action Team, Community Triage Center planning group, CARE Team, Sioux Empire Homeless Coalition, Criminal Justice Coordinating Council, Sioux Empire Leadership Council, and Sioux Empire Housing Partnership.

4B: Connect to mainstream housing and community development activities as possible. Although the causes of homelessness are diverse, at its root, homelessness is a lack of housing. From the federal level on down, supports for people experiencing homelessness often operate separately from the rest of the social safety net, including mainstream housing assistance. Integrating the two systems would help pave a smoother path from homelessness to housing (Burnes 2016).

In the Sioux Falls area, this would mean integrating work on homelessness with mainstream housing and community development activities such as the City's Consolidated Plan for CDBG and HOME funds and the ongoing work of the Sioux Falls Housing and Redevelopment Commission. To instantiate those connections, the group could exchange representatives with City housing and planning boards and the housing commission.

Recommendation 5: Prioritize local data collection and reporting.

Quality local data are key to identifying community needs and measuring progress toward addressing them. Data collected should not be exhaustive, but rather prioritized and tied to the board's strategic plan. Data should be collected and presented in a way that helps answer questions, make decisions, and promote action and accountability.

As the strategic plan is developed, each goal and objective should be tied to data elements that can be collected and will be useful in measuring the impact and effectiveness of initiatives. Data should focus on measuring performance outcomes, not only outputs. That is, for instance, measure the time it takes someone to move from emergency shelter to permanent housing (an outcome), not just the number of people served by an emergency shelter. For comparability to other communities, consider adopting the HEARTH Act performance measures. See the section Data: Comparisons, Benchmarks, and Trends in this report for further discussion of recommended data elements.

Data collection should strive for efficiency and avoid duplication of effort wherever possible. Providers in the Sioux Falls area already collect and report data to the statewide HMIS and the local Helpline Center Network of Care (HCNC). Among the top data priorities for the board should be integrating data collection and reporting with the HMIS and HCNC and encouraging all providers to report data in a way that makes it possible to report adopted metrics. The board should also monitor data quality and completeness. To encourage

participation, identify incentives or supports to providers to overcome barriers (e.g., technology integrations, funding support for software or hardware, etc.).

Create a public data dashboard. The dashboard will not only support public awareness and education efforts (described below), but will also increase transparency and accountability.

Depending on the capacity of the board and coordinator, it may be more efficient to contract for data collection and reporting. Other communities have contracted with nonprofit research organizations or universities. Locating data and reporting with an objective, research focused institution could build trust and public awareness around homelessness with a voice that does not speak for government or service providers directly.

Recommendation 6: Communicate strategies and raise public awareness.

A robust communication plan serves several purposes. Sharing the strategic plan and data with the public promotes accountability. Raising public awareness could also increase public or philanthropic investment in addressing homelessness. In particular, communicating a shared vision around community needs and priorities could help align community resources in support of the board's strategic plan.

6A: Communicate the strategic plan and progress toward goals to the public.

The board should aim to build public engagement through a proactive communication plan that allows the group to drive the conversation around homelessness. A communication plan should include the following elements:

- Inform the public of community needs around homelessness using high quality local data;
- Communicate the board's shared vision and strategic goals and objectives;
- Publicize progress toward meeting goals and objectives and changes in performance measures; and
- Build the board's credibility by becoming the recognized center for information and activity around homelessness.

In support of communication plan, the board should rename and rebrand the Homeless Advisory Board and strategic plan, taking advantage of the opportunity to increase the board's visibility in the community. A branded website would promote the idea that the board is a community-owned, collaborative group, not the agent of a single government entity or provider.

To promote transparency and accountability, and to reinforce the board's identity as the authority on homelessness, the website can be used to share the strategic plan, data dashboards, and board minutes, agendas, and reports.

6B: Communicate priorities to funders and philanthropists.

The board should communicate its strategic priorities to funders and philanthropists and encourage them to align their funding priorities and reporting requirements around homelessness. Mechanisms for opening communication with funders are diverse. One mechanism would be inviting funders to participate as general members of the board.

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The board could also work with funders to establish a funders forum as a workgroup or associated entity. A funders forum would bring together government, philanthropic, and other private funders with an interest in addressing homelessness. The forum would allow funders to establish a shared vision and goals aligned with the board's strategic plan, find continuous opportunities for learning, focus on evidence-based practices, and build up funders' catalytic role to create change in the community. In other communities, funders forums have successfully leveraged resources through shared or aligned funding models (Miskey 2016).

Recommendation 7: Explore available opportunities for technical assistance.

Should the Sioux Falls community embark on the journey toward more concerted collaboration around homelessness, all involved can continue to learn from neighboring communities and experts in the field. There are a variety of grants and technical assistance opportunities available, depending on the objectives identified in the board's strategic plan. The following three opportunities were frequently mentioned by comparison communities consulted for this report:

First, HUD offers technical assistance for capacity building to any direct recipient of HUD funds. The technical assistance program is designed to provide resources, tools, and support to improve the design and delivery of programs, e.g. by strengthening governance and structures for collaboration around housing and homelessness. More information and the request form can be found at <u>https://www.hudexchange.info/program-support/technical-assistance/</u>.

Second, the Corporation for Supportive Housing (CSH) Frequent Users System Engagement (FUSE) initiative helps communities break the cycle of incarceration and homelessness among individuals with complex behavioral health challenges who are the highest users of jails, homeless shelters, and other crisis service systems. This program could offer one model for bridging work on the Community Triage Center and collaboration around homelessness. More information can be found at https://www.csh.org/fuse/.

Funders Together to End Homelessness is a national network of funders supporting strategic, innovative, and effective solutions to homelessness. In addition to connecting funders to national initiatives, Funders Together supports communities in convening local funders networks and supports local funders networks with tailored learning that allows philanthropy to consider the role in best practices and emerging topics around preventing and ending homelessness. More information can be found at http://www.funderstogether.org/.

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Appendix

List of Comparison Community Interviewees and Organizational Affiliations

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Stephanie Day, Executive Director, CATCH, Boise, ID - CATCH is the lead agency for Boise's coordinated entry program, which is called Our Path Home. Before joining CATCH, Stephanie worked for the City of Boise, and before that, for the Salvation Army as a homeless services provider.

Maureen Brewer, Boise/Ada County CoC Director, Boise, ID - Maureen is employed by the City of Boise, the CoC's lead agency and collaborative applicant.

Alissa Parrish, HMIS Manager for Boise and Alaska, Institute for Community Alliances, Des Moines, IA - Before joining ICA as an HMIS manager, Alissa worked with an emergency shelter in Des Moines.

Diana Lachiondo, Commissioner, Ada County, Boise, ID - Before being elected to the Ada County Board of Commissioners in 2018, Diana was the Director of Community Partnerships in the mayor's office for the City of Boise. In that role, she launched the Housing and Homelessness Roundtable in 2015.

Marla Sutherland, Director, Homeward Alliance, Fort Collins, CO - Homeward Alliance is a nonprofit organization in Fort Collins. It houses the city's Housing First Initiative and data dashboard.

Torrie Kopp Mueller, Coordinator, Dane County CoC, Madison, WI - Torrie is employed by the City of Madison, the collaborative applicant for the Dane County CoC. Her position was created two years ago.

Randy McCoy, Executive Director, MAACH, Omaha, NE - MAACH, a nonprofit organization, is the collaborative applicant and lead agency of the Omaha CoC. Before joining MAACH, Randy worked with the Springfield, MO area CoC.

Angie Arthur, Executive Director, Polk County CoC, Des Moines, IA - Angie is the sole employee of the Polk County CoC, a nonprofit organization. Her office is located with the Polk County Housing Trust Fund, which serves as the fiscal agent for the nonprofit, and she works closely with the City of Des Moines, which remains the collaborative applicant for the CoC.

Ashley Balius, Director, Linn County Continuum of Care, Cedar Rapids, IA - In addition to her work as the director of the Linn County Continuum of Care, Ashley is the Community Outreach & Assistance Director for Linn County Community Services.

Melanie Falvo, Director of Community Impact, United Way of Weld County, Greeley, CO - In addition to her work with the United Way, Melanie has led research into and planning around forming a new Northern Colorado CoC by Weld and Larimer Counties.

74

Julie McFarland, Catalyst, Rapid Results Institute - Before joining RRI, Julie previously worked with the Corporation for Supportive Housing's (CSH) Consulting & Training team providing homeless system technical assistance on a national level. Before that, she worked on coordinated entry in the Seattle area.

Detailed Community Descriptions

This appendix section contains detailed descriptions of the organizational structure and current efforts toward collaboration to address homelessness in six comparison cities. It also contains details from interviews with an HMIS manager with the Institute for Community Alliances and a consultant with the Rapid Results Institute.

Institute for Community Alliances

The Institute for Community Alliances (ICA) is based in Des Moines, IA. They serve as the HMIS manager for around 30 CoCs in about 12 states. In addition to fulfilling federal data collection and reporting requirements, ICA works with CoCs to monitor and benchmark data quality, to improve data, and to translate their data into action.

To improve data quality, ICA helps CoCs monitor data collection. One of the products ICA provides is a data completeness scorecard. It helps CoCs benchmark where they are in terms of getting data into the HMIS, and it can be used to gently prod or shame providers into providing better, more complete data.

ICA works with communities to translate data into action. Data can inform and motivate action, and quality reporting motivates data collection. For communities that work with ICA, dashboarding and data visualization motivated many to get on the HMIS. Providers feel they are able to show the impact they are having.

ICA's dedicated expertise in HMIS management and reporting allows them to be responsive to local reporting needs, whether municipalities are standalone CoCs or part of statewide CoCs. Local data is key to effectively addressing homelessness, but statewide HMIS managers do not always have the capacity to manage local data requests or reporting. In Alaska, for example, ICA found the CoCs needed codified strategic plans and a way to prioritize report requests for localities and providers. The statewide HMIS was not able to manage reporting needs. Now, with ICA running the HMIS, they are able to provide local reporting for municipalities that are part of the Balance of State CoC.

Boise, ID

Boise/Ada County is a HUD CoC. The City of Boise is the lead agency and collaborative applicant for the CoC. CATCH, a nonprofit, is the lead agency for coordinated entry, which is branded as Our Path Home. ICA is the HMIS lead.

Though Boise stands out among comparison cities for their energy around collaboration, stakeholders there reported Boise has been on a journey over the last three to four years. They started much like Sioux Falls with no strategic plan or coordination around homelessness.

Although they had a group charged with coordinating homeless services, it felt like they were just having meetings in order to have meetings, like they were wasting time. The city was then and still is the lead agency for the CoC in Boise/Ada County, so they are obligated per HUD/HEARTH Act to do some collaboration work. But that obligation neither forced them nor, at first, led them to do it well.

Leadership from the mayor's office kickstarted current collaboration efforts. The mayor's office remains highly involved, and the city funds 1 FTE within city government for a CoC Director to lead coordination. In the past, the CoC contracted with an external consultant to pull together its executive committee and working groups, but it was not working well. There was little interest, commitment, or leadership. The city decided to commit general funds for a full-time position within the city government. The hope was that the community would come together and this person would serve as a leader.

Before the CoC Director position was created, leaders had considered deputizing a nonprofit, but they ultimately decided government was the right home for homelessness coordination because government has access to other resources--finance, backend support, etc. Under the current organizational structure, the city provides a backbone for the enterprise--*but* this has hinged on the mayor's support. Locating a coordinator position within a well-resourced organization does not guarantee support without backing from a local champion.

In addition to the mayor's role as champion, Boise has benefited from the work of the mayor's Director of Partnerships, a relationship builder with a background in fundraising. The Director of Partnerships has worked to bring together partners and funders for new projects (e.g., a permanent supportive housing project). These efforts have the mayor's backing, and the mayor's office continues to dedicate staff time to addressing homelessness and proposing new interventions. Having these strong advocates has not only brought the city along, but helped recruit and build up collaborators.

Notably, there is a legacy of animosity between Boise's city government and its providers. That tension came to a head in a lawsuit years ago over alleged city mismanagement of a shelter. The CoC Director immediately prior to the current one had worked for nearly a decade as a service provider and had preexisting relationships with providers, which helped secure trust and buy-in for renewed city efforts. A commitment to increased transparency has helped, too: posting minutes, sharing data dashboards, etc.

Like Sioux Falls, Boise is a city where providers and people in the homelessness services space are geographically near one another and know each other or have been able to get to know one another. Face-to-face meetings of local providers help reinforce relationships in a way that conference calls, annual meetings, or representatives and delegates may fail to do for statewide groups. The ability for all involved to be physically present is an important advantage of local collaborative work.

About five years ago, when Boise began its journey toward reinvigorated collaboration, they were simultaneously working on setting up coordinated entry, taking control of their HMIS data, and taking ownership of the CoC lead position. The city hired a CoC Director who led outreach to a variety of institutions that intersect homelessness, including criminal justice, jails, hospitals, etc. The intent (and outcome) was to build ground-level investment in confronting homelessness. This work pulled together diverse stakeholders to agree on a shared vision and think at a systems level. It also brought providers together in a more focused way to solve some of their own systems problems. To start, they held brainstorming and visioning sessions with flipcharts and sticky notes. They were already on the path to thinking about coordinated entry when the HUD mandate come into effect. They were a broad-based group to ensure providers and others felt they had input into the system that was set up. The key was to help providers see themselves as part of a larger system and to raise awareness.

Around that time, the Boise CoC overhauled its governance. It refreshed the membership of the executive committee, which had been composed of the same people for a long time and had become non-functional. So Boise brought in new members, which reinvigorated the work. Boise used to have many working groups with loose charters and voluntary membership where nothing got done. The CoC revamped the governance structure with tighter bounds on executive membership. They retired all working groups and formed around four standing subcommittees to replace them. Now, all members are appointed, and all subcommittees are staffed and have a designated chair. Subcommittees include (a) planning and development, (b) score and rank for NOFAs, (c) data and performance for HMIS, and (d) coordinated entry. The group has the flexibility to form advisory work groups as needed. For example, they formed a New Path advisory committee to oversee development of the new PSH project, and there is a Valor Point advisory committee for a veterans project.

Boise has made a concerted effort to simplify their strategic plans. When the city created the CoC Director position, Boise had, on paper, a 10-year plan, but it was not a living document: few people had read it, referred to it, or used it to guide intentional work. Now, Boise's work around homelessness is guided by a three-page plan with four initiatives--a short, simple, accessible plan with energy behind it.

Tying HUD-backed work together across housing and homelessness makes sense from a city administration and reporting perspective since the city has to provide feedback to HUD in multiple areas. In Boise, homelessness is connected to mainstream housing and community development activities by staff co-located in city government. Both the CoC and CDBG are run through the city's Housing Department, though by different people. The CoC Director has been invited to join the scoring and ranking committee and to sit in on the scoring and review of CDBG applications, where she was able to answer questions from citizen reviewers about programs and clarify elements in applications that might have otherwise led them to discount an applicant. As the Boise CoC has improved its HMIS and data collection, having a strong and well-coordinated CoC with excellent data is beneficial to city-wide HUD reporting efforts.

To encourage participation in collaboration, Boise leaders have structured meetings to share information, give time for networking and training, and generally to make participation valuable. Now, instead of being perceived as a waste of time, meetings are set up as provider forums that offer a learning opportunity and collaborative time plus a training opportunity quarterly.

The Boise CoC and City of Boise have also used funding structures to encourage collaboration in a variety of ways. Once the city stepped up to take the lead with its pocket book, others were more willing to come along. In addition to supporting 1 FTE for the CoC Director, the city also has an HMIS grant and covers fees for the HMIS contract now so that providers do not have to pay. The city also uses CDBG and general funds to incentivize collaboration. They give providers the message that if they want access to grant dollars, they must use the HMIS and performance metrics. The Rescue Mission shelters, which do not receive CoC funds, were most reluctant to join the effort, but eventually even they joined in collaboration meetings and are now talking about using the HMIS. Boise leaders used the carrot of HMIS funding and stick of convincing funders such as the United Way and hospital systems to threaten to pull funding from providers that did not participate with the CoC and HMIS. Faced by the prospect of losing funding, reluctant providers are coming around. Those funders in question included the United Way and the hospital systems. In this effort, Boise looked to Houston as a model because their funding community has become very strategic around homelessness and because Houston as a city has done an exemplary job in addressing homelessness. The funders there essentially pool their money in a pot and let the CoC decide how to spend it, following the Funders Together to End Homelessness model.

Although federal funds augment what the city provides, the City of Boise itself invests general funds for programs. Boise had tried to launch a funders forum with private funders who have been frustrated with the many piecemeal grant applications all chipping away at pieces of homelessness or poverty. The funders wanted a more coordinated community approach. Some of them have been toying with the idea of a consolidated grant application to the funders forum, but they still have to figure out the grant structure. They cannot replace existing grants, but a new funding source could be used to incentivize change.

In the meantime, discrete projects have been more successful in attracting investment. Boise's new permanent supportive housing (PSH) project, for instance, has been successful in attracting outside investment. The hospitals expect to realize cost savings by having high utilizers housed, so they are paying for supportive services in the PSH project. The city made the same appeal to the county jail. There will be an outcome evaluation of the project to see whether it has successfully reduced the high utilizer use of services. Banks and large corporations--plus the real estate market--are as-yet-untapped community resources that the CoC plans to pursue as potential funders. The mayor's Director of Community Partnerships will likely play a key role in approaching them.

Boise leaders also use local data reporting to gain buy-in from providers and funders. Years ago, Idaho had a statewide HMIS, housed with the Idaho Housing and Finance Association. But that state agency had little capacity for reporting, and it was terribly difficult for Boise providers to get their own HMIS data extracted from the state system. Eventually, Boise leaders pushed to break up the statewide implementation in order to get access to their local, historical data. The Boise CoC issued an RFP for HMIS lead and ended up contracting with ICA out of Iowa. Since then, there has been increased buy-in to the HMIS and much more interest among providers--both CoC-funded providers now that there is data to back applications. The Boise CoC now has near-100% HMIS participation (and anticipates reaching 100% bed coverage once the Rescue Mission joins). Especially for providers who do not receive federal funds--and who therefore have no obligation to participate in the HMIS--ICA's data dashboards were a powerful incentive to contribute data.

Funding and data are also key components of maintaining accountability toward the community's strategic goals and initiatives. HMIS reports on data quality and performance outcomes have also been critical in keeping people accountable. Additionally, the CoC Director emphasizes following through on assignments from meeting to meeting, helping to ensure the group maintains forward momentum.

Boise leaders have found that projects can focus attention and bring people together initially, though collaborative infrastructure is necessary for ongoing work. For introducing change, a concrete project is good for bringing people together. For example, Boise has been working on a PSH project that will combine LIHTC funds, hospital funds for supportive services, and funding from the city and county. Focusing on the project has helped generate excitement and bring in new partners. Ada County--like the rest of Idaho--is politically conservative and, historically, has not been very active on addressing homelessness, even though the CoC extends to include all of Ada County. However, things began to change last year when Ada County agreed to collaborate on the new Housing First PSH program. One of the main motivations was reducing the cost of serving super utilizers. With Boise State University, the CoC conducted a study to look at top super utilizer costs. After seeing that data, the county came on board because of the promise to reduce jail stays and indigent costs. County commitment may increase further with Commissioner Lachiondo's election: she had previously driven the Housing First PSH project as a member of the Boise mayor's staff. Hospitals came on board as funding partners, too, because of the promise to reduce use of emergency medical services. Now the hospitals are helping to fund supportive services for the housing program.

Boise leaders have worked to build public engagement through communication, inclusive but unified messaging, and transparency. Three or four years ago, the mayor began hosting housing and homelessness roundtables. Those ran their course and are now morphing into an annual summit, which is intended to build engagement. The summit will also be used to meet federal requirements for annual meetings of the CoC. It will be led by a professional facilitator,

include roundtables, and solicit feedback from the community. Gathering community feedback is intended to help build buy-in for the PSH project.

With regard to messaging, the city has attempted to brand efforts around homelessness in an inclusive way to appeal to a wide segment of the community. The city initiative around homelessness is called *Grow Our Housing*--they intentionally broadened the focus to housing, not just homelessness, in order to appeal to funders who are turned off by the idea of affordable housing or homelessness. After getting this broader initiative off the ground, they are now adding homelessness back in.

At the same time, the CoC itself has developed branding to increase its visibility. At first, there was little to no community awareness of the CoC executive committee or its work, but that is increasing now: Boise has branded their CoC and coordinated entry as Our Path Home and developed a unified message and image, so all points of entry point to the same place.

Communications are intended to inspire community buy-in. Leaders try to avoid fear-based messaging and instead keep messaging positive, focusing on hope and the very real and manageable possibility of ending homelessness in Boise given current numbers. This is perceived as important to Boise because they are experiencing rapid population growth and want to keep things positive. As they grow, they are also cognizant of the need to avoid the paths of Seattle, San Francisco, and others when it comes to homelessness and housing.

Fort Collins, CO

Fort Collins is part of the Colorado Balance of State CoC, which is composed primarily of rural areas and small municipalities. Colorado also has two urban CoCs: metropolitan Denver and the Colorado Springs area. Faced with a rapidly growing metropolitan population, Weld and Larimer Counties--home to Fort Collins and Greeley--are in the process of forming a third metropolitan CoC. Although HUD is focused on encouraging CoC mergers, not splits, stakeholders in Northern Colorado have argued that large, rural states in the middle of the country are facing different circumstances than those on the coasts. At this point, however, they remain part of the Balance of State CoC.

In their efforts to form a new Northern Colorado (NoCo) CoC, Weld and Larimer Counties have received significant support from HUD's Communities of Practice TA program. Leaders credit this program with increasing local engagement as people have learned more about HUD's CoC structure and its potential. Through this process, providers and other stakeholders have come to understand CoCs not as hoops to jump through for federal funding, but as an organizational mechanism to solve problems, encourage and enable collaboration, and successfully end homelessness. HUD TA has also assisted the community in determining the impact on funding of forming a new CoC by determining what the new FPRN and PPRN would be and whether current funding is proportional to that need. Although the potential funding impact varies from community to community, leaders were advised that a CoC might expect to lose 5% or 10% of current funding when it first breaks away from a larger CoC.

For a new NoCo CoC, more localized action could improve local fundraising efforts. The new, more local CoC will be able to make a clearer pitch to potential funders. As part of a Balance of State CoC, they had difficulty convincing funders that money given to the CoC would stay local and not be used in some of the 50 other counties that were part of the CoC. A new local CoC would make it clearer to funders that CoC work happens locally, and that the CoC will be able to layer federal funds with other types of funding.

Like funders, providers may feel more engaged with a local CoC. A more local CoC could foster a stronger community contract, where participants feel like they have to accomplish work and play by the rules so they can put in a strong application to HUD and bring more funding back directly to their community and to the funded agencies in the community that they care about.

The City of Fort Collins's strategic plan states the goal of making homelessness brief and rare. However, the city's role in coordination around homelessness is limited. The City of Fort Collins has partnered to host a community conversation on available services and gaps. The summit was intended to present a unified message to the general public and make them more aware of existing programs so rogue citizens do not start up duplicative services. But aside from the summit and landlord mitigation fund (discussed below), the city has not taken the lead when it comes to addressing homelessness. As a result, efforts are being led by nonprofit organizations and the United Way.

In Fort Collins, local collaboration around homelessness is led by Homeward 2020, a 10-year organization incorporated as a 501c3 to oversee initiatives related to homelessness and to drive collaboration. Homeward 2020's purpose is to be a strategic think tank charged with developing innovative and collaborative approaches to addressing homelessness. But unlike more permanent institutions in other communities, Homeward 2020 is intended to be a temporary, 10-year entity that will sunset in 2020. At that point, collaboration work may be turned over to a newly formed NoCo CoC encompassing Weld and Larimer Counties. Homeward 2020 is, in essence, a temporary organization that is spearheading initial coordinating and assembling pieces to put new projects in place, begin more concerted data collection, and then turn over the work to more institutionalized providers or collaborative organizations.

In the broader Weld and Larimer Counties area, collaboration is led by the United Way, which has dedicated staff and funding for capacity building around homelessness coordination and coordinated assessment and housing placement. The executive director of the Larimer County United Way sits on the Homeward 2020 executive board, and the Weld County United Way has coordinated efforts to form a new CoC. The United Way also houses and pays for a full-time staff position to lead coordination efforts and for a full-time staff person for the area's Coordinated Assessment and Housing Placement Specialist.

Collaboration in Fort Collins has been very project-oriented and has not yet become institutionalized as a system. Homeward 2020 was founded in 2010 with significant financial support from individual philanthropists who wanted to end homelessness. However, the organization remained rather uninfluential until around 2017 when they began to gain traction by focusing on a specific project, the Housing First Initiative, which is housed under a provider organization: Homeward Alliance. Homeward Alliance has an organizational advantage in leading the coordination necessary to launch the Housing First Initiative: they are the lead agency among four nonprofits colocated in the Murphy Center, a one-stop-shop that is home to nearly two dozen service providers (similar, perhaps, to the Sioux Falls Ministry Center).

Though systemic, institutionalized collaboration is nascent, the Housing First Initiative has effectively sparked cross-sector collaboration around this particular project. The project is supported by five newly created project-based vouchers administered through Housing Catalyst, the local PHA, and funded by marijuana tax dollars. (In Fort Collins, the PHA has been a significant creative partner.) Landlords have partnered in a variety of ways, including by offering short-term leases for people escaping domestic violence, giving 24 hours advance notice for new project clients before posting units publicly, negotiating agreements to house sex offenders, voluntarily offering units at discounted tiered rent (e.g., 30% of income the first month with gradual steps up) outside of a formal subsidy program, and more. Project leaders have worked hard to diversify available paths into housing by developing creative, custom landlord partnerships.

To facilitate outreach to landlords, Homeward Alliance has a landlord engagement committee, which works on shared messaging and communication with landlords--not only convincing landlords to participate in the program but also making sure that only one service provider calls one landlord on behalf of one client so landlords are not inundated with calls and do not get an artificially inflated sense of market demand for units.

The Housing First Initiative demonstrates how focusing on a target population--e.g., super utilizers--can help marshal community resources. Like other comparison communities, Fort Collins is working with the Frequent Utilizer System Engagement (FUSE) program though the Corporation for Supportive Housing (CSH). Through FUSE, they have received technical assistance and are planning to set up a social impact bond. Players at the table include UC Health, the jail, city police, primary care physicians who accept Medicaid, and 911 dispatch. Through FUSE, they have also received guidance in establishing business associate agreements and data use agreements for data sharing across systems.

Outside of project-focused work, Homeward 2020 also helps raise and direct funds. The organization sometimes has its own funding available to distribute to providers, usually through private donations from the wealthy founders, as well as through a contract with the City of Fort Collins to provide actionable data about the Housing First Initiative. One factor that has made more funding available in Colorado is the state's marijuana tax, some of which has been earmarked for homeless solutions and is awarded through an open funding process. The

Homeward 2020 director also seeks out additional funding opportunities--grants, social impact bonds, etc.--and either applies directly or, if eligibility requires an entity that provides direct services, refers funding opportunities to service providers who are eligible. With this funding, Homeward 2020 can partner with nonprofits and direct funding toward them to help accomplish its goals.

This influence over funding in turn gives Homeward 2020 some influence over providers. The organization can attach strings to funding in order to incentivize desired actions. For example, the City of Fort Collins funds a mitigation fund for landlords, but limits participation to landlords who are part of the coordinated assessment and housing placement program. The fund is managed by Neighbor to Neighbor, a nonprofit, which also provides first month's rent up to \$500 for people exiting homelessness, and has materials available about tenant education, braiding together multiple programs to increase impact.

Homeward 2020 has a two-board organizational structure: it has an executive board and a collaborative board. On the executive board sits the executive director of the United Way, members of the city government and city council, service providers, landlords, and the like. The collaborative board comprises more providers.

Colorado has a statewide HMIS implementation using Bitfocus. Locally, data collection has focused on the Housing First Initiative and is largely managed by the provider organization Homeward Alliance, which could become the HMIS lead for the newly formed CoC. The new CoC would continue to be part of the statewide HMIS, from which it would extract its own local data. Since everything in the statewide HMIS is coded by CoC number, software developers have said it will be easy to pull local data. On the back end, developers will change a setting so all the data will be restricted to the new CoC.

With regard to data, Homeward Alliance is in a unique position: they are the lead agency among four nonprofits who cohabitate in the Murphy Center, a one-stop shop with 20 service providers. Because Homeward Alliance staffs intake and the front desk, they are able to collect data across providers. They also try to attend case consultation and partner meetings whenever possible in order to keep data updated. Homeward Alliance is already setting up data dashboards, working with contracted web developers so staff will simply have to upload a quarterly spreadsheet to update the dashboard. The dashboard is housed on the Homeward 2020 website and can be viewed at http://www.homeward2020.org/data-dashboard/.

Madison, WI

Madison is part of the Dane County CoC, which is headed by a CoC Coordinator who is a City of Madison employee. The CoC Coordinator position is funded by a CoC Planning Grant. Though the CoC serves the entire county, being located primarily in Madison works for the CoC because most services are also located in the city. The CoC has toyed with other ways of organizing the lead agency, including designating a single agency that receives CoC funds-- but that was considered a conflict of interest. They also considered creating a new nonprofit to lead the CoC, but that idea was rejected because the CoC would have lost so many shared resources from the city that help support the CoC (e.g., space, infrastructure, office support).

The City of Madison has always been the CoC collaborative applicant for Dane County, but they only created the coordinator position two years ago. Previously, the CoC coordination work was done by city staff in between their other responsibilities. Having a full-time dedicated coordinator has allowed more effective collaboration work. As for data, Madison and Dane County are part of a statewide HMIS system. The state of Wisconsin contracts with the Institute for Community Alliances (ICA).

Because the CoC Coordinator is located within the City of Madison's Community Development department, she is able to consult on city funds that are directed toward people experiencing homelessness in order to braid together multiple funding streams to support strategic efforts to address homelessness. For example, the coordinator consults on the city's Consolidated Plan and CDBG activities. In fact, part of the coordinator's job description requires work on the Consolidated Plan and helps to justify the position within the city. The coordinator's influence on CDBG activities is less formal: Madison uses CDBG to offer incentives to affordable housing developers who plan to serve people experiencing homelessness, and developers sometimes come to the CoC Coordinator for advice about how to do that. The CoC Coordinator and city government are able to manage any potential tension between CoC objectives and city objectives. Occasionally the city and CoC might have diverging visions, but in that case, the coordinator's city supervisor understands that CoC preferences trump the city's vision.

The Dane County CoC has an executive board as well as around eight committees. Members are mostly CoC agencies, but sometimes community members or people with lived experience attend. CoC agencies tend to be the most consistent participants because they feel obligated to be there, and the CoC Coordinator has struggled to get others to participate. In an effort to broaden participation, the CoC membership meeting is an open meeting, and the CoC Coordinator has pitched committee participation as a leadership opportunity: In the service industry, there is not much room for upward growth. Agencies tend to have frontline case workers and an executive director. For frontline case workers, serving on committees can be an opportunity for professional development and building personal leadership skills. The CoC Coordinator has also asked provider agencies to put in job descriptions that part of service providers' roles is to sit on committees and work on collaborations. The aim is for employers to recognize the value of that work, to be sure employees who participate are being compensated for their time, and for supervisors to recognize the importance and value of taking that time to do collaborative work.

With a new full-time coordinator, the Dane County CoC is pursuing more partnerships, but still lacks formal partnerships with strong segments of the community that could be crucial to

further collaboration. Although Madison and Dane County have not worked closely or in creative ways with their local PHA, leaders suggested looking at the Milwaukee CoC as an example of PHA partnership. In Milwaukee, the CoC worked with the local PHA to prioritize Section 8 for chronically homeless and, along with that, the county is funding supportive services for those households. Likewise, the Dane County CoC also has not yet developed a strong relationship with the university.

In addition to CoC funds from HUD and some city general funds, other major funding sources for addressing homelessness in Madison are Dane County and the United Way. County funding mostly goes toward shelters, and the United Way especially focuses on programs for households with children. The Dane County CoC is working on outreach to healthcare and business, including large corporations with a major presence in the area and downtown business owners. These efforts remain a work in progress. For the past several years, the CoC has been talking about an H2 initiative (housing + healthcare). They have brought together providers from both sectors, and now more recently they have brought people with decisionmaking ability to the table. One hospital has even hired a street outreach worker who is active on CoC committees. And, as Madison is thinking about the need for a new shelter in town, they are hoping the hospital will help fund it-perhaps by funding a few medical beds. As for major corporations, the CoC is working on getting the EMR provider Epic to help fund homelessness initiatives, recognizing that the Madison-based business has brought many new people to the community, leading to the development of new, less affordable housing. The CoC also works with Downtown Madison Inc., to reach out to business owners who do not want people sleeping outside their storefronts, trying to get them to help fund homeless services.

In addition to expanding capacity by funding a full-time coordinator, Madison has used strategic planning and education to improve approaches to addressing homelessness. According to leaders, Madison had just been maintaining the status quo with homelessness, not working to end it, until they started changing the conversation around their work. Part of that was convincing providers of the importance of low barrier housing first approaches that do not make services mandatory.

Omaha, NE

Omaha, NE is part of a three-county CoC that leads collaboration around homelessness for the Omaha and Council Bluffs area. The CoC comprises Douglas and Sarpy Counties in Nebraska and Pottawattamie County in Iowa. It is led by a 501c3 organization called the Metro Area Continuum of Care for the Homeless (MACCH). Outside of the Omaha area, Nebraska has another metro CoC in the Lincoln area and a Balance of State CoC.

Until about one year ago, MACCH was connected to the University of Nebraska, Omaha (UNO). UNO has a nonprofit incubator, where MACCH got its start. MACCH gradually separated but relied on UNO for office support, including payroll and HR. About one year ago, they separated operations completely, although MACCH is still located in space on the UNO

campus. For MACCH, starting in the UNO incubator was helpful during their early years when the organization was small. Now that they have grown, they are better able to take on the responsibilities of a standalone organization, including writing their own policies and procedures and accounting. For MACCH, the advantage of becoming independent has been the flexibility in adding staff, designing positions, looking for more suitable office space, setting insurance and vacation policies, and the like. MACCH's experience suggests these benefits might not be as relevant for a smaller organization of only one or two full-time staff; for such an organization, it would likely make more sense to stay under the umbrella of another organization to benefit from shared resources. A disadvantage of becoming more independent is the increased need to fundraise for staff and other needs.

The question of how to right size an organization is problematic and comes down to a question about how much a community wants to invest. Insufficient staffing hampers capacity, whereas a more robust organization can begin to be self-supporting through grant writing and fundraising. But growing an organization takes work. In its early years, MACCH had been just two people who were stretched thin writing grants and policies, hosting meetings, and carrying on day-to-day operations. Now they have hired a new coordinated entry manager and posted for an administrative position; when new grants are awarded, they plan to hire three more staff for a total staff of seven.

The MACCH director compared this organization to the Springfield, Missouri CoC with which he had worked as a provider. In Springfield, the city contracted with two individuals to do the day-to-day work. But both of those people worked with provider agencies, so their time was divided between collaboration and agency. No one was fully dedicated to overseeing and thinking about the collaboration organization. And because the positions were contracted out, there was no dedicated person thinking about it all the time.

As MACCH has grown, they have experienced some growing pains. Having a nonprofit as lead entity for collaboration can be complicated. The board, for instance, must fulfill a dual purpose: it is charged with being the governing board for the nonprofit and with doing the coordination work around homelessness in the community. Unlike a traditional nonprofit board, the MACCH board advocates not for a specific point of view but on behalf of community-wide interests. For some board members who are familiar with serving on nonprofit boards but unfamiliar with homelessness coordinating, that dual responsibility is a struggle. The diversity of board members and their affiliations also means that advocacy and fundraising can be tricky: members come from organizations with divergent interests. To address these challenges, MACCH is working on developing a unified message around their core values and priorities in the community.

MACCH is currently working on bringing together different funding organizations to streamline their applications and evaluations by asking the same questions and requiring the same performance measures. The goal is to see commonly used metrics adopted across the community, which would simplify HMIS data collection and reporting.

At the same time as MACCH has been working with funders to get them on the same page, a local foundation in Omaha recently pulled together nearly all of the local foundations to talk about homelessness. Though initially a one-time event, there is discussion about trying to institutionalize a regular funders forum, perhaps as a quarterly or biannual meeting. The goal is not to tell foundations where to spend money, but to inform them about needs and efforts underway in the community. For example, the forum could offer a means to tell funders about the fact that coordinated entry exists and how it works so that funders could choose to encourage participation by asking applicants whether they are participating in coordinated entry.

Such efforts to align funding are only in the early stages in Omaha, as are efforts to connect homelessness coordination with mainstream housing resources, the city's Consolidated Plan, and the CDBG process. Going forward, leaders hope, aligning funding with strategic priorities would make it easier to braid together multiple funding sources to support new initiatives around homelessness (e.g., combining Nebraska Housing Trust Fund dollars with ESG and CoC grants plus foundation support). For now, MACCH works with the City of Omaha, which is the ESG recipient, and also assists with the CAPER and provides HMIS data as relevant to City grant applications. MACCH has worked closely with the City on the ESG RFP and score card, and beginning with the 2019 cycle will split the ESG administrative allocation with the City for that work. Beyond the City, MACCH also provides reports to the state finance authority, which manages the state's housing trust fund, and to the United Way.

Further integrating homelessness coordination with mainstream housing and city programs might someday extend to MACCH's advising on local ordinances and policies, though Omaha is not there yet. MACCH's influence on local policy is mostly informal. A county commissioner sits on the MACCH board, offering one way of relaying information. The director of MACCH also has a standing meeting every other month with the city planning department to discuss homelessness and housing. MACCH sees a need to develop clearer mechanisms to communicate information to local leaders when they consider new ordinances, new housing developments, or other changes likely to affect people experiencing or at risk of homelessness.

MACCH faces the challenge of maximizing engagement from a broad-based board by avoiding meetings focused on detailed policies and procedures, instead using board time for higher level strategic planning. The MACCH board is composed of about 17 members, including service providers, local government, local foundations, mental health providers, healthcare providers, developers of affordable housing, and other human service or supportive service providers. Because MACCH is the lead agency for the CoC, board meetings sometimes become narrowly focused on HUD policies. The board must carry out quite a bit of mandatory policy review and change and discussion of HUD rules and guidance. But non-HUD providers and board members from other sectors have little interest in those meetings. To prevent board meetings from being bogged down in HUD details, MACCH is setting up a HUD-specific work group to free board meeting time to talk about more widely relevant topics like affordable childcare access, transportation, and other strategic priorities.

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MACCH has also struggled to build trust and relationships among stakeholders. Several years ago, sensing that the provider community was fractured and siloed, a local foundation hired a consultant to begin the work of setting up a community of practice. The community is now on their second year of the process. They hold monthly meetings where participants engage in visioning and trust building to find common goals and work together. The work focuses on overcoming the "midwest nice" tendency for people to bite their tongues when they disagree and instead wait for the meeting after the meeting, which ultimately leads to dissension and dysfunction at subsequent meetings. The group has been working on the need to feel comfortable disagreeing openly and still knowing that they are all ok with each other. During the beginning stages of building this trust, meetings benefit from skilled facilitation to increase participation and engagement and reflection and even disagreement--asking participants how they feel about proposed steps, how they think it might impact their agency, any concerns they have for their agency. To build successful collaboration, the group cannot just assume silence means people are willing to come along.

As for data collection, the state of Nebraska has a statewide HMIS with four organizations involved: the state's three CoCs plus Community Action Nebraska (CAN). Each of those four organizations has a certain number of seats on the HMIS board, which is a statewide board to set policies and procedures for HMIS. Reporting is done by CoC (i.e., MACCH for Omaha) or, for individual program reporting, by agencies that run those programs.

Des Moines, IA

In Des Moines, coordination around homelessness is led by the Polk County CoC, a 501c3 nonprofit that was incorporated in 2013 (however, the City of Des Moines remains the collaborative applicant for CoC funding). The CoC nonprofit has one full-time employee whose office is located with the Polk County Housing Trust Fund, which facilitates connection with community partners. The Trust Fund also serves as fiscal agent for the CoC nonprofit.

Before the CoC nonprofit was incorporated in 2013, Polk County had long had a coordinating council for around 25 years. The council had taken a variety of forms and was mostly providerled. With changes in HUD requirements and CoC structure, the group knew they had to change. So they created the current board, which has 25 members, most of whom are not service providers (though some are). The board includes faith community leaders, members of the legal field, education providers (i.e., Des Moines Public Schools), substance abuse providers, and similar stakeholders.

The transition from a provider-led system to the current board was rocky at first, but providers now support the new board. Some providers serve on the CoC board itself, and others serve on committees or workgroups. The board previously had a directors council made up of directors from different agencies, but that group is currently on hiatus because its goals were unclear. The board does maintain a service council, which is made up mostly of frontline staff. The service council is training oriented, bringing in speakers and training on topics such as serving LGBT populations, domestic violence, and equal access. Providers also serve on a service coordination group that is working to coordinate services.

The decision to incorporate as an independent 501c3 was not based on a strong preference for that structure but more on political expediency. The structure allowed the CoC to be perceived as independent. Given the politics of the community, the CoC needed a board that was independent of city and county government. The independent board also made sense because the CoC wanted to be free to innovate above and beyond the restrictions of what HUD would fund. Though the CoC is a one-employee small nonprofit, it benefits from being housed within a larger organization: the director can draw on the Trust Fund's six staff members for administrative support, graphic design, and other specialized skills. The CoC contracts as needed for other services, such as consultation on HUD regulations.

Des Moines's experience suggests that, in determining appropriate staff size, communities should consider the purpose of staffing a collaborative organization. Is the purpose to minimally keep the board and workgroups running and type minutes, or to fundraise, or to lead community planning? Those are political decisions about goals that need to be made before choosing a board and staffing structure.

The Polk County CoC has only had a full-time director for about three years. When the CoC decided to hire an executive director, they asked whether they only wanted to play for HUD CoC money, or whether they wanted to expand the vision and purpose of the board to further community collaboration. The board affirmed the decision to play a broader role in the community, and so they hired an executive director and, recently, have been engaged in developing a community plan around homelessness. Without a full-time staff person, it would be difficult for a volunteer board to take on the additional work of community planning. The staff provides necessary support as board members undertake strategic planning.

Job responsibilities of the CoC director go beyond compliance with HUD CoC requirements. The responsibilities also include the following:

- Facilitate the group's committees and aid collaboration. In addition to the typical committees required of a CoC, the board has workgroups on racial equity, extreme weather, discharge planning (which may be expanded to include corrections and mental health), and diversion/rapid resolution.
- Manage the board. Keep board members informed and engaged. Develop a new board packet and orientation materials that communicate expectations for board members.
- Oversee HUD programming.

- Grant writing.
- Oversee the community vision and plan. This work is for the community as a whole, not specific to CoC responsibilities. The community plan will have four areas of focus with associated action items, and it will also outline core beliefs (e.g., Housing First, racial equity). As part of the planning process, board members have been going on site visits, holding community meetings, and doing strategic planning. They have engaged consultants for this work.
- Navigating local politics. The Polk County CoC encompasses the county, the City of Des Moines, and other nearby municipalities, plus must grapple with state politics by virtue of being located in the state capital.

As the Polk County CoC has expanded its reach into community collaboration, they have had to find ways to work with other organizations in the community and to avoid duplicating what already exists. One way in which they have done so is by sharing workgroups with other organizations. One of the CoC's standing committees is the Housing Committee, which is both a CoC committee and a United Way committee. It developed that way because the United Way had launched a collective impact initiative called OpportUnity, and one of their workgroups focused on housing. That group already had may of the same members as would be on the CoC's Housing Committee. Rather than duplicate and create extra work for overlapping members, they combined, pooling resources as one meeting. The workgroup deals with landlord issues, affordable housing, the LIHTC process, ways for people to move on from PSH, accessing National Housing Trust Fund dollars, and coordinating efforts.

The CoC board also has representatives from county and city government, though the board's relationships with local government are complicated by the existence of the vestigial Homeless Coordinating Council. The city's Community Development director sits on the CoC board and grant committee, and that person is also the head of the local PHA. Those connections have enabled the CoC to connect with the PHA over how to use mainstream vouchers to coordinate with homeless providers. Representatives from the county also sit on the board and facilitate coordination and communication between county and CoC. However, coordination with local government is complicated by the continued operation of the local Homeless Coordinating Council (HCC), which used to make funding decisions before the CoC was strong and active. The HCC includes the mayor, councilors, county supervisors, community foundation, United Way, food pantry, and other major community players. Though its function has largely been duplicated by the CoC, the HCC persists because members feel it connects them to the community. Integrating the CoC and HCC has proved challenging.

Despite the legacy of the HCC, the CoC was able to gain legitimacy and influence in the community because it gained buy-in from funders. The Housing Trust Fund and other local funders began telling applicants that participating in centralized intake and committing to Housing First were necessary to receive funding. The also communicated (less explicitly) that

the CoC was driving community conversations around homelessness and providers should participate if they wanted to be competitive in their funding applications.

Those challenges aside, Des Moines benefits from being part of a one-county CoC that is able to focus on local data, coordination, and planning. The community has more flexibility than if they were working with a larger CoC, especially given that they are more urban/suburban than the rest of Iowa. The board's ability to look at local community needs is key--the needs in Des Moines may not align with state needs. Helpfully, the CoC has 100% HMIS participation and centralized intake (different than coordinated entry), which are both working well. Setting up centralized intake helped increase collaboration and launch conversations. The system was resisted at first, but has gained buy-in as results show its efficacy in prioritizing placement and getting chronically homeless people into PSH now that placement depends less on advocacy and more on demonstrated need.

Future plans for the CoC are to finish developing a community plan then work on a development plan and a communication plan. The community plan will be a three- or fouryear plan with four pillars and associated action steps. Once the community plan is finished and priorities have been distilled, it will be used as the basis for making appeals to businesses and other sectors to support community priorities. The plan will allow more cohesive conversations to occur.

The CoC plans to create a development plan for fundraising that focuses on systems-level activities (so that the board is not competing for funding with providers). Historically, funding for the board has come from Polk County for CoC board operations, the City of Des Moines, and a HUD planning grant. More recently, the board has received money from local foundations for operations and centralized intake, and the director is actively submitting LOIs and applications for other grant opportunities from local business foundations and others. The community plan is expected to facilitate development by showing potential funders concrete goals and accountability and a sense that their investment will be well placed.

Once the community plan is finalized, part of the board's purpose will be to communicate the priorities it has set and develop a unified voice for the community. Structurally, having a fulltime director for the CoC has provided a single point of contact in the community to have conversations around homelessness and community needs. For example, when a community provider heard about a proposed river redevelopment project, the provider directed the developer to the CoC director, who was able to meet with the developers and communicate the fact that people camp along the river and redevelopment would pose a problem.

For now, the board and director do minimal advocacy work around policy because they do not have the structure or capacity for it. However, the director is working with the United Way on their advocacy plan to support their day on the hill. In the future, they might work with the Balance of State CoC to lobby the state legislature and develop asks around increased state funding.

Cedar Rapids, IA

Unlike the other comparison communities, Cedar Rapids is not a HUD-designated Continuum of Care. Although the community refers to itself as the Linn County Continuum of Care, this is an unofficial designation. The City of Cedar Rapids and Linn County are formally part of the Iowa Balance of State CoC. To avoid confusion, this report refers to the Linn County Continuum of Care as the Linn County Continuum rather than CoC.

The Linn County Continuum, which leads collaboration around homelessness in the Cedar Rapids area, formed in 2000. It is staffed by a Linn County employee who serves as director. The director provides a single person and point of contact in charge of moving continuum work forward by supporting the board and workgroup subcommittees. The director takes attendance at meetings, records and sends out minutes and agendas, maintains contact lists, and directs data monitoring.

The continuum convenes a large, inclusive, cross-sector collaborative board. Its diverse membership includes criminal justice, food pantries, property managers, shelters, and other service providers. It also includes representatives from different county departments, and city participation has increased over the last three to four years, especially with a focus on different initiatives such as tiny homes, which face zoning restrictions now. The continuum has seen especially involved participation from the city's housing services director, who is active on the continuum board and subcommittees.

The large, inclusive board--which has around 60-member organizations represented at monthly meetings--focuses on networking and information sharing, including receiving reports from subcommittees, which do more detailed work. These meetings are an opportunity for education and awareness about available resources, updates on data, and coordination for a unified voice when needed. The large group is not used for detailed work; when it considers proposals, those come up from subcommittees nearly complete.

Standing subcommittees including the following:

- Planning group for a new seasonal overflow shelter
- Public awareness subcommittee, which has recently been working on a cost of homelessness report. This group also regularly sends editorials to the local newspaper and holds events to raise awareness around homelessness.
- Healthcare for the homeless subcommittee, which consists of healthcare providers, behavioral health, substance abuse, and mental healthcare providers plus housing services providers who come together to talk through barriers and issues they are seeing among those they serve. Recently, this committee helped prepare documents along with the Public Health Department about shelter health protocols and disaster protocols for working with people experiencing homelessness.

• Data subcommittee, led by the continuum's director, and which reports on local data collection

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In line with the philosophy that networking fosters collaboration, the continuum has built opportunities for social interaction outside of meetings. The continuum's happy hour group is an informal opportunity for providers to collaborate, socialize, and get to know one another.

In addition to convening the board, the Linn County Continuum engages in local data initiatives. These efforts are one of the major functions of the group; in fact, in internal surveys, Linn County Continuum participants name data collection as one of the things the group is doing best. Since 1998, the continuum has conducted a twice-yearly point-in-time count (every January and July). Recently, there has been discussion of increasing the frequency to conduct the count quarterly. The count requires a significant volunteer effort, which is a challenge, but which also keeps people involved and engaged.

Annually during the July point-in-time count, the continuum conducts an Individual and Family Needs Survey, which is a 25-30 question survey fielded at meal sites, shelters, transitional housing projects, county assistance offices, public transportation, and similar community locations. The continuum usually receives around 250 to 300 responses, not just from people experiencing homelessness but also from people categorized as "at risk," a term the continuum defines broadly based on the fact that people were contacted at a meal site or other place that suggests they are struggling. The Individual and Family Needs survey asks about housing status, eviction history, and other needs, including financial problems, health status, and the like. The survey is used as a general needs scan. It is not strictly limited to homelessness or housing needs. In the past, for example, the survey identified the need for dental health, which led to the development of a dental health center at Linn County's federally qualified health center.

In spite of these local data collection activities, like other comparison communities, when it comes to extracting their HMIS data from the state system, this community struggles, too. Since Linn County is part of the Balance of State CoC, much of the data providers enter into the HMIS and coordinated entry system is reported directly to the state. Since Linn County is not itself a CoC, the data cannot be easily extracted at the local level. For example, the Linn County Continuum would like to see local VI-SPDAT numbers and to see the number of people recommended for different placements through coordinated entry, but unless agencies individually capture and save that data before sending it on to the state, it is very difficult for the continuum to get it back.

Because the Linn County Continuum is not a HUD designated CoC, it lacks some of the formal authority of other comparison community CoCs. Unlike CoCs, which collaboratively apply for grant funds from HUD, the Linn County Continuum does not have any funding opportunities to offer. In the past, the continuum hosted a fundraising event and redistributed the proceeds to providers, but it has discontinued the event. The continuum has not worked closely with other

funders in the community to align community funding priorities with the continuum's strategic priorities: although two representatives from the local community foundation sit on the continuum board, the foundation has not built continuum participation into grant criteria or anything along those lines.

County supervisors are appointed to serve on the continuum's board, but there are no elected city officials among its members. At this point, the continuum's connection to city policymakers is through board membership overlaps. The city's housing services director participates in the continuum, and the City of Cedar Rapids designates a spot for a continuum representative on all city boards related to housing. The city recently set up an affordable housing commission, and half of its 25 members must be providers; since most providers are also continuum members, there will be significant overlap in membership. In the future, the continuum hopes to consult more on the city's Consolidated Planning process.

Overall, the continuum's primary influence comes from networking and information sharing. The continuum has established itself as the local authority on matters related to homelessness and what they call "at-risk" populations. Although the continuum does not appear to have much formal or institutionalized influence on local government policy, both the city and county seek out input and information from the continuum. For example, the continuum provides training to the Linn County Sheriff's Department on working with people experiencing homelessness or behavioral health crises. The city has also voluntarily consulted the continuum on proposed ordinances. Around 2015, when the city was considering a panhandling ordinance, they sought input from the continuum, and made changes to the ordinance based on the feedback they received. Currently, the city is considering a SafeCR nuisance abatement measure that would penalize property owners for repeated service calls to an address. The city has again proactively sought out input from the continuum on this ordinance, and the continuum counseled that the measure could lead to landlords' being less willing to rent to "problem" tenants, and it could be especially dangerous for people experiencing domestic violence.

Recognizing that information is a commodity, the continuum focuses its meetings around sharing information and networking. Although this strategy has proven effective at getting members to attend and participate in meetings, it has been less effective in generating community action or change. The continuum is in the process of strategic planning, trying to streamline work and translate information and collaboration into action.

One purpose of the continuum's strategic planning is to identify goals and objectives that are accessible, understandable, agreed upon, and that will drive meetings and action. In the past, the continuum had developed goals, but they were not used to drive meeting agendas, they were not referred back to, and ultimately they were not realized. The group's strategic planning is beginning with national level goals (e.g., the USICH Open Doors federal strategic plan), which will be adopted and tweaked to fit local needs.

Rapid Results Institute

ARI's interview with Julie McFarland of RRI focused on general guidance around collaboration to address homelessness.

She advised using a short planning period. Focus strategic planning around one-year projects and three-year goals, not 10-year plans. Long-term plans are unwieldy. Shorter terms inspire action and produce results more quickly. She suggested planning for no more than five years at a time. A targeted, short-term pilot project can actually help launch new collaboration. Julie recommended picking a target population such as veterans, chronically homeless, or youth. She gave the example of the national effort around the Grand Challenge (A Way Home America) for youth homelessness. A successful pilot project with a key population is a way to get a small win, then replicate with other populations.

In order to ensure accountability--and celebrate successes--projects and goals should be pegged to outcomes and performance metrics. When managing collaborations, it helps to have specific goals and performance measurements for accountability.

To grow collaboration, an organization must be able to offer an incentive--often, money. Julie gave the example of Seattle and King County, where the organization leading collaboration had excellent ideas but failed to gain any traction because it had no resources to work with and everything fell apart. The solution does not necessarily require the coordinating organization to control funds or raise money; instead, the solution could be to create community funding mechanisms tied to board priorities. One option is to create a single application for pooled funds if multiple funders will come on board. A less strong version would be to ask funders to agree on some standardized priorities, questions, outcomes, or formats for applications. Or, the coordinating organization could create a subcommittee or workgroup of funders--or make a funders collaborative the organizing entity. In communities where the United Way plays a significant role in setting community priorities, they are valuable to include as board members. For further models of creating funders collaboratives, Julie suggested looking at Los Angeles. There, the funders collaborative has brought together government, philanthropy, the United Way, and other funders around common goals to invest in common projects and monitor data.

With regard to organizing collaborative groups, Julie recommended that large, inclusive, overarching boards focus on strategic guidance, with workgroups doing detailed work underneath. Membership should be composed of people from the leadership level from various sectors where mutual interests exist--especially from other strong systems in the community that could make an investment in ending homelessness (e.g., healthcare, higher education, criminal justice, housing developers). The goal is to bring these leaders together for higher level planning work, set specific short-term goals, and then have workgroups do more targeted work. Julie also recommended including a few providers who represent vastly different populations, but cautioned that the board cannot be made up only of people from the homeless system alone--other systems have to be involved because homelessness cuts

across systems. Finally, Julie suggested including people with recent lived experience of homelessness as a corrective against executive directors removed from the frontline making decisions without knowledge of how things work on the ground.

When bringing people together to collaborate, building trust is key. Julie pointed to Ohio as an example of a place that worked explicitly on building relationships and trust. The folks from Ohio, she said, maintain that, in building up collaboration, they invested the most time and effort in one-on-one meetings over coffee, happy hours, and relationship building in order to find champions and implement change.

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Interview Protocol

HOMELESS ADVISORY BOARD STUDY 2019

HAB MEMBERS AND COMMUNITY STAKEHOLDERS

INTERVIEW PROTOCOL

Tell me about your history with the HAB. When did you first become involved? What has your role been? How were you involved and what did you do?

What do you see as the mission and vision of the HAB? In your understanding, why was the HAB created?

As you understand it, how was HAB membership determined? Do you think the right groups or individuals were at the table?

As you see it, what role did the HAB play in the community? Do you think that's the role the HAB was intended to play?

What do you think have been the most important accomplishments of HAB?

• Probes: Grant writing, fundraising, strategic planning, data collection and dissemination

In general, what do you think are some strengths or advantages of having the HAB in the community? If the HAB were dissolved, what would the community lose?

What do you think were some of the barriers to realizing the potential of HAB?

When it comes to the HAB, what do you wish had been done differently? By whom? Why?

How do you see the HAB in relation to other organizations in the community focused on homelessness? For instance, how is the HAB different from the Sioux Empire Homeless Coalition?

What would you like to see happen to the HAB moving forward?

- Probe: Should its mission be modified? Expanded?
- Probe: Should HAB continue to exist? Merge with another organization?

Supplementary Documents

The following documents have been included as attachments.

- Boise's Four Strategic Initiatives
- Sample Governance Charters and Org Charts
- Sample Job Descriptions