What of what are we doing currently do we want to continue?	What of what are we doing currently do we want to expand?	What of what are we doing currently do we want to change?	What new services and/or system improvements are going to be necessary and important to invest in our community?
	HOU	ISING	
Flexible housing program.	Housing not shelters	Housing options tend to be in high crime and in areas/neighborhoods more conducive to our clients. In more economically diverse areas. Homeless people often decline housing because of the areas they are located in.	Increase housing capacity through any and all means necessary.
Can also expand on permanent	Troubing from Street, Car	ure reduced iiii	any and an means necessary.
housing. Refurbish exsisting structures. We need SRO. More			Repurpose existing buildings and
diverse housing.	DHA-set aside housing for families	Housing funds connected to shelter.	motels to creats more housing.
Home-share programs model plan for unoccupied bedrooms portions of house unused can pair homeless with these housing options. Paid or workshare/exchange good to be able to use existing (bedrooms)			Long term housing inventory development should be targeted by fewer organization But who
housing.			develops inventory for all.
			Home share program to utilize existing bedrooms in the county.
			PSH units are sometimes rejected due to the area- mix up economically diverse areas.
			Efficency units w/ long term regulation agreement if public funds are invoiced.

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	SHE	LTERS	
Continue beds at North A Shelter past 6/21.	County family shelter program- good at supporting family to overcome or burden with barriers.	Low barrier facilities that are flexible to accommodate individual needs.	Funding of programs (shelters) must be realistic (more) to meet desired outcomes.
	Add additional services and shelter until we have more people exiting to housing than entering into homelessness.		Shelter beds available
	INNOVATION	- PREVENTION	
Use of the funds to assist with initial move in and prevention funds.		Homeless Prevention: Rent Control, affordable rental housing.	Legal services
Prevention services at the county level. Different ways of providing and tracking. Prevent homelessness before it happens.		Expand prevention efforts. State law changes to reduce eviction won't solve non-payment of rent.	Homeless Prevention: One-time costs that push people into homelessness.
· ·		More focus on prevention and early intervention.	Formalize prevention programs. Eviction prevention.

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	INNOVATION - DIVERSION	N, OUTREACH AND ACCESS	
Outreach and navigation- continue and expand multi-disciplinary teams to help connect the homeless.	Navigation, particularly for youth- existing navigators very busy.	Day/drop-in centers as an outreach strategy.	How to interface with coordinated entry for someone without deep knowledge of homeless system-Increased access points.
Entry points, more access for all homeless. Need a no wrong door can go to any service provider and be connected to housing assistance.		Co-locating access points.	Need access points for all persons in the community and not just those who are connected to outreach.
Flat subsidies, explore how to move people in permanent housing to be independent. Pipeline to move in between different housing programs.		Narrow entry for programs for families.	No wrong door-making sure all partners are reducing silos.
2-1-1, but under used. It's information, not connection. Could it be used as a tool for linkage to be a more effective data base?		Need more comprehensive list of resources, consistently distributed. More consistent contact w/people	More access points, probably in the form of drop-in centers.
		on the queue. Expand role of 2-1-1 to provide service connection.	Understanding of access Crisis intervention services.
		Need for single source (access point).	Consider safe ground sites- serve as access point to system.

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currently do we want to continue?	currently do we want to expand?	currently do we want to change?	in our community?
,	•	ated and Case Management	
Encourage landlord incentives insurance for landlords to increase involvement.	Landlord hotline	Extend case management to engage with people graduated out of PSH	More landlord engagement and incentives: Formal efforts/polished presentation, make landlords feel special, Mayor/high-level politician call to action or advertising campaign.
Master leasing options.		Case management connected to housing transitions and also longer term in some cases.	Landlord Hotline to access services for tenants at risk of evection for money reasons or mental health, criminal, etc.
		Want to augment the dollar amount that a tenant voucher ca pay.	Landlord Relationship Building
			Housing Specialists/coordination-helping people with vouchers/subsidy to find housing and have relationships to find housing/managers to reduce risk
		Landlord incentives to entice to accept tenant vouchers.	and be a point of contact (Retention Team).
		Need units to connect with existing vouchers.	Landlord incentives
		Landlord incentives for voucher holders.	Addressing gaps between environment in housing program and finding housing to help stay engaged in services.
			Master leasing Expand landlord incentives.

			What new services and/or system improvements are going to be
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	SYSTEM LEVEL IMPROVEMENTS	COORDINATED ENTRY SYSTEM	
System work- is the way CES			
currently designed work for our		Reforms in case management	
community? Lots of housing		funding rather than asking program	Organizations need technical
opportunities are outside of CES.		operators to fund this themselves.	assistance.
Creating more evits from programs		Improvements in Coordinated Entry to reduce individual facilities or	
Creating more exits from programs		programs picking their own	Canadity analysis
to increase flow and improve CES.		prefered clientele.	Capacity analysis
System pipeline to move from PSH			One officent system for detabase
or a voucher to other affordible.			One efficent system for database
			How to bring more voices to the
Coordinated entry at street team			table to engage in system work
level.			(model after youth approach?)
			Based on funding oftentimes programs/providers are set up to compete with one another, leading to less effective and higher cost services (housing location mostly).

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	CRIMINAL JUST	TICE PROGRAMS	
Criminal justice not controlled by law enforcement services.	Expungement Services		Forensic behavioral health services to those released from the jail system.
	MENTAL HEALTH, HEALTH	HCARE, DRUG PROGRAMS	
Treating mental health w/hsg as an intervention.		Mental Health services.	Recovery/mental health/workforce programs.
Need for residential tax for AOD mental health and substance use support challenging to connect			
homeless to these services. Can weave into housing services?		Need to address drug issue, specifically Meth.	Second county in-the-field mental health clinician.
Increased capacity for AOD services?		More detox facilities and connection to emergency rooms.	AOD residential beds available when needed.
Connect people receiving behavioral health services to housing.		More engagement w/ hospitals systems- how to prevent people from ending up in the ER.	Leveraging mental health money to meet needs of specific population who would otherwise to attain or retain housing (youth, chronically homeless).
FHP- is aid diversion and behavioral health components critical, expand incentives.			Connect AOD into FHP to stabilize through case management and housing as they exit residential treatment.
			Mobile units w/services and healthcare.

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	PLANNING AND	COLLABORATION	
	Knowledge of other agencies'		
Collaborating between agencies.	systems and resources.		Sharing information.
	Planning efforts- one regional planning structre and plan,		
	including funding, and buy-in from local gov't and non-profits.		Understanding of programs: website, app.
			Better coordination across various systems-Homeless, behavioral health, criminal justice, etc.
			Coordination of service providers in housing to reduce competition.
	DATA	/HMIS	
Need to coordinate and all use HMIS need to do coordinated entry			Increased use of HMIS by navigation and outreach and all
using the same system-county, city, and CoC.	Expand number of programs in HMIS.		systems simplify it's use and improve data sharing.
			Better use of HMIS data.
	ADA AND A	CCESSIBILITY	
			Recognize that additional monies are needed for ADA needs-accessibility or elderly needs.
			Standardize Accessibility throughout (ie wide doorways for
			all open floorplan for
			kitchen/bathroom areas, grab bars in shower/tub surrounds as new retrofit/rehab, eliminate ability to
			install grab bars.

			What new services and/or system improvements are going to be
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	SANITATION, STO	RAGE AND SAFETY	
Storage facilities or locked safe		Safe Ground and Sanitation areas :	
spaces for belongings (including		Places to go with sanitation,	
pets).		bathrooms, and laundry.	Lockers for storage.
Access to public restrooms.			Increase access to restrooms.
	SPECIFIC PC	PULATIONS	
Serving Families and Youth and			
populations with a high need (the			
data is of high interest to show		Helping Youth providers think about	Safegound with services just for the
success.)		how to improve flow.	youth/TAY
100-day challenge model for		Develop facilities or programs for	Special landlord assistance for TAY
specific populations (e.g. older		those clients in the PSH who no	due to lack of payment history,
adults).		longer need the PSH services	income, credit history, etc.