



# Baltimore City Continuum of Care Action Plan on Homelessness

## **Introduction**

In response to the urgent crisis of homelessness in Baltimore City, this Action Plan on Homelessness prioritizes **time-limited and actionable interventions** that will produce **measurable outcomes** on homelessness. While Baltimore City achieved substantial progress under the original Journey Home Plan, as the needs of the community continue to evolve, so must our priorities and actions. This Action Plan on Homelessness provides updated strategies to address the current environment and the most urgent and important needs of those experiencing homelessness. The plan is ambitious, but possible.

While this action plan prioritizes realistic and achievable steps, it is founded on the premise that homelessness is solvable. The vision of our community and Continuum of Care (CoC) is to end homelessness in Baltimore City. This action plan lays the foundation to transform our homeless service system into an effective crisis response system that prevents housing loss when possible, quickly shelters and stabilizes those in need, and promptly facilitates connection back to permanent housing with any necessary supportive services. Baltimore City will know that it has ended homelessness when the community has a comprehensive crisis response system in place that ensures that homelessness is prevented whenever possible, and when homelessness cannot be prevented it should be a rare, brief and non-recurring experience.

This plan sets priorities through 2021 and exists as a “living document”, meaning that it will be reviewed and adjusted regularly based on data-driven analyses of current needs and system performance and ongoing input from Continuum members. As the resource landscape and community needs evolve, so will this plan.

## ***Moving Forward***

Strong leadership, broad community support and investment, and a commitment to action are critical to the success of this action plan. The CoC Board is confident that its diverse membership and deep community commitment to implementing the strategies in this document will ensure its real and sustainable impact on preventing and ending homelessness in Baltimore City.

The CoC supports the recommendation of the Mayoral Workgroup on Homelessness Report that the City of Baltimore must demonstrate strong leadership and commitment. City leadership can create a mandate for collaboration and command broad agency investment in this effort to end homelessness. Furthermore, acting as the operational leader to move this work forward, the Mayor’s Office of Human Services leadership must be equipped with clear, cross-cutting authority to align resources and enact policy and

programmatic change related to homelessness. This cabinet-level position, empowered by the Mayor, should be designated in addition to existing leadership within the Mayor's Office of Human Services (MOHS). This position, focused on interagency collaboration, must be authorized to direct City agencies to influence the direction of the City's human and financial resources necessary to make homelessness rare, brief and nonrecurring. This includes, but is not limited to, working collaboratively with the CoC to develop strategies to support the successful deployment of public and private resources and helping to develop and implement creative solutions to identified challenges.<sup>i</sup>

### ***Framing Themes***

The Baltimore Continuum endorses the framing themes developed by the Mayoral Workgroup on Homelessness Report<sup>ii</sup> as important values and context for this Action Plan.

**Homelessness is solvable:** Baltimore has the opportunity to promote broad public policies and practices capable of ending homelessness quickly and preventing homelessness for individuals and families most at risk. Homelessness should be understood within the context of a variety of interrelated, contributing factors and structural causes including but not limited to poverty, health, exposure to violence, and the current and historical impact of racial injustice.

**Safe, affordable housing is the solution to homelessness:** Embracing the consensus of the U.S. Interagency Council on Homelessness, the Department of Housing and Urban Development and others guided by a strong body of national research, we must prioritize housing-focused solutions to homelessness with the supportive services necessary to promote the highest possible level of independence, health and community integration.

**Clear City leadership on homelessness is essential:** Baltimore has the opportunity to foster trust, collaboration, and transparency among stakeholders committed to preventing and ending homelessness. High-level City leadership capable of cutting across departmental silos can promote: communication and collaboration among service providers, consistent practices, strategic investment of City resources, and more diversified funding sources. Identifying new public and private partners and funding stream is critical. Public education and communication to foster shared responsibility and collective buy-in will also be integral.

**Solving homelessness requires a robust, multipronged strategy:** The full array of necessary interventions and effective coordination of services are essential to ensuring that homelessness is rare and brief. This strategy should include a comprehensive affordable housing plan, strategic approach to street homelessness, enhanced outreach capacity, effective diversion and prevention strategies, strong permanent housing solutions, and effective connections to employment and income. Clear and

sustainable roles, responsibilities, and partnerships and a commitment to ongoing coordination between the Continuum of Care, City agencies, and community stakeholders will facilitate pathways out of homelessness and prevent returns to homelessness.

**History matters:** Baltimore has addressed contemporary homelessness since the mid-1980s across multiple administrations, appointed leaders, community partners. Several advisory groups have issued similar recommendations related to housing, health, employment and income, and safety net services. Some past efforts conducted in a less than transparent manner have resulted in community distrust. We have the opportunity to understand this history so that we can move beyond it and not be condemned to repeat it.

### ***Continuum Planning and Source Documents***

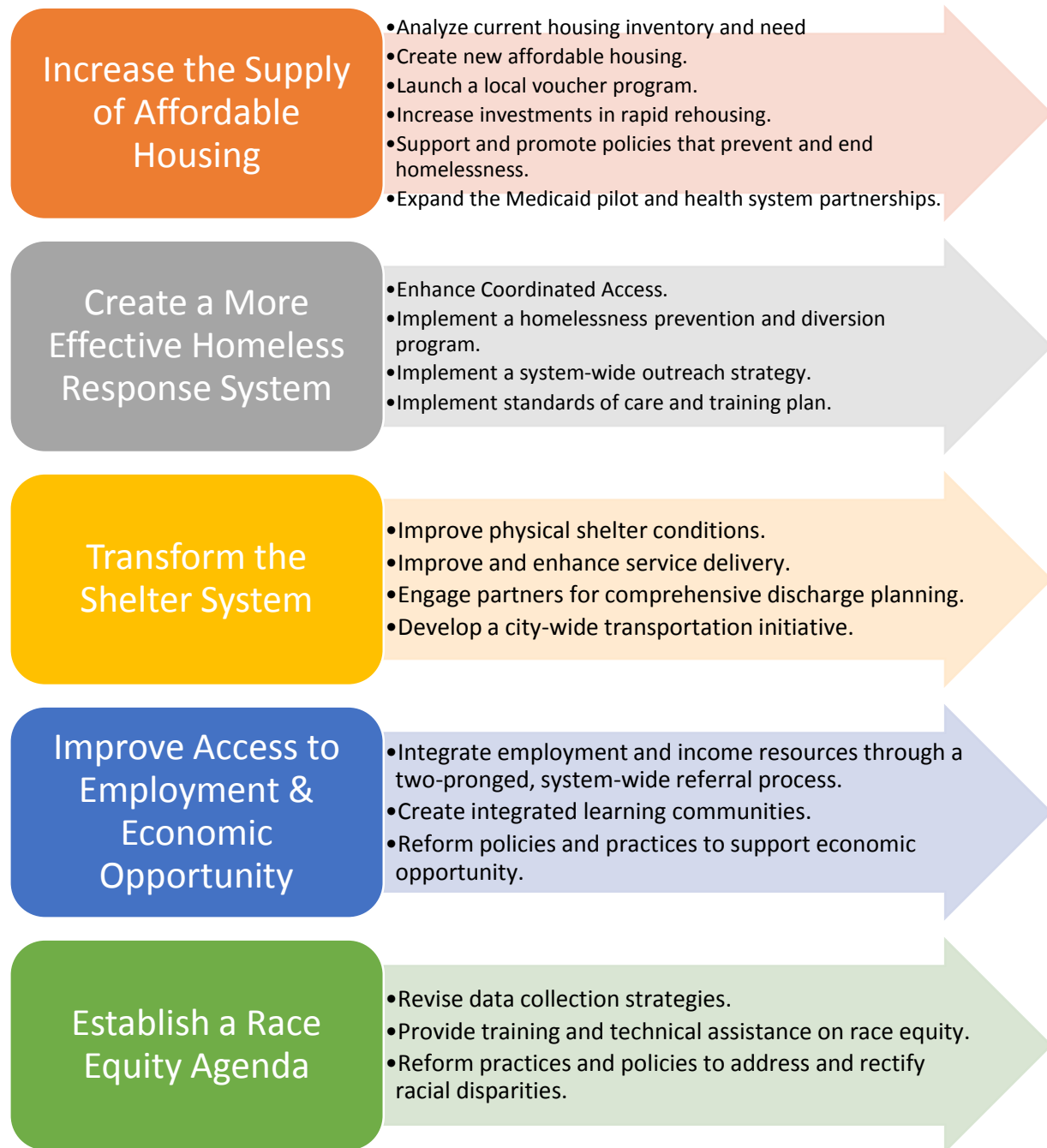
The Action Plan is the result of ongoing, collective processes led by Baltimore City's CoC starting with the Journey Home priorities established in March 2017 and inclusive of multiple efforts over the past two years that aimed to provide comprehensive analyses and specific recommendations. This plan has been developed and guided by key stakeholders and subject matter experts, including people with lived experience of homelessness. The process for developing the plan included several separate but interrelated activities:

1. A review of our existing housing inventory to define current capacity and need;
2. A review of existing and potential resources to diversify and increase public and private investments to aid in the city's efforts to achieve a functional end to homelessness.
3. Release of the Baltimore City CoC Journey to Jobs Report, introducing new metrics, matched cross system collaborations to better comprehend the intersections between homelessness, economic instability, criminal records and racial disparities.
4. A careful examination of our current physical sheltering conditions and a review of existing policies and procedures.
5. Modeling the changes to our inventory of prevention program, emergency shelter programs, transitional housing programs and permanent housing needed over time.

### **Key Strategies**

While homelessness looks different in each community across Baltimore City, we recognize that the solution for one may not be best for others. Therefore, this action plan provides an array tools to ensure that the appropriate interventions can be applied to distinct households in a timely manner to facilitate a connection to permanent housing. As we explore resources needed, we must additionally undertake program and policy changes, while examining ways to increase our effectiveness and efficiencies. To

reach our proposed goals, the action plan identifies a series of action items across five essential strategies derived from recent CoC planning efforts.



***Strategy 1: Increase the Supply of Affordable Housing***

Source: This strategy has been proposed to incorporate the recommendations of the Continuum’s Housing Committee and the memo that was presented to and endorsed by the Board in September 2018.

Description of Need: The affordable housing crisis in America continues to reach new heights. Rents are rising, wages of the lowest income workers are flat, and more people are renting their homes than ever before. To afford a two-bedroom apartment in Baltimore, a household would need full-time employment paying \$27.13 an hour, the equivalent of working 2.7 full-time jobs at minimum wage.<sup>iii</sup> As a result, more than fifty percent of Baltimore renters live in housing they cannot afford and 33 percent are spending more than half of their income on housing.<sup>iv</sup> This is only exacerbating by steadily increasing utility costs that further destabilize low-income residents,<sup>v</sup> all contributing to the astounding rates of eviction in Baltimore with up to 7,000 households judicially evicted annually.<sup>vi</sup>

*Insert Data: Additional data will be incorporated, and at a minimum, will include:*

- *# or people experiencing homelessness and chronic homelessness in HMIS; disaggregated by household type and race*
- *# and/or % of people assessed vs. placed in housing via Coordinated Access*
- *Current housing stock (# of shelter, RRH, and PSH beds; # of dedicated vouchers)*

Action Agenda: Increasing the supply of affordable housing is essential in our efforts to make homelessness rare, brief and nonrecurring and will yield the best and most cost-effective long-term results. The six interventions within this strategy present a robust, multi-pronged approach to expand opportunities for safe, decent, and affordable housing and supportive services to promote the highest level of independence and community integration for the range of individuals and families impacted by homelessness. As the Action Plan is implemented, policies and practices should be informed by the emerging race equity agenda.

### **Intervention 1.1: Analyze the Existing Housing Inventory and Data to Inform Development and Resource Allocation**

All interventions under this strategy should be designed and implemented with a clear understanding of the current housing inventory, emerging Coordinated Access data, and the housing needs, preferences, and eligibility of people experiencing homelessness. As housing is newly created or realigned, accessible housing should be created in proportion to the identified need. This is particularly important given the aging housing stock in Baltimore and the proportion of individuals experiencing homelessness and prioritized for housing who have disabilities and require wheelchair accessibility and/or other accommodations. Any proposed policy or project should be assessed to ensure it meets Baltimore's obligation to comply with fair housing laws, the integrative mandate of the Americans with Disabilities Act (as detailed in *Olmsted v. L.C. ex rel Zimring*, 527 U.S. 581 (1999)), as well as any other applicable federal, state, and local law. Whenever possible, housing should be developed and located within areas of opportunity and/or neighborhoods preferred by people experiencing homelessness. An understanding of

federal requirements and preferences of those with lived experience should factor into future resource allocation decisions in order to prioritize the types of housing and interventions that are most highly integrated and most preferred by people experiencing homelessness.

### **Intervention 1.2: Create New Affordable Housing**

The development of new permanent and affordable housing options is critical to closing the gap on the unmet need for individuals and families experiencing homelessness. Cost estimates have been developed by the Continuum to provide an understanding of the types of strategies available and their associated costs and impacts. The precise composition of projects and investments will depend on additional assessments of need, availability of resources, and priorities of the City, CoC, and broader community of stakeholders and investors.

### **Intervention 1.3: Launch a Local Voucher Program**

A Local Housing Voucher Program (LHVP) would make rental housing accessible for extremely low income and homeless individuals and families by providing a monthly rental subsidy to cover the difference between what a household can afford to pay and the cost of renting a unit on the private market. As the federal government continues to decrease or freeze funding for subsidized housing, LHVPs are becoming an increasingly vital tool with a proven track record in other communities. Additionally, LHVPs can eliminate barriers and provide access to housing for individuals who are otherwise ineligible for other traditional housing resources; this program should not institute citizenship or identification requirements to qualify for housing.

Because a LHVP would be locally funded and controlled, the current Administration has an opportunity to create a streamlined, efficient program to move persons experiencing homelessness out of the homeless service system and into permanent housing. A LHVP should include clear mechanisms to target households and improve the flow within the homeless services system and decrease the City's length of stay performance measure.

### **Intervention 1.4: Increase Investments in Rapid Rehousing**

Rapid re-housing (RRH) provides short-term rental assistance and supportive services to individuals and families exiting homelessness. RRH is based on Housing First principles and core components include housing identification, rent and move-in assistance, and case management and services that contribute to the long-term stability and self-sufficiency of households. Research demonstrates that it can be effective with certain vulnerable populations, including households with limited income and survivors of domestic violence. RRH has also been shown to yield better, more cost-effective results than shelter and transitional housing programs. Effective case management is client-centered, flexible, and inclusive of strong strategies to connect households to income and employment opportunities.

By increasing investment in RRH, our community can provide robust and sustainable interventions and expand to serve additional households. This will increase our “system flow”, increasing the number of households matched to housing and reducing the time that households spend in homelessness. With that said, it is recommended that additional new RRH projects should not be designed and implemented until the following activities are completed: analyze the implementation and efficacy of current RRH projects, including the transfer policy; review the current Coordinated Access prioritization process for RRH; and develop and implement standards of care and training for RRH projects.

### **Intervention 1.5: Support and Promote Policies that Prevent and End Homelessness**

#### *1.5.1 Advocate for Affordable Housing Trust Fund allocations to address homelessness.*

Widespread citizen support exists for the funding of the Affordable Housing Trust Fund (AHTF), which was approved by an overwhelming 83% of voters in November 2016 after tireless advocacy by local residents and coalitions. As a starting point, MOHS and the CoC should contribute time and energy to support the success of the AHTF and inform the work of the Housing for All Coalition. The CoC can provide content expertise and recommendations on strategies that meet the needs of people experiencing and at-risk of homelessness, including options for an ongoing funding allotment through the City’s annual budget. This could also include a recommendation that a dedicated portion of the trust fund be allotted to address homelessness and the needs of specific populations of people experiencing homelessness.

#### *1.5.2 Realign CDBG and HOME fund allocations to prioritize ending homelessness.*

Community Development Block Grant (CDBG) funds can be used to fund the acquisition of property, the rehabilitation or new construction of affordable housing or public services such as emergency shelter, and provide supportive services to low-income and homeless households. The HOME Investment Partnership Program (HOME) can be used to fund a wide range of activities including building, buying, and/or rehabilitating affordable housing for rent or homeownership, or providing direct rental assistance to low-income people. It is the largest Federal block grant to state and local governments designed exclusively to create affordable housing for low-income households. Locally, CDBG and HOME funds are underutilized for programs or housing dedicated to serving less households. The City and Continuum Board should collaboratively set specific targets for homeless projects and funding during the 2020 Consolidated Plan Process, which establishes five-year goals for CDBG, HOME, and Section 108 loan funds.

#### *1.5.3 Implement a “Move On” Strategy utilizing Housing Choice Vouchers.*

Utilizing Housing Choice Vouchers to allow previously homeless households to step down from permanent supportive housing programs, making space for new chronically homeless households.

*1.5.4 Advocate for Low Income Housing Tax Credit policies that target households experiencing homelessness.*

The local Qualified Allocation Plan (QAP) can be utilized to foster and encourage supportive housing development with Low Income Housing Tax Credit financing. Multiple strategies have been identified, including threshold requirements for dedicated permanent supportive housing (PSH) or other supportive service units; credit set-asides for supportive housing developments; and scoring incentives to encourage supportive housing development. The City and Continuum Board should advocate for policies that promote the inclusion of supportive housing projects, while also carefully considering and protecting policies that promote affordable housing development in areas of opportunity.

*1.5.5 Advocate for the repeal of the HABC Minimum Rent requirement.*

For households exiting homelessness or living in poverty, the implementation of a minimum rent requirement in Baltimore City creates an unnecessary financial hardship for households that are already extremely cost-burdened. The Housing Authority of Baltimore City (HABC) should reevaluate and reverse this decision to minimize factors that may contribute to household returns to homelessness. Additionally, HABC should work closely with the CoC, community partners, and residents to ensure effective implementation and communication of the policy and the hardship consideration that exempts households from the minimum rent requirement. Additionally, the Mayor's Office and CoC should advocate forcefully against federal Department of Housing and Urban Development (HUD) policies, such as minimum rent and mandatory work requirements that disadvantage people experiencing and at-risk of homelessness.

*1.5.6 Reform the Inclusionary Housing Ordinance to create additional deeply affordable housing units for households experiencing homelessness.*

With a substantial amount of private development happening in several areas of Baltimore City, the time is ripe to strengthen the City's Inclusionary Housing Ordinance to require developers building market rate housing to create a certain percentage of affordable housing units. The law, as currently written, only requires such affordable housing to be developed if the City pays the developers for the cost of any additional incurred costs. The City and Continuum should convene with and support existing coalitions to strengthen and revise the law, and work collaboratively with developers to address homelessness.

**Intervention 1.6: Expand the Medicaid Pilot Program and Other Health System Partnerships and Funding Models**

By leveraging mainstream resources to pay for more of the supportive services needed to aide vulnerable individuals and families, we can maximize the use of available resources and assist more households to transition from homelessness to permanent housing. By partnering with local hospitals to identify innovative ways to fund housing and supportive services for high-cost hospital patients experiencing homelessness, we can improve access to community-based services, reduce the costs of frequent visits to



hospitals and emergency rooms, and increase the supply of supportive housing for households exiting homelessness to improve health and lower costs of emergency services.

## ***Strategy 2: Create a More Effective Homeless Response System***

Source: This strategy has been proposed to address the planning efforts and gaps in our current system, as identified by the Continuum’s Health Care Workgroup and Coordinated Access Committee.

Description of Need: In an effort to achieve the greatest impact with limited resources, communities across the country are transitioning from fragmented programs toward coordinated, system-level responses to addressing their community’s homelessness. While we have developed several of the building blocks of an effective homeless response system, our system remains convoluted and burdensome to navigate. Coordinated Access is still not well understood by many people experiencing homelessness do not have access to adequate navigation support. Prevention services are fragmented across multiple agencies and locations and there is no system-wide diversion strategy. Shelter space is limited, difficult to access, and varies across program, and while outreach services have expanded, there are still significant gaps in evening and weekend coverage. The current process for securing and accessing a shelter bed is incredibly convoluted and requires individuals to independently reach destination points, carry all their belongings, and wait outside for long periods of time. Additionally, there are limited cross-sector partnerships and poor data to understand intersections across institutions.

Action Agenda: An effective crisis response system prevents homelessness when possible, and rapidly returns households experiencing homelessness to stable housing. Progressive engagement will ensure that assistance rendered matches the assistance needed by each household to achieve and maintain stable housing. The following four areas of intervention seek to improve coordinated access efficacy and capacity, establish a prevention and diversion strategy, ensure comprehensive street outreach capacity, and introduce standards of care for service delivery across all homeless service programs. All areas of intervention will be informed by and modified in response to the emerging race equity agenda.

### **Intervention 2.1: Enhance Coordinated Access**

While our community has made significant progress in establishing and operating a Coordinated Access system, additional enhancements will ensure a comprehensive and accessible continuum of client-centered services employed a progressive engagement model.

*Intervention 2.1.1: Analyze the existing Coordinated Access data, policies, and procedures and propose adjustments as needed.*

Over the past year and a half, Coordinated Access was expanded to include both PSH and RRH and incorporate HMIS functionality. Additional analysis is necessary to review emerging data trends and reevaluate the prioritization process and other policies in light of the current needs of people experiencing

homelessness and the available inventory of housing resources. Given the relatively recent integration of RRH services, increased scrutiny should be given to the RRH prioritization process and transfer policies and practices. As needed, the CoC should consult with necessary local and federal partners to ensure effective targeting of available resources.

*Intervention 2.1.2: Establish clear and accessible entry points.*

Clear, accessible, and well-resourced entry points are critical to assessing needs, deploying prevention and diversion services, and connecting households to emergency services. This includes the standardization of navigator services with appropriate oversight and adequate training. We must also develop and distribute clear communication and education to ensure providers and people experiencing homelessness understand the system.

*Intervention 2.1.3: Expand Coordinated Access to include shelter services.*

A system-wide bed reservation policy will reduce trauma and increase safety for households experiencing homelessness who currently seek shelter on a night-by-night basis. This will also ensure that our limited shelter space is distributed equitably through a clearly communicated and accessible process.

*Intervention 2.1.4: Implement Coordinated Access for survivors of domestic violence.*

In 2019, the Baltimore City Continuum of Care was awarded additional funding for the purpose of implemented Coordinated Access for survivors of domestic violence. Implementation of this system will ensure standardized practices and policies, trauma-informed approaches, and integration of population-specific resources and interventions for survivors experiencing homelessness.

*Intervention 2.1.5: Partner with other public agencies to link Coordinated Access to other resources and systems of care.*

Currently, Coordinated Access only functions to connect households to the available RRH and PSH resources. Based on an analysis of the most essential resources and partnerships, Coordinated Access should be expanded to assess additional needs and refer households to necessary health, legal, and supportive services. This should include specific strategies for connecting individuals and families to disability supports and services and resources that permit households to live and thrive in their communities with appropriate support services.

## **Intervention 2.2: Design and Implement a Homelessness Prevention and Diversion Program**

The implementation of prevention and diversion programming will incorporate predictive analytics and proactive case management to assist people in connecting to necessary services. Prevention services focus on providing resources to populations who are at-risk of becoming homeless in order to circumvent a shelter stay. Diversion is a tool utilized to assist providers working with persons experiencing homelessness to identify alternative housing options, when necessary, providing financial assistance to

assist in returning to permanent housing. This intervention will be integrated through clear and accessible entry points at the front door of coordinated entry process and will create a streamlined process to provide short term financial assistance (rental arrears, first month's rent and security deposits, and utility bills) and case management to aide households in stabilizing.

### **Intervention 2.3: Implement a System-Wide Street Homelessness Outreach Strategy**

A comprehensive outreach strategy is necessary to guide efforts to address street homelessness. The Continuum can draw on previous strategic planning efforts to develop specific actions and outcomes to guide this effort. Specifically, a comprehensive outreach strategy should include the following: a gaps analysis to determine the appropriate role and structure of safe haven and bridge housing interventions; expanded outreach capacity to increase access and connections to services and shelter; streamlined and accessible process for requesting outreach; and humane, trauma-informed, and community-driven strategies to respond to street homelessness.

### **Intervention 2.4: Develop and Implement Standards of Care and Training Plan**

All stakeholders must have a clear understanding of homeless service programs offered throughout the CoC, with standardized expectations and competencies across project types.

#### *Intervention 2.4.1: Develop standards of care*

Each of the core project types within the CoC (outreach, drop-in centers, shelters, rapid rehousing, and permanent supportive housing programs) must have clear standards and expectations that guide service delivery and program participation. This should also include a standardized and accessible grievance policy and protocol for all homeless service projects. Additionally, these standards should include mechanisms to assess fidelity to Housing First and corrective action plans for any projects that have not fully implemented it. Given the depth of concerns about the implementation and standardization of shelter and RRH projects, those areas will be prioritized for immediate analysis, development, and implementation.

#### *Intervention 2.4.2 Implement a training plan*

A comprehensive training and technical assistance plan is critical to effectively implement standards of care and ensure a high quality of services across the homeless service system. The Continuum will work with stakeholders to mandate the most critical trainings and provide additional resources to ensure that training and services are culturally appropriate and based on evidence-based and best practices. While an exhaustive list of trainings is not included within the Action Plan, it should include trauma-informed, housing first, harm reduction, mental health first aid, de-escalation techniques, reasonable accommodations, and connecting individuals to disability supports and services. Health partnerships are critical to this intervention as well in order to develop core health-related competencies and utilize existing health resources and partnerships. Additionally, the Continuum will work with lived experience

and other advisory groups to better understand the needs and concerns of those engaging in services and create new opportunities for people with lived experience to inform planning and programming.

### ***Strategy 3: Transform the Shelter System***

Source: This strategy has been proposed to incorporate the recommendations of the Continuum’s Lived Experience Advisory Committee, their recommendations originally presented in October 2017, and the continuous shelter improvement planning efforts still underway.

Description of Need: Emergency shelters play a vital role in ending homelessness. Providing homeless households with a temporary, safe, and supportive environment to address barriers to housing strengthens our system and encourages households experiencing homelessness to seek the assistance needed to end their homelessness. While performance varies across projects and several reform efforts are underway, our emergency shelter system continues to face significant challenges related to both the capacity and quality of the shelter and available services.

The City of Baltimore has responded to the growing need for shelter by providing relief through the conversion of city-owned facilities serving as sheltering locations. Many of these facilities have dire needs related to ongoing plumbing concerns, heating and cooling system failures, lack of kitchen facility space, and an increasingly decomposing physical infrastructure.

Additionally, the service delivery models, policies and practices, and performance outcomes require significant standardization and improvements. People with lived experience report a deeply embedded “culture of punishment” within most shelters, many people have been banned from one or more shelters, and others are unaware of whether or not they may return to shelter. Case management capacity is varied with case manager to bed ratios as manageable as 1:20 and as high as 1:124, offering very few safeguards to reduce trauma and provide access to vital services and housing resources. Furthermore, there are very few system-wide policies and standards and performance outcomes indicate that we are not effectively supporting households. Recent analysis demonstrated an average length of stay in shelter to be as high as 390 days. More than one hundred single adults have been in shelter for more than a year and less than half of single adults were enrolled in Coordinated Access. Income is not consistently reported or tracked.

And finally, even with the City’s investment in vacant facilities for use, additional sheltering capacity is needed throughout the year and during the winter to protect the lives of many of the city’s most vulnerable residents. The shortage of shelter beds dedicated to serve young people is particularly dire. Additional analysis of turn-away data, private shelter practices, and other sources will be required to accurately estimate the actual demand for shelter as compared to the current capacity of our system.

Action Agenda: In light of significant deficiencies within the emergency shelter system, the following four areas of intervention encapsulate the necessary improvements to the physical conditions, service delivery model, discharge coordination, and transportation and access to shelter. This strategy is closely connected to Strategy 2, and the shelter projects will be included within the standards of care and training intervention outlined in 2.4. Additionally, this strategy will be modified to incorporate policies and practices under the race equity agenda.

**Intervention 3.1: Improve Physical Shelter Conditions**

Each physical location will require different short- and long-term strategies, including ongoing maintenance, significant capital improvements, or complete relocation. We must leverage resources to invest in the physical property and make the necessary repairs and upgrades to bring facilities into compliance with required health and safety standards and provide healthy, safe, and supportive environments. This should include an assessment of accessibility within each shelter for individuals with physical and sensory disabilities. This will require the development and execution of a project plan for each sheltering facility scheduled for major capital improvements or replacement. The recommended interventions and timeline for facility repairs includes:

Facility	Population	Intervention	Timeline
Weinberg Housing and Resource Center	Single Women & Men	Maintain current status	-
Sarah’s Hope	Families with Children	Maintain current status	-
Pinderhughes	Single Women & Men	Major system maintenance and capital improvements	FY19 and FY20
Monument Street Men’s Shelter	Single Men	Close facility and relocate immediately	FY19

In addition to major facility improvements, the following actions require interagency collaboration between MOHS, Department of General Services, and others to improve physical shelter conditions on an ongoing basis:

- Complete all outstanding facility maintenance issues at Monument Street Men’s Shelter and Pinderhughes.
- Develop written protocols and improve the reporting of maintenance requests through Archibus. Ensure a system of tracking and a method to elevate critical concerns in a timely manner.

### **Intervention 3.2: Improve and Enhance Service Delivery**

Effective emergency shelters must be safe, supportive and dignified environments. They must adopt a low-barrier, housing first approach to offer immediate and easy services and assist households to quickly transition to permanent housing. Our system must focus on measurable, housing-focused outcomes to guide and improve performance. This requires a collective shift from reactive planning and models where people are spending months and often years towards a proactive system with appropriate resources and services to ensure people can quickly rebound and exit shelter with necessary and appropriate housing and support.

*Intervention 3.2.1: Increase capacity in emergency shelters to be open 24/7.*

*Intervention 3.2.2: Implement a housing-focused and standardized service delivery model across all shelters.*

- Right-size shelter budgets through a systematic review of current shelter contracts, staffing plans, and service delivery models.
- Develop community-based programming and leveraging existing partners and resources to establish collaborative partnerships and co-located services.
- Communicate and collaborate with health system partners to increase the number of respite beds and ensure medically appropriate referrals, shelter placements, and discharge plans.

*Intervention 3.2.3: Reform shelter policies, protocols, and practices to provide adequate oversight and streamlined, consistent and outcomes-focused services.*

- Restructure emergency shelter contracts to include performance outcomes relating to the city's efforts to reduce homelessness, including reducing the average length of stay, improving exits to permanent housing, decreasing recidivism, and increasing income.
- Develop and implement a comprehensive monitoring schedule for all general funded emergency shelter contracts.
- Implement system-wide, standardized policies to include regular site assessments, a consistent and accessible grievance policy and protocol, and standard expectations for length of stay. Length of stay restrictions may be considered and implemented only with a robust plan for demonstrating intensive case management services, multi-agency case conferencing, demonstrated and varied housing offers, and a clear transition plan.
- Review and revise policies and procedures to clearly state that shelter providers must provide reasonable accommodations based on disability.
- Provide access to nutritionally balanced meals by restructuring shelter contracts with guidance pertaining to the provision of healthy food requirements for emergency shelters and encouraging providers to make new partnerships and develop innovative strategies.

### **Intervention 3.3: Engage Partners for Comprehensive Discharge Planning**

Better collaborations are essential to reduce the incidence of homelessness amongst persons exiting hospitals, criminal justice systems, and foster care. Specifically, we must ensure that people exiting these institutions are appropriately assessed prior discharge and connected to the necessary resources.

### **Intervention 3.4: Develop a Citywide Transportation Initiative**

A new system must be developed to introduce a coordinated and dignified process to access shelter and other emergency services. A citywide transportation system with designated hubs would protect people from inclement weather, reduce the physical and emotional burden of trekking across multiple locations and waiting for extended periods of time, and would allow people to engage in services and clear entry points while they await transportation.

### ***Strategy 4: Improve Access to Employment and Economic Opportunities***

Source: This strategy has been proposed to incorporate the recommendations of the Continuum's Journey to Jobs project and Employment and Income Workgroup.

Description of Need: Housing and employment are inextricably linked, and households experiencing homelessness rely jointly on workforce and homeless service systems to provide opportunities that lead to housing and economic stability. However, these two systems operate independently of one another and providers are not equipped with the resources to simultaneously address housing and economic needs, leaving many households under-served by both systems. While only 17% of adults in the Homeless Management Information System (HMIS) maintained or increased employment income, we know that two-thirds of people experiencing homelessness express interest in employment and 13% of people assessed by Coordinated Access were working, but not earning enough to become or remain housed.<sup>vii</sup> We also know that many households are facing multiple barriers to housing and economic stability, included but not limited to the impact of criminal records, educational and work history requirements, sobriety restrictions, and transportation. Our system policies and practices are often uncondusive to seeking and sustaining employment, we lack the necessary performance data to drive interventions, and we do not effectively equip people experience homelessness with access to information and resources related to employment and income. Furthermore, racial disparities exist across all aspects of the workforce and related systems.

Action Agenda: It is imperative that we restructure our systems and retool front line service providers to meet these intersecting needs. A comprehensive employment and income strategy and cross-sector solutions are necessary to support the goals of homeless jobseekers, eliminate barriers to employment and income stability, and assist homeless persons in obtaining and sustaining housing. Metrics should be aligned with HUD, WIOA, and local common performance metrics and include an analysis of

employment status, increases in wage and non-wage income, access to meaningful and livable wage jobs and career pathways, and race equity across all metrics. Key action items include:

**Intervention 4.1: Integrate employment & income resources through a two-pronged system-wide referral process.**

People experiencing homelessness who indicate that they are interested in employment will be referred into the workforce system, while those not interested in securing immediate employment services will be referred to practitioners providing benefits counseling.

*Intervention 4.1.1: Develop data-sharing infrastructure, practices, and policies between the workforce and homeless service systems.*

By cross-referencing data in HMIS and the employment system, we will establish better baseline data on the economic status, needs, and outcomes of households experiencing homelessness. The data-sharing infrastructure will also facilitate the integration of cross-sector referral and outcome tracking mechanisms.

*Intervention 4.1.2: Utilize clear entry points to facilitate referrals and access to services across both systems.*

The implementation of connected or co-located entry points facilitate access to both the workforce and homeless service systems. This will require the development of effective assessment and referral tools that actively link services across systems, as well as the development of specialized trainings to ensure effective access for people experiencing homelessness.

*Intervention 4.1.3: Replicate this integration model to include benefits and barrier removal services.*

This should include the incorporation of benefits counseling and education for providers and people experiencing homelessness. Additional options may include services such as credit repair, expungement, bankruptcy and debt relief, and access to banking and credit.

**Intervention 4.2: Create integrated learning communities.**

The integration of employment resources will require cross-training and partnership development for both workforce and homeless service providers to ensure competencies related to serving people experiencing homelessness. This requires the establishment of an employment and income learning community within the CoC that can be closely linked to other practitioner groups and communities of practice (i.e. Mayor's Office of Employment Development (MOED) Practice Advisory).

**Intervention 4.3: Reform policies and practices to support economic opportunity.**

Build additional capacity in key homeless service programs, including specific strategies within shelter, rapid rehousing, and permanent supportive housing programs. This must include the revision of contracts, resource alignment, and budget and policy advocacy to increase support and funding for employment navigation and workforce services. Additionally, consideration should be given to how new



workforce development projects can be implemented to provide transitional job and other paid opportunities for people experiencing homelessness.

### ***Strategy 5: Establish a Race Equity Agenda***

Source: This strategy has been proposed to incorporate the recommendations of the Continuum’s Journey to Jobs project, its analysis of racial disparities within and across systems, and its primary recommendation to implement a race equity agenda.

#### Description:

The preponderance of evidence demonstrating racialized inequities within homeless service systems and across multiple other systems compels us to adopt a racial equity lens. The numbers of African Americans seeking homeless assistance is staggering both nationally and locally, as people of color experience homelessness at significantly greater rates, even when controlling for poverty.<sup>viii</sup> Analysis of our own system demonstrated that 79% of all individuals and 87% of young adults in HMIS identified as Black or African American.<sup>ix</sup>

Additionally, pathways out of homelessness for people of color are constricted by historic and ongoing discrimination in education, housing, employment, and health care. African-American people have for centuries and up until the present day, been systematically excluded from neighborhoods and home ownership opportunities, the single greatest driver of wealth accumulation in this country. Furthermore, people of color are paid less and offered fewer jobs than whites and discrimination in criminal justice practices and policies has left catastrophic numbers of people of color with criminal records that further limit access to housing and jobs. The racial wealth gap<sup>x</sup>, disparities in home ownership<sup>xi</sup>, pay inequity<sup>xii</sup>, and racialized policing<sup>xiii</sup>, and many other racial disparities (i.e. neighborhood segregation; racialized access to transportation, food, and quality schools; health outcomes; services and development incentives) have all been well-documented and reporting in Baltimore City. Without equal access to wealth accumulation, home ownership, and livable wages, a vehicle breaking down, a sick kid, or a utility shut off notice can quickly lead to homelessness.

Another dimension—one that is difficult for many of us to acknowledge—is the bias, discrimination, and underrepresentation that exists within the homelessness response system itself. Our system and many of our agencies are ill-equipped to respond adeptly to the needs of communities of color. Additionally, agency staff too often lack the diversity of the people they serve. Even when they do, staff of color are statistically more likely to occupy low-paid jobs with less influence over programs and policy, while leadership is disproportionately white.

In these and other ways, the deck is stacked against people of color prior to homelessness, and it is

stacked against them again as they struggle to move out of homelessness. It is the responsibility of all of us working to end homelessness to begin seeing the problem and opportunities through the lens of race. We must recognize that approaching homelessness through a racial equity lens is not playing favorites; it is responding to the data. Through this difficult and courageous work, solutions begin to emerge and together we will begin to dismantle, brick by brick, the walls of structural racism that we as a society have spent centuries constructing.

Action Agenda: A designated strategy has been included to prioritize the development of a race equity agenda for all Continuum planning, activities, and policies. The inclusion of this strategy should not be interpreted as an indication that it is not also relevant to each of the other key strategies. Once the initial interventions of these strategy are completed, race equity principles will be incorporated into all other aspects of the Action Plan. The following three areas of intervention are necessary to begin the work of building and implementing a race equity agenda. As our understanding and capacity increases, these interventions will be modified and complemented with clear and measurable outcomes.

**Intervention 5.1: Review and revise data collection, analysis, and evaluation strategies.**

*Intervention 5.1.1: Complete an initial review of existing data.*

A robust understanding of the homeless service system is necessary to understand the ways that our services, policies, and performance are impacted by and perpetuating racial inequity. This analysis will include a review and disaggregation of the current federal and local performance measures, patterns of housing placement by neighborhood, utilization of the HUD racial disparities tool, and other relevant data sources to identify and understand racial disparities and intersections with gender, sexual orientation, language, and other relevant characteristics. This analysis will also include the design and implementation of an initial assessment to better understand the policies, practices, budgets and pay scales, and demographic characteristics of MOHS, the CoC, and service provider network.

*Intervention 5.1.2: Reform data collection and analysis standards.*

The initial review can inform revisions to performance metrics and benchmarks and reporting practices to ensure that we disaggregate data and analyze and address disparities in services and outcomes on an ongoing basis, including an annual assessment tool that tracks progress and outcomes related to the overall Action Plan on Homelessness.

**Intervention 5.2: Provide training and technical assistance on race equity.**

In order to develop common language and deepen a shared vision, we must set clear expectations and identify core competencies and implement the necessary trainings and technical assistance to equip providers, organizations, and our CoC with the tools to implement a race equity agenda. As we build this

foundation, MOHS and the CoC will work to deepen this shared vision and refine goals to operationalize our commitment to race equity.

**Intervention 5.3: Reform practices and policies to address and rectify racial disparities.**

*Intervention 5.3.1: Embed race equity principles, expectations, and requirements in all aspects of the CoC planning, service delivery, and policies.*

Once we have completed the necessary data analysis and established our race equity agenda, we must reform practices and policies that perpetuate or exacerbate racial disparities. This may include revision of grant criteria, funding processes, and service contracts, review of all Continuum policies, and a reconfiguration of Continuum planning efforts and scopes of work, and sustainable implementation of training and technical assistance.

Second, our system must target resources to end homelessness for those disproportionately impacted. Without such targeting of resources, homelessness will continue to disproportionately affect people of color. This must include strategies that go upstream and focus on prevention, as well as strategies that account for intersections between systems and the pipelines into homelessness from criminal justice, child welfare, and foster care systems.

*Intervention 5.3.2: Ensure people of color have appropriate representation, decision-making authority, and avenues for professional development.*

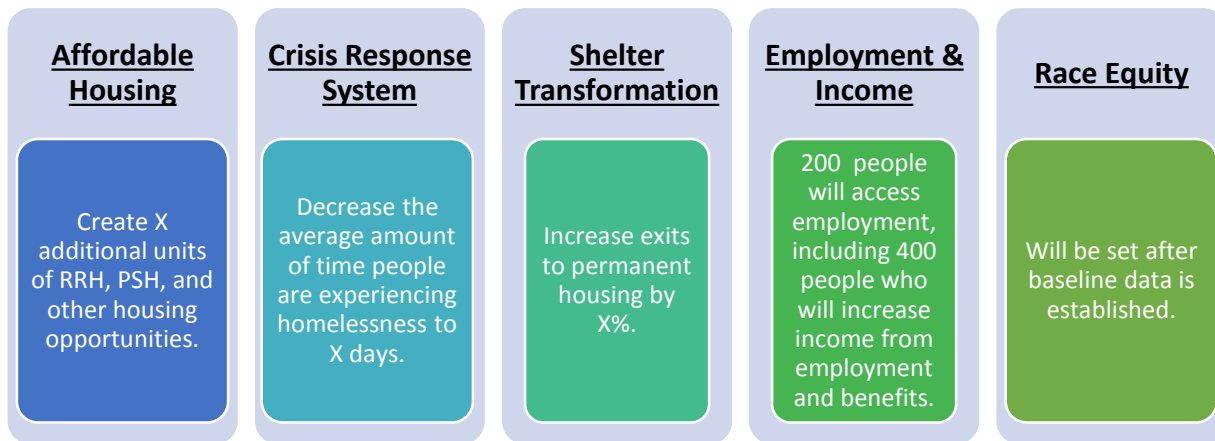
Our system and network of organizations have a responsibility to assess our hiring practices and grow new leaders of color to shape the future of our national and local response to homelessness. The Continuum will create professional development and advancement opportunities for people of color within organizations, planning bodies, and leadership boards. As appropriate, this will include a review of job descriptions, position requirements, and recruitment strategies and recommendations to eliminate racialized barriers to employment and decision-making opportunity.

And finally, every conversation about preventing or ending homelessness must include the voice and perspective of people of color who have been there. By amplifying the voices of people who have experienced homelessness—particularly people of color—we will come to understand new strategies and new solutions. This may include collaborations to align and increase access to career pathways for people with lived experience.

**Strategy-Focused Outcomes**

To be successful, this action plan must set specific and quantifiable benchmarks and deadlines that will promote community-wide commitment, foster accountability, and enable us to measure the efficacy of our strategies and their implementation. One high-level outcome will be assigned for each of the five key

strategy areas, with the understanding that additional process and outcome measures will be established for each of the strategies and their corresponding interventions.



## **Budget and Resource Development Strategies**

It is important to understand that achieving this goal of ending homelessness will only be achieved by a major, significant investment of additional funding and other resources. While many of the interventions within this Action Plan can be advanced by efficiently prioritizing our current capacity, many others will require significant new investments or realignment of existing funding streams in order to achieve measurable impact for our residents experiencing homelessness. The following action plan overview and description of resource development opportunities begins to chart strategies for ensuring that our interventions are paired with key partnerships and adequate public and private resources.

### ***Action Plan Overview***

See Appendix A for the action plan overview, including preliminary timelines, key partnerships, and potential resource opportunities.

### ***Opportunities for Resource Development***

To be successful, Baltimore City will need strong leadership, an investment in coalition building, strong partnerships, a sense of urgency, and a determined willingness to prioritize ending homelessness and make the changes necessary to focus more resources on services and housing for the homeless population.

### **Realign Existing Local Public Resources**

#### *Community Development Block Grant Funds (CDBG)*

Other cities have prioritized significant use of CDBG funding for services and housing targeting individuals and families experiencing homelessness. Chicago, for example, prioritizes almost \$9M, accounting for 25% of its total CDBG budget, to address homelessness. It is recommended that we realign a significant portion of these funds in Baltimore City to be strategically redeployed to do the same.

### *HOME funds*

The federal HOME Investment Partnership Program provides formula grants to States and localities that communities use - often in partnership with local nonprofit groups - to fund a wide range of activities including building, buying, and/or rehabilitating affordable housing for rent or homeownership or providing direct rental assistance to low-income people. While this source of funding is limited, if this funding was prioritized for housing for homeless individuals and families, it could play a key role in providing the capital funding to create more units of permanent supportive housing for person experiencing homelessness.

### *TANF Funding*

In Salt Lake City, Utah, in order to address increased demand on shelters, Temporary Assistance for Needy Families (TANF) funds, paired with public and private investments, were used for rapid rehousing services, resulting in a 500% increase in the number of families served in shelters, due to increased flow of families into permanent housing. Baltimore could replicate such an effort and realign TANF funding to enhance its Rapid Rehousing interventions. While conversations have been held on using this potential resource to be a significant funding source for rapid rehousing, there has been no progress to date on deploying TANF funds in this manner, which would represent another source of significant funding to end homelessness through rapid rehousing services.

### *WIOA and Other Workforce Funding*

While homeless individuals are identified as a priority population within the local workforce plan, federal Workforce Innovation and Opportunity Act (WIOA) funding, local workforce resources, and Department of Rehabilitation Services (DORS) funding in Baltimore City are not specifically dedicated to serving the needs of the homeless population. In Houston, Texas, a significant investment was made in creating new employment services dedicated for the homeless population by incorporating both public and private resources. Income solutions will be critical to the effectiveness of the Coordinated Access expansion and resources need to be identified to support the new system.

### *Medicaid*

In Maryland, a Medicaid waiver pilot was initiated in 2018 to provide case management and supportive services for 100 chronically homeless clients living in permanent supportive housing. Significant expansion of the use of these Medicaid waiver funds would provide a valuable resource to fund the vital supportive services that are needed to pair with housing subsidies in order to help recipients maintain stable housing. While Baltimore City does not control the use of Medicaid waiver funding, it should strongly advocate for expansion to meet the needs of the chronically homeless for permanent supportive housing and should pursue opportunities to apply for funding in future rounds.

### *Housing Choice Voucher Program*

While Baltimore City invests a considerable amount of resources for vouchers dedicated to households exiting homelessness, there is huge potential for MOHS and HABC to collaborate and leverage their efforts for greater impact on ending homelessness.

### *Affordable Housing Trust Fund*

In 2018, the tremendous efforts and advocacy of Baltimore City residents compelled City officials to fund this affordable housing trust, committing to eventual funding of \$20 million a year by levying two excise taxes on certain real estate transactions and other allocations. The trust fund will be used create, rehabilitate and preserve more than 4,100 affordable housing units in the next decade. Baltimore City should prioritize ending homelessness by targeting a significant portion of the fund to create housing opportunities for people experiencing homelessness. One potential opportunity would be a commitment to establishing the Local Housing Voucher Program.

### *Disability Services and Resources*

The homeless service system should increase alignment with services and resources for individuals with disabilities, including through the Developmental Disabilities Administration (DDA), community mental health services, the Autism Waiver, Community First Choice, the 811 Permanent Supportive Housing program, Supported Employment and DORS, and any other services. The CoC can advocate for increased access and funding for needed supports to allow people with disabilities to live in their communities with appropriate supportive services. This may include advocacy and partnerships with disability services agencies and providers and for strategies to improve funding and the structure of supports that make them responsive and accountable to the individual and family, not vice versa.

## **Maximize the Use of Philanthropic Partnerships**

### *Public and Private Funding Alignment*

Private philanthropy from foundations and corporations can and does play a significant role in providing funding resources to end homelessness in Baltimore through direct funding, coordination, and visibility for the cause and the Continuum's private funding scan identified current private foundation funding of approximately \$11 million. With proper planning and private funder engagement, it is possible that this funding could be realigned around a collective strategy that complements public investments, more strategically addresses gaps, and maximizes impact. The recent launch of Funders Together to End Homelessness – Baltimore provides an incredible opportunity to align efforts around shared performance measures and funding objectives.

### *Improved Fundraising and Private Investment*

Many other cities have successfully demonstrated the impact of private philanthropy (both corporations and foundations) in bolstering efforts to end homelessness. In Boston, the Mayor led an effort to secure

\$10 million in private funds and leveraged public resources in support of their action plan. In Atlanta, a diverse, public/private Regional Commission on Homelessness was formed, and in 2017, announced a \$50 million initiative, consisting of \$25 million in City funds and \$25 million in private funds. Baltimore should establish an ambitious but achievable goal for new annual private sector funding dedicated to ending homelessness.

### **Implement a Resource Development Strategy**

While a number of thoughtful strategies have been identified by the Continuum and incorporated in this Action Plan, the quantity and focus of investments must be determined with greater precision. The Continuum's Action Plan must be paired with an ongoing, intensive analysis of HMIS and other data sources to set measurable and achievable action steps and timelines to achieve our desired outcomes to achieve a functional end to homelessness in Baltimore City in a defined period of time. One option would be to create a task force that can launch an audacious resource development effort aimed at fostering the committed participation, collective will, and coordinated efforts of many critical partners acting under the steady guidance and leadership of the City and CoC.

## **Long-Term Vision and Next Steps**

### **Living Document**

This Action Plan sets specific strategies and action steps for the next two to three years to generate momentum and prioritize implementation of the most urgent and important interventions for maximum impact and based what can be accomplished within our current environment and with existing or viable resource alignment opportunities. As our data quality improves, we see what is and is not working, community priorities change, and the landscape shifts, so will our plan and our efforts. Regular data analysis, public feedback opportunities, and reporting on this plan will be required on at least a quarterly basis.

### **Next Steps: Launch Agenda**

Once approved, Board membership, Continuum members, and MOHS staff will all be expected to prioritize time, energy, and resources to implement the strategies and interventions. In order to achieve success, we must immediately:

- Develop detailed workplans for each of the key strategy areas, including specific tasks and assignments of responsibility;
- Attach baseline data and required process and outcome measures to the overall Action Plan and each key strategy in order to further assess need and track progress;
- Quantify the anticipated impact of key interventions and identified the amount of funding and resources needed to complete interventions;

- Identify and recruit key stakeholders to contribute to the Action Plan; and
- Finalize a schedule and structure for presenting final workplans and reporting progress to the Board and Continuum.

### **Long-Term Vision on Homelessness**

Our CoC is still committed to the value that homelessness is solvable and that will continue to be our vision. This action plan serves as an incremental step towards that larger goal with the plan to increase capacity for larger, sustainable impact. The Board may design long-term planning mechanisms and activities to ensure that this action plan contributes to the long-term vision of ensuring that homelessness is a rare, brief, and nonrecurring experience.

---

<sup>i</sup> Mayoral Workgroup on Homelessness Report

<sup>ii</sup> Mayoral Workgroup on Homelessness Report

<sup>iii</sup> Out of Reach 2018: The High Cost of Housing. National Low Income Housing Coalition. Retrieved from [https://reports.nlihc.org/sites/default/files/oor/OOR\\_2018.pdf](https://reports.nlihc.org/sites/default/files/oor/OOR_2018.pdf)

<sup>iv</sup> The Double Crisis: A Statistical Report on Rental Housing Costs and Affordability in Baltimore City, 2000-2013. The Abell Foundation. Retrieved from <https://www.abell.org/publications/double-crisis-statistical-report-rental-housing-costs-and-affordability-baltimore-city>

<sup>v</sup> Keeping the Water On: Strategies for addressing high increases in water and sewer rates for Baltimore's most vulnerable customers. The Abell Foundation. Retrieved from <https://www.abell.org/sites/default/files/publications/Keeping%20the%20Water%20On.pdf>

<sup>vi</sup> Justice Diverted: How Renters Are Processed in the Baltimore City Rent Court. Public Justice Center. Retrieved from: [http://www.publicjustice.org/uploads/file/pdf/JUSTICE\\_DIVERTED\\_PJC\\_DEC15.pdf](http://www.publicjustice.org/uploads/file/pdf/JUSTICE_DIVERTED_PJC_DEC15.pdf)

<sup>vii</sup> Journey to Jobs: Understanding and Eliminating Barriers Imposed on Homeless Jobseekers. Baltimore City Continuum of Care. Retrieved from: <http://www.journeyhomebaltimore.org/journey-to-jobs/>

<sup>viii</sup> Phase One Study Findings. Supporting Partnerships for Anti-Racist Communities (SPARC), Center for Social Innovation. Retrieved from <http://center4si.com/wpcontent/uploads/2018/03/SPARC-Phase-1-FindingsMarch-20181.pdf>

<sup>ix</sup> Journey to Jobs: Understanding and Eliminating Barriers Imposed on Homeless Jobseekers. Baltimore City Continuum of Care. Retrieved from: <http://www.journeyhomebaltimore.org/journey-to-jobs/>

<sup>x</sup> Racial Wealth Divide in Baltimore. Prosperity Now. Retrieved from: [https://prosperitynow.org/files/resources/Racial\\_Wealth\\_Divide\\_in\\_Baltimore\\_RWDI.pdf](https://prosperitynow.org/files/resources/Racial_Wealth_Divide_in_Baltimore_RWDI.pdf)

<sup>xi</sup> Mapping the Black Home Ownership Gap. Urban Institute. Retrieved from: <https://www.urban.org/urban-wire/mapping-black-homeownership-gap>

<sup>xii</sup> Analysis of Patterns of Employment by Race in Baltimore City and the Baltimore Metropolitan Area. Associated Black Charities. Retrieved from: <http://www.abc-md.org/reports>

<sup>xiii</sup> U.S. Department of Justice Civil Rights Division. Investigation of the Baltimore Police Department.



Strategy	Benchmarks of Success	Interventions	Timeline	Partners & Resources Required	Existing & Potential Funding Sources	
<b>1. Affordable Housing</b>	Increase housing inventory by creating X additional housing placements by 2021.	1.1 Analyze Current Housing Inventory and Need	Year One		<i>Existing MOHS capacity</i>	
		1.2 Create New Affordable Housing	Year Two	<i>[Insert estimates from Housing memo?]</i>		
		1.3 Launch a Local Voucher Program	Year Two	<i>[Insert estimates from Housing memo?]</i>	Potential sources: <ul style="list-style-type: none"> <li>• General funds</li> <li>• Local tax</li> <li>• AHTF</li> </ul>	
		1.4 Increase Investments in Rapid Rehousing	Year Three	<i>[Insert estimates from Housing memo?]</i>	Committed or existing sources: <ul style="list-style-type: none"> <li>• CoC - DV Bonus funds</li> <li>• BHSB</li> <li>• CoC and ESG funds</li> </ul> Potential sources: <ul style="list-style-type: none"> <li>• CoC and ESG funds</li> <li>• General funds</li> <li>• TANF funds</li> </ul>	
		1.5 Support and Promote Policies that Prevent and End Homelessness	Advocate for Affordable Housing Trust Fund allocations to address homelessness.	Year One and Two	DHCD AHTF Commissioners	Improved alignment of AHTF \$
			Utilize CDBG and HOME funds to prioritize ending homelessness.	Year One and Two	DHCD	Improved alignment of DHCD \$
			Implement a “Move On” Strategy Utilizing Housing Choice Vouchers.	Year Two	HABC	Improved alignment of HABC \$
			Low Income Housing Tax Credit Policies	Year Two	State DHCD	Improved alignment of HUD \$
			HABC Minimum Rent Requirement	Year One	City of Baltimore HABC	
			Inclusionary Housing Ordinance	Year Three	City of Baltimore City Council	
1.6 Expand the Medicaid Pilot Program and other health system partnerships and funding models.	Year One	City of Baltimore State and local health systems				

					<i>[Insert estimates based on current investment?]</i>	
<b>2. Effective Homeless Response System</b>	Increase exits to permanent housing by X by 2021.	2.1 Enhance Coordinated Access	Analyze existing Coordinated Access data, policies, and procedures.	Year One	MOHS and CoC	<i>Existing MOHS capacity</i>
			Establish clear and accessible entry points.	Year One	MOHS and CoC	<i>Improved alignment of MOHS \$: General, State, and CoC/ESG funds</i>
			Implement Coordinated Access for shelter services.	Year Two	MOHS and CoC	<i>Improved alignment of MOHS \$: General, State, and CoC/ESG funds</i>
			Implement Coordinated Access for survivors of domestic violence.	Year One	MOHS, CoC, and domestic violence service partners	<i>Existing MOHS and CoC capacity</i>
			Partner with other public agencies to link Coordinated Access to other resources and systems of care.	Year Three	MOHS and CoC Health partners/hospitals Other critical referrals	<i>Improved alignment of other systems</i>
		2.2 Implement a Homelessness Prevention and Diversion Program	Year One	MOHS and CoC DSS Legal services	Committed or existing sources: State and ESG funds Potential sources:	
		2.3 Implement a System-Wide Outreach Strategy		MOHS and CoC Health systems	<i>Improved alignment of MOHS \$: General, State, and CoC/ESG funds</i>	
		2.4 Implement Standards of Care and Training Plan	Develop standards of care	Year One and Two	MOHS and CoC	<i>Existing MOHS capacity</i>
			Implement a training plan			
		<b>3. Shelter Transformation</b>	Decrease the length of stay in homelessness to X by 2021.	3.1 Improve Physical Shelter Conditions		Year One
3.2 Improve and Enhance	Increase to 24/7 capacity in emergency shelters.			Year One	City of Baltimore MOHS	Potential sources: <ul style="list-style-type: none"> <li>• General funds</li> <li>• State funds</li> </ul>

		Service Delivery	Implement a housing-focused and standardized service delivery model across all shelters.	Year One	MOHS	<i>Existing MOHS capacity</i>
			Reform shelter policies, protocols, and practices to provide adequate oversight and streamlined, consistent and outcomes-focused services.	Year One	MOHS	<i>Existing MOHS capacity</i>
		3.3 Engage Partners for Comprehensive Discharge Planning			MOHS Hospitals Jails	<i>Existing MOHS capacity Improved alignment of other systems</i>
		3.4 Develop a Citywide Transportation Initiative		Year One	MOHS	<i>Improved alignment of MOHS \$: General, State, and CoC/ESG funds</i>
<b>4. Employment &amp; Income</b>	200 people will be placed in employment and 400 people will increase income from employment.	4.1 Integrate employment & income resources through a two-pronged system-wide referral process.	Develop data-sharing infrastructure, practices, and policies between the workforce and homeless service systems.	Year One	Dedicated system planning from MOHS and MOED	<i>Improved alignment of MOHS and MOED Heartland Alliance and AECF grant (committed)</i>
			Utilize clear entry points to facilitate referrals and access to services across both systems.	Year Two	Dedicated system planning from MOHS and MOED MOED and other workforce services	<i>Improved alignment of MOHS and MOED Heartland Alliance grant (committed)</i>
			Replicate this integration model to include benefits and barrier removal services.	Year Two and Three	SOAR, DSS, DORS, BHSB, legal services	<i>Heartland Alliance Grant (committed) WIOA, DORS, BHA, DSS</i>
		4.2 Create integrated learning communities.		Year One	MOHS and MOED Associated Black Charities	<i>Heartland Alliance Grant (committed) CoC planning grant (existing) Other existing learning communities (MOED, ABC)</i>
		4.3 Reform policies and practices to support economic opportunity.		Year Two and Three	MOHS and MOED JOTF and advocacy efforts	Potential existing or new sources: <ul style="list-style-type: none"> <li>• WIOA and other workforce \$</li> <li>• Foundations</li> </ul>
<b>5. Race Equity</b>	To be identified after baseline data is established.	5.1 Revise data collection and strategies.	Complete an initial review of existing data.	Year One	Dedicated MOHS time to complete analysis Evaluation experts (universities or consultants)	<i>Existing MOHS capacity</i>
			Reform data collection and analysis standards.	Year One		

		5.2 Provide training and technical assistance on race equity.	Year One and Two	Race equity experts (ABC, BRJA, etc.) Funding for training and technical assistance	<i>Existing MOHS capacity</i> <i>AECF grant (existing)</i>
	5.3 Reform practices and policies to address and rectify racial disparities.	Embed race equity principles, expectations, and requirements in all aspects of the Continuum of Care planning and service delivery.	Year Two	Race equity experts (ABC, BRJA, etc.) Funding for technical assistance	<i>Existing MOHS capacity</i> Potential source: Foundations
		Ensure people of color have appropriate representation, decision-making authority, and avenues for professional development.	Year Two		