ACKNOWLEDGEMENTS

This report assessing impact and progress of the Grand Rapids and Kent County Vision to End Homelessness (Vision) was produced by The Cloudburst Group (Cloudburst) under contract with the Steelcase Foundation, Dyer-Ives Foundation, Grand Rapids Community Foundation, and Frey Foundation. We would like to offer a special word of thanks and gratitude to the representatives of these four local philanthropic organizations for their continuing guidance, support, and insight throughout the assessment process. They have been essential in our efforts to recruit key informants, access critical background information, and reflect on emerging data and findings.

Cloudburst also wishes to thank the many dozens of caring and concerned community citizens, leaders, and practitioners in the Grand Rapids and Kent County area for their openness, their thoughtfulness, and their candor in sharing the information, insights, and reflections that inform this report. Many community stakeholders participated in both group and individual interviews, and several were active in providing follow-up written information and documentation when requested. This includes many ‘Vision veterans’ who are no longer directly involved in the day-to-day work of ending homelessness in the community but have been significant contributors in times past. In this same vein, our Assessment Team wants to share a special note of thanks to the staff of the Coalition to End Homelessness, the Essential Needs Task Force, and the community’s Homeless Management Information System. All have been especially forthcoming over the entire period of our assessment efforts and have been pricelessly supportive in responding to our needs for assistance with meeting logistics, document retrieval, and data development, and oft-times in helping clarify the ‘lay of the land’ regarding local systems and structure.

We applaud the deep and sincere commitment that so many individuals, agencies, and organizations in the community (both in the public and private sectors) have consistently demonstrated in their shared desire to fulfill the broader goals and aims of the Vision, and their abiding concern to do all that they can to prevent and end homelessness in the Grand Rapids Area.

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In 2004, the then-named Grand Rapids/Kent County Housing Continuum of Care (HCOC) -- now the Coalition to End Homelessness (Coalition) -- initiated a broad-based community planning effort aimed at transforming the community’s response to the crisis of homelessness. These entities brought together sheltering organizations, housing providers, community and business leaders, municipal officials, philanthropic organizations, and other key local stakeholders for the purpose of creating a broad and coordinated response to homelessness across Grand Rapids and Kent County, Michigan. The result was the publication of the Vision to End Homelessness (Vision), with goals and action recommendations framed out over a ten-year horizon. The Vision was premised on the idea that the community would shift from ‘managing’ homelessness to ‘ending’ it. Rather than just providing a crisis-oriented response, it would strive to create solutions to the challenges of obtaining housing for persons who were homeless and maintaining housing for those who were imminently at-risk. As such, the Vision sought to re-orient local response from emphasis on provision of emergency shelter towards focus on preventing housing crisis and ensuring rapid re-housing of individuals and families who had fallen into homelessness. The Vision articulated a comprehensive set of strategies and approaches by which the community intended to meet a long-term goal of preventing and ending homelessness in Grand Rapids and Kent County over the coming decade.

As the Vision passed its ten-year milestone, a group of Grand Rapids Area philanthropies (Steelcase Foundation, Dyer-Ives Foundation, Grand Rapids Community Foundation, and Frey Foundation) commissioned The Cloudburst Group (Cloudburst), an independent national consulting firm with extensive history and experience in addressing homelessness and strong roots in the state of Michigan, to assess the community’s progress in fulfilling the goals of the Vision. More specifically, this assessment was designed to:

- Explore and report back on the impact of the Vision and progress towards meeting its articulated goals, taking into account ongoing changes in the local, state, and national economic and policy environments over the past decade;
- Review the current status of the community’s response to homelessness, and identify ‘lessons learned’ from the process of implementation of Vision strategies and goals;
- Provide high-level recommendations regarding future practice and priorities for community consideration grounded in reflection on the history of the Vision’s implementation, analysis of housing market conditions, and summary review of homeless population data accessible in the community’s Homeless Management Information System (HMIS); and
- Provide the community with a practice-oriented reflection on its efforts spanning the prior decade in order to support and help advance success in its continuing commitment to preventing and ending homelessness.
SUMMARY OF ASSESSMENT METHODOLOGY

In the months between June and September, 2015, Cloudburst’s Vision Assessment Team actively engaged with key community stakeholders and representatives of public and private sector organizations to conduct a comprehensive review of the history, process, and progress of Vision implementation. Staff from the Coalition and funders of the assessment process were extraordinarily helpful in facilitating access to key informants and community data. Through an array of both onsite and remote efforts, the Cloudburst Team conducted a comprehensive assessment process that included:

- One-on-one key informant interviews with 23 individuals;
- Twelve (12) group interviews and focus groups comprising 44 participants;
- Deployment and analysis of an online survey to over 90 Coalition members, with 41 respondents;
- Review of related primary source and historical documentation from the archives of the Vision implementation, the Coalition, and other local entities;
- Review and analysis of data from annual HUD Point-in-Time counts and Annual Homeless Assessment Reports (AHAR) (dating back to 2005);
- Review and analysis of data from the Coalition’s Homeless Management Information System (HMIS); and
- Review and analysis of local economic, demographic, and housing market data.

With this data in hand, in the period between late July and November, 2015, the Cloudburst Team compiled results, developed initial analyses, reviewed and reported on draft findings and recommendations, and then crafted a final written report.

CORE INSIGHTS AND KEY FINDINGS

Two core insights frame many of the key findings of this assessment report:

1. The Vision document served as an eloquent and thoughtful statement of principles and values that should - and would - guide and re-orient community-wide efforts in creating a homeless response system based on the core strategic commitments of “closing the front door to homelessness”, “opening the back door to homelessness”, and “building the infrastructure needed to end homelessness” in the Grand Rapids Area. While the Vision articulated a number of overarching strategies (e.g., ‘Housing First’; centralized and coordinated assessment; data-based and data-driven programming) that would be critical for impact in the ensuing decade, it never really established an action-oriented strategic plan to implement these principles. Although the Vision established a ten-year horizon for its efforts, it didn’t actually lay out a ten-year ‘action plan’. As such, it is possible to assess progress towards fulfillment of the Vision’s broader goals, but is extraordinarily difficult to measure achievement of specific objectives or score fulfillment of the Vision as a ‘plan’. As several key informants underscored in the review, this community process clearly laid out an aspirational vision, but failed to articulate a workable plan for preventing and ending homelessness in the community.

2. That fact notwithstanding, it is abundantly clear that the Vision’s stated values and principles have, indeed, helped in reshaping and reframing homeless practice in the community over the past decade. Not only
has the Vision succeeded in substantially altering the trajectory of homeless response and the terms of conversation in the community, its core commitments and goals continue to inform the community's planning, priorities, and investments. Both public and private sector funders, as well as direct practitioners and organizational leaders, still appear to be grounding their development of strategy and practice in terms consistent with the underlying focus and emphases of the Vision.

REVIEW OF PROGRESS IN FULFILLING THE ‘VISION’

In this context, the Grand Rapids/Kent County community can point to significant progress towards fulfilling many of the broad goals articulated in the Vision, including:

- Broad acceptance of housing as the primary solution to homelessness -- including shifting emphasis from provision of shelter as the community's primary response to housing crisis -- to significant, though not universal, embrace of ‘Housing First’ as a key re-housing strategy;
- Establishment and broad use of a coordinated entry and assessment system in order to more consistently and comprehensively assess consumer needs, and more efficiently refer consumers to available and relevant housing-related resources;
- Expansion of the community's permanent supportive housing (PSH) inventory;
- Shifting of resources from emergency shelter operations towards increasing investment homelessness prevention and Rapid Re-Housing (RRH);
- Expansion of local participation in HMIS data entry, and substantial improvement in HMIS data quality, integrity, and reliability; and
- Strengthening of the Coalition as an entity with the leadership, transparency, structure, and capacity to more effectively direct and facilitate community planning, systems design and evaluation, and continuing implementation of the Vision's principles and priorities.

At the same time, several important goals were either not met or met only to a limited degree. Included among these:

- The total number of emergency shelter beds have increased over time, rather than decreased (though with legitimate rationale in relation to scope of need).
- Neither the annualized totals nor Point-in-Time (PIT) count numbers of homeless persons have decreased (though this is complicated by expanded participation of local organizations both in HMIS and the annual PIT count).
- The number of chronically homeless single adults has not substantially decreased.
- The quality and integrity of HMIS data has only recently become sufficient to use for local planning and evaluation, and the community's capabilities for accessing, reporting out on, and analyzing and applying available data are still somewhat limited.
- Broader homelessness prevention strategies linked to desired provider/tenant/landlord collaborations, in particular, were not fully implemented as a system-wide strategy, although several agencies and organizations have been able to negotiate and leverage private landlord relationships that have been of value to their own clientele.
Funding for and deployment of supportive services for households in permanent housing has been a consistent and ongoing challenge, and has limited the scope and efficacy of supportive housing solutions.

In its continuing efforts over the past decade, the community confronted -- and has worked hard to overcome -- an array of structural, political, and philosophical challenges that in some degree limited the Vision's reach and impact and impeded or delayed broader fulfillment of its ambitious goals. While reflecting honestly on the history of the Vision's progress and implementation requires mention of these issues and dynamics, it is important to emphasize and underscore the significant extent to which the community has recognized, owned, and responded constructively to these challenges. Rather than remaining mired in local conflict and/or allowing for these issues to undermine its abiding investment in fulfillment of the Vision's goals, the community has responded to these obstacles as 'opportunities' for systems improvement and change. To their substantial credit, local stakeholders have taken action over the past several years to build on these challenges as a source of 'lessons learned'. In most instances, the Coalition and local leadership have worked hard to address these issues and constraints, examples of which include the following:

- The original Vision document never really developed or articulated a comprehensive strategic action plan (e.g., clear and measurable objectives, timelines for achievement, designation of implementing responsibilities, a system for collective accountability, or metrics for evaluating success).
- While there was general and widespread support for the values and priorities expressed by the Vision, the community appears never to have fully established consensus regarding the functional meaning or practical implications of several of its key implementing issues and strategies -- e.g., 'Housing First' and Rapid Re-Housing.
- The absence of full consensus on core concepts (such as 'Housing First') and lack of shared understanding of key commitments (such as shifting emphasis away from emergency sheltering) both served to undercut the efficacy of community collaboration and fed into exacerbation of conflicts with Vision leadership.
- A history of frequent transitions in leadership associated with implementing the Vision inhibited what otherwise would have been a helpful sense of continuity of efforts.
- While the quality of community-wide HMIS data has significantly improved over the course of the past several years, this data generally has not yet been broadly available or strategically used for planning and evaluation -- either at the program or system levels.
- Both the difficulty in accessing measurable performance results and program data, and the absence of a clearly articulated process for mutual accountability, have obstructed implementation of a commitment to continuous improvement of systems design and performance.
- While focused on its role as the lead entity for purposes of the flow of Department of Housing and Urban Development (HUD) resources to and through the Continuum of Care (CoC), the Coalition has not always been seen as sufficiently attentive or responsive to the needs and concerns of partnering organizations who are not recipients of HUD funding and for whom HUD rules and regulations do not immediately apply. This, in turn, has been a source of continuing interagency conflict, limiting cross-systems collaboration.
- The severe retraction of the local economy and housing market in the late 2000s and recent market forces driving rental development across the region have conspired to subvert ongoing local, state, and federal efforts to expand the supply of affordable housing, thus setting back several key strategies of the Vision.
RECOMMENDATIONS FOR COMMUNITY CONSIDERATION

In light of the array of ‘lessons learned’ from the community’s challenges, and in view of related data developed through the Vision impact assessment, the Cloudburst Team offers the following ‘high-level’ recommendations for community consideration. These are *not* intended to take the place of or supersede active community planning and commitment to continuous improvement in systems planning for homeless response. Nor are they summarized here in any particular order of priority. Rather, these are framed primarily as broad process recommendations based on insights garnered as a consequence of the assessment process.

1. Build on the positive progress of the recent past and focus on the further cultivation of a broad-based system for homeless response.
   - Partners should remain attentive to and continue to hold themselves and the local system accountable for increasing transparency, inclusiveness, and neutrality in the processes of systems design, evaluation, and decision-making.
   - Continue to work on increasing involvement of private sector and faith-based partners in a coordinated community-wide response to homelessness.
   - Cultivate and broaden the participation of permanent housing providers in expanding the supply of PSH units for households exiting homelessness.
   - Support and enhance the full-fledged alignment of public sector resources, private sector partners, and nonprofit providers towards continued fulfillment of the shared goals articulated in the Vision.
   - Continue to support program and policy advocacy at the local and state level necessary to expand access to resources essential to success in preventing and ending homelessness.

   - Establish systems and protocols that ensure and maintain accountability for achieving established targets in the Action Plan.
   - Organize housing, services, and action strategies around agreed-upon goals and maintain focus on those concrete goals.
   - Provide support for more sophisticated and active reliance on community-based data analysis for purposes of performance measurement.
   - Establish a ‘culture of accountability’ linked to new performance measures that promotes regular and transparent review of system-wide and program-level progress in achieving agreed-upon system-wide goals.

3. Support continuing shift of community-wide focus to system-level performance, rather than client or program level improvements.
   - Bring community partners together to construct a functional vision of how interrelated components of an ideal homeless response system might best look and operate -- including a system for ensuring accountability for achievement of associated performance goals.
4 Invest in enhanced capacity for system-wide data analysis for planning and evaluation.

- Encourage local funders to consider supplemental investment in expanding community capacity and functionality for community-based data analytics.
- Adopt and implement strategies that promote more active cross-systems data gathering and program-level data analysis.
- Support efforts to conduct an in-depth and systematic assessment of community needs grounded in analysis of HMIS data.

5 Invest in the training of key community partners to ensure cultivation of the common use of conceptual vocabulary, shared understandings of common practices and procedures, and a collective foundation for consistency in community-wide services planning and delivery.

- Bring community partners together in shared training experiences on key topics.
- Focus training on developing a shared understanding of and commitment to common meaning of the notion of ‘ending homelessness’ -- consistent with emerging language at the federal level.

6 Expand and intensify focus on housing-based solutions to homelessness.

- Enhance community capacity to use available rental housing for persons and families exiting homelessness.
- Increase the supply of PSH units, recognizing that many occupants of PSH units will need to reside in these units for the indefinite future.
- Enlist, expand, and support the substantial capacity and potential of both nonprofit and for-profit developers in increased production of affordable housing accessible to households exiting homelessness.
- Expand focus on homelessness prevention and housing retention in order to maintain housing stability and reduce the number of new units needed in the community.
SECTION I

Overview Of The ‘Vision’ And Assessment Report

In 2004, the then-named Grand Rapids/Kent County Housing Continuum of Care (HCOC) -- now the Coalition to End Homelessness (Coalition) -- initiated a broad-based community planning effort aimed at transforming the community’s response to the crisis of homelessness. These entities brought together sheltering organizations, housing providers, community and business leaders, municipal officials, philanthropic organizations, and other key local stakeholders for the purpose of creating a broad and coordinated response to homelessness across Grand Rapids and Kent County, Michigan. Grand Rapids’ Mayor at the time, a former Executive Director at Heartside Ministries, expressed the shared concern of many in the community -- that too many of the homeless were caught in a recidivist cycle, moving from the streets to shelter, to programs, and back to the streets. At the same time, the United States Interagency Council on Homelessness (USICH) was engaging with jurisdictional leaders in cities, counties, and states across the country, urging them to develop ‘10-Year Plans’ to end local homelessness. This commitment was mirrored at the State level, as the Michigan State Housing Development Authority (MSHDA) adopted and actively promoted this same concept. In that context, key stakeholders in the community launched a regional effort to develop an ambitious set of goals and strategies – the Vision – in order to make headway in preventing and ending homelessness.

For over a decade preceding the publication of the Vision document, the community – like most around the country – had done what it could to marshal resources in an ad hoc fashion to address growing numbers of persons experiencing homelessness, relying on the community's history and culture of caring, collaboration, and faith-based concern. This growing homelessness problem was a consequence of the convergence of several decades of social policies that had simultaneously emphasized the deinstitutionalization of persons living with mental illness, retraction of investment in public and subsidized housing, and propagation of urban renewal that resulted in the net loss of affordable and accessible housing units. The Vision represented an attempt to address this growing issue by moving beyond merely reactive response:

In recent decades, national and local efforts to address homelessness have placed substantial emphasis on emergency response to homelessness. This ‘Vision to End Homelessness’ challenges our community to take a fresh look at our current system of emergency services for people who are homeless and to purposefully move to a system focused on the provision of safe, affordable permanent housing. In essence, this is a movement from managing homelessness to ending homelessness. (p. 1).

Published in February, 2006, the Vision was a product of a broad-based community process that brought together a wide array of public, private, and nonprofit stakeholders through an expansive and highly participatory planning process in order to forge a new direction in the community’s strategic response. Framed over a ten-year horizon, the Vision sought to re-orient the community’s approach to addressing homelessness towards increasing focus on homelessness prevention and Rapid Re-Housing. The Vision was premised on the idea that the community would shift from ‘managing’ homelessness to ‘ending’ it. Rather than just providing a crisis-oriented response, it would create solutions. It was, as the Vision put it, “time to develop a new picture” (Vision, p. 13).
The Vision was grounded in a few basic guiding principles (referred to in the document as ‘assumptions’) that reflected a broad consensus regarding the community’s response to housing crisis. These included:

- Homelessness is unacceptable;
- The community has the will to end homelessness;
- Ending homelessness requires creating more units of affordable housing, tailored to meet the needs of a variety of target populations; and
- Housing is the solution to homelessness.

The Vision borrowed heavily from a conceptual framework prevalent nationally, at the time, to organize its strategies — i.e., the community proposed to ‘close the front door into homelessness’ and ‘open the back door out of homelessness,’ and to accomplish this, partners would work together to ‘build the infrastructure to end homelessness.’ What, more specifically, did these concepts entail? Briefly speaking:

- **Closing the front door into homelessness** - The community proposed to prevent homelessness in the first place by redirecting emphasis and resources from the provision of emergency shelter towards increasing investment in prevention activities. An expanded ‘central intake system’ would play a key role in identifying at-risk households and connecting them with needed resources, and more of the community’s efforts would be focused ‘upstream’ to help prevent the occurrence, or recurrence, of homelessness.

- **Opening the back door out of homelessness** - The community sought to shift focus away from heavy use of emergency shelter towards engagement in interim housing, with the intent to re-house households as rapidly as possible. A core theme in this effort would be committing to a philosophy of ‘Housing First’, reducing barriers to permanent housing, and working to expand a readily accessible array of affordable and supportive housing options for both individuals and families. In this model, which targets homeless individuals and families living with disabilities such as mental illness and addiction, services would be connected with housing, as appropriate and necessary, to help support success in rapidly obtaining and then maintaining housing. Such services would be crafted using a strengths-based approach, emphasizing the reduction or elimination of barriers to accessing housing and services. Also key to ‘opening the back door’ was a commitment to Rapid Re-Housing -- a separate strategy that involves providing temporary financial rental assistance and services to households experiencing homelessness, thereby ‘rapidly’ returning them to stable housing.

- **Building the infrastructure to end homelessness** - Recognizing the need for both an ongoing structure and a process to support creation of a comprehensive system for homeless response, the community assigned primary responsibility for implementation of the Vision to the Grand Rapids Area Housing Continuum of Care (HCOC). Community partners envisioned that public and private resources would be aligned in support of these efforts. They also anticipated that local data on homeless issues, needs, and program impact – to be generated through the community’s HMIS – would be used to inform ongoing planning, evaluation, and funding decisions.

An initiative like the Vision does not take place in a vacuum. This effort was undertaken at a moment in the evolution of homeless response when communities all around the country were taking up the challenge of creating public-private partnerships to envision and articulate long-term strategies for ending homelessness. It followed a period of nearly two decades in which caring and committed providers at the local level had sustained efforts focused on the provision of safe, decent, and welcoming sheltering assistance – in direct response to
what many had assumed, or hoped, would be a momentary and passing social crisis. There was a great sense of energy and enormous sense of optimism and promise in this local response. At the time, the Grand Rapids Area was already noted for its active reliance on cross-systems collaborations, strong partnerships with private philanthropy and the faith community, creative connections to public housing resources, local emphasis on homelessness prevention, and leadership in the development of permanent supportive housing.

In Michigan, the State itself was actively encouraging the development of long-term plans in each of its local CoC areas as an initial phase of its ‘Statewide Campaign to End Homelessness’. The State's ongoing investment in the success of that Campaign has been a backdrop for much of the implementing activity associated with the Vision. As MSHDA and the State’s Interagency Council on Homelessness have continued to promote and support the ‘Statewide Campaign,’ they have cultivated – and, in some sense, required – increasing emphases on centralized assessment and referral (through the Housing Assessment Resource Agency (HARA) model); intensified and insisted upon expanded reliance on use of Rapid Re-Housing assistance; enlarged use of homeless preferences in the State’s Housing Choice Voucher rental subsidy program; and increased investment in permanent supportive housing development through targeted set-asides of Low-Income Housing Tax Credits (LIHTC). Underlying all of these efforts has been strong and unyielding statewide advocacy for adoption of a ‘Housing First’ approach. While Grand Rapids’ history and strategy for ending homelessness have reflected its own local flavor and focus, the community’s evolving efforts have also reflected these broader state and federal initiatives, and the trajectory of local implementation unavoidably has been altered by this broader dynamic.

Within a few years of the launch of the Vision, Michigan, like the rest of the nation, experienced a dramatic collapse of the housing market and the onset of a near-depression economy. Federal and state governments responded with a contraction of both social services and investment in housing development, but accompanied these cutbacks with an infusion of federal resources for large scale investment in new (albeit temporary) short-term crisis response, including the Homelessness Prevention and Rapid Re-Housing Program (HPRP) and the Neighborhood Stabilization Program (NSP). At a moment when the housing crisis nationally and locally was at its peak, the vast expansion of Rapid Re-Housing as a ‘response of choice’ in the toolkit of homeless response systems first took hold. This emphasis, too, has helped shape the thrust of the Grand Rapids Area’s efforts to support success of individuals, youth, and families in exiting homelessness.

As the federal government’s own promotion of strategies to address homelessness have taken new directions and incorporated new priorities (e.g., increasing emphasis on ending chronic and Veterans’ homelessness; increasing commitment to Rapid Re-Housing; and advocating for repurposing of transitional housing resources), a series of related policy and practice initiatives have also made their way into the practice parlance of the local community. The passage of the Federal HEARTH amendment to the McKinney-Vento Act in 2009 (updating and revising Federal homeless program rules), adoption of the Federal Strategic Plan to Prevent and End Homelessness, publication of the Interim CoC Rule, revision of the Emergency Solutions Grants program (ESG), and associated alterations in jurisdictional requirements associated with the Consolidated Plan have all have established and institutionalized a vast array of new expectations for homeless-related policy and practice at the local level. Many of the emphases foreshadowed in the initial language of the Vision have now been written in to federal policy and have become fully integrated in the administrative and scoring criteria associated with funding of the CoC. Emphasis on the development and deployment of Rapid Re-Housing strategies, implementation of coordinated entry systems, prioritization of ending chronic homelessness, reliance on performance measurement, promotion of homeless systems redesign, and engagement in data-

1 Cities, counties and states that receive funds from HUD's Community Planning and Development programs (CDBG, HOME, ESG, HOPWA, and CoC) are required to create Consolidated Plans that help jurisdictions “to assess their affordable housing and community development needs and market conditions, and to make data-driven, place-based investment decisions.” https://www.hudexchange.info/programs/consolidated-plan/
based evaluation and planning are now codified in federal administrative policy as drivers of local homeless response. As the Vision in Grand Rapids/Kent County continues to emerge and unfold, these federally established strategies are strongly defining influences.

In this context, a group of Grand Rapids Area philanthropic funders made a commitment in early 2015 to assess the achievements and impact of the Vision over the past decade. The Steelcase Foundation, Dyer-Ives Foundation, Grand Rapids Community Foundation, and Frey Foundation collaborated in competitively procuring an external entity to conduct a comprehensive review of the successes and analysis of the challenges in the community’s efforts to implement the Vision. They did so with an eye toward identifying ‘lessons learned’ over the prior ten-year period, and identification of recommendations for community consideration that might best inform community priorities, practice, and investments into the future. For this effort, they selected The Cloudburst Group (Cloudburst), a nationally recognized firm with over a decade’s experience in providing technical assistance, evaluation research, data analysis, organizational development, and community-based training focused in the areas of homelessness, housing, and community development.

This document provides a detailed report on Cloudburst’s assessment and related findings. Section II offers a summary of the achievement of the Vision’s intended goals and strategies (i.e., those articulated in the published Vision document). Section III presents an overview of the current status of the community’s homeless response system, in light of the Vision’s focal values and priorities. Section IV explores challenges experienced by the community in the implementation of the Vision and speaks to subsequent ‘lessons learned’. Finally, Section V proposes a series of high-level recommendations for the community’s consideration in advancing its efforts towards ending homelessness, going forward.

Appendices to this document provide further detail relevant to key findings in the report. Appendix A shares a description of Cloudburst’s assessment process, along with a listing of all key informants contributing to that effort. Appendix B offers a summary of results gleaned from a community-wide survey of homeless services providers focused on perceptions of progress and achievements over the past decade. Appendix C is important in filling out the picture of community progress and prospects, reporting out on a Housing Market Analysis conducted by Cloudburst and offering related recommendations. Finally, Appendix D presents an overview and summary of key data elements pulled from the community’s Point-in-Time Count (PIT) and Homeless Management Information System (HMIS) as an illustration of the powerful potential for data analysis now within the community’s reach.
Among the most significant findings of Cloudburst’s inquiry was this: while many in the community have referred to the *Vision to End Homelessness* as a ‘ten year plan to end homelessness’ in Grand Rapids and Kent County, it became apparent that the *Vision* had been developed more as a framework for altering the thrust and strategy of community-wide homeless response than as a detailed and action-oriented ‘strategic plan’ for community change. The text of the *Vision* document lays out a series of broad arguments for changing the lens through which the community views homelessness, as well as altering the community’s approach to engaging and resolving the problem. It also established an overarching set of values and principles for ongoing community action, organized around three primary themes:

- **Closing the Front Door Into Homelessness**;
- **Opening the Back Door Out of Homelessness**; and
- **Building the Infrastructure to End Homelessness**.

In its *Appendix C: Detailed Summary of Action Recommendations*, the *Vision* document enumerates a long ‘shopping list’ of desired actions and tactical objectives associated with each of these three primary themes. Nowhere, however, does the *Vision* statement clearly lay out specific action plans for implementing these objectives. There are no references to specific timelines, resources, milestones, action steps, leadership responsibilities, accountability for follow-through, or means of measuring success, all of which would generally be incorporated as core elements in an action-oriented strategic plan.

That notwithstanding, the community appears to have made substantial and meaningful progress in advancing the *Vision*’s primary goals, re-orienting community perspectives regarding the experience of homelessness, and altering the trajectory of local homeless systems response. As such, there is much emergent from the *Vision* that the community can celebrate.

Among key accomplishments that can be seen as direct outgrowths of the *Vision* -- based on key informant interviews, community survey response, and available community data -- are:

- Widespread acceptance, across the local network of homeless and housing services providers, of the principle that *housing* is the solution to homelessness, and intensified investment in the expansion of access to multiple housing options for individuals and families experiencing homelessness. This is evident even as some disagreement continues regarding how best to implement those housing solutions. In the community-wide online survey of Coalition members, over 50% of respondents answered ‘significantly’
or “somewhat” to the question: “To what extent has a ‘Housing First’ philosophy been implemented for families and individuals as an underlying approach to the resolution of housing crisis?”

- Broad adoption (admittedly with some degree of confusion and conflict) of a ‘Housing First’ framework, and increasing reliance by homeless services providers and the CoC on related Rapid Re-Housing solutions. This concurrence is reflected in the response by over 57% of online survey respondents that the community has “moved from a shelter-based system to a system focused on Rapid (permanent) Re-Housing”, either “significantly” or “somewhat”.
- Increased emphasis in community-wide practice on reducing lengths of stay in emergency shelter.
- The development and implementation of a robust centralized and coordinated intake, assessment, and referral system -- i.e., the Housing Assessment Program (HAP).
- Re-structuring of governance and oversight of community initiatives addressing homelessness under the auspice of the Essential Needs Task Force (ENTF), reflecting a broader sense of mission and commitment to systems change among homeless, housing, and special needs service providers and the Coalition-at-large.
- A near-doubling of the number of PSH units available for persons exiting homelessness (see Figure 1, below, and data discussed in Appendix C: Housing Market Analysis).
- Establishment of increased quality, integrity, and reliability of data – as well as increased levels of participation – in the community’s HMIS (see Figure 3 and Figure 4 below).
- Increased alignment of public and private funding resources in support of the Vision’s goals and strategies. This movement toward fuller alignment was addressed and emphasized in several key-informant conversations and in focus-group dialogues with public and private funders in the community.

The paragraphs that follow provide a more detailed overview of the community’s progress toward meeting the broader goals and strategies laid out in the Vision document.

**Goal One: Closing the Front Door Into Homelessness**

In establishing ‘Closing the Front Door Into Homelessness’ as a primary goal, the Vision sought to shift the community’s focus to preventing episodes of homelessness before they happened, by moving resources ‘upstream,’ and increasing emphasis on retention of permanent housing for persons imminently at-risk. This commitment reflected widespread understanding of the overlapping human, economic, and practical impact of sustaining housing stability for individuals and families otherwise facing potential housing loss and crisis.

**a. Direct Resources ‘Upstream’ and Expand Prevention Services**

Expansion of investment in homelessness prevention was an important objective in the Vision document. While an internal Coalition progress report from August 2011 indicated that evictions across Kent County had increased between 2006 and 2010 (from 9,673 to 10,251), this was largely due to the impact of the severe economic downturn of 2008-2010, not necessarily because of lack of follow-through on commitment to prevention. To the contrary, both in the Assessment’s online survey of Coalition members and in many of the key informant interviews, participants pointed towards increased investment by local philanthropic foundations in emergency homelessness prevention (through the ENTF) as a substantive accomplishment in this regard. Moreover, in the period between 2009 and 2012, the federally funded Homelessness Prevention and Rapid Re-Housing...
Program (HPRP) -- a program funded through the American Recovery and Reinvestment Act (ARRA) of 2009 -- provided significant new prevention-oriented resources to the community. The federal HPRP program allocated almost $2.3 million directly to Grand Rapids and Kent County, and the Michigan State Housing Development Authority (MSHDA) funneled well over $700,000 more in HPRP funding to the CoC to support activities including emergency rent and utilities assistance, housing stabilization case management services, and short term financial assistance for Rapid Re-Housing. Further building on this agenda over the past decade, MSHDA has directed increased funding for shelter diversion, homeless prevention, and rapid re-housing to the community through its statewide Emergency Solutions Grant (ESG) program and related implementation of its Housing Assessment and Resource Agency (HARA) model. Anticipating emerging HUD requirements that all CoCs should establish a centralized and coordinated intake and assessment function, MSHDA pro-actively created a requirement that all CoCs across the State create a local HARA as a vehicle that would serve as a conduit for its ESG resources, and also fulfill the expected HUD mandate for Coordinated Entry once implemented. Local municipalities in the region augmented these strategies through commitment of prevention-related financial assistance, relying on HOME Tenant Based Rental Assistance (TBRA) funds from the City of Grand Rapids, and Community Development Block Grant (CDBG) funds from the City of Wyoming.

One noteworthy element of this strategy was the adoption by the Coalition in 2009 of a Housing Resource Specialist model that had been developed by the Community Rebuilders agency. This model was designed to complement the community's centralized intake, assessment, and referral system by deploying specialized homelessness prevention and Rapid Re-Housing case managers to various locations within the homeless crisis response system, including permanent supportive housing sites and programs. Relying on a ‘strengths-based’ methodology, the Housing Resource Specialist trained and certified staff in a variety of organizations to provide specialized prevention and re-housing case management, with the goal of supporting participants in the housing of their choice. This included training in client-centered assessment and service provision, progressive engagement, understanding key indicators of instability, understanding (and documenting) HUD’s ‘homeless’ and ‘at-risk’ eligibility criteria, assessing housing quality and safety, and eviction prevention. Organizations such as network180, Inner City Christian Federation (ICCF), The Salvation Army, the YWCA, Family Promise, and the Grand Rapids Urban League have had staff trained in this model. While this formal certification approach is no longer being implemented, its original adoption and continuing impact on local practice is representative of the community’s broader commitment to ‘moving resources upstream’.

b. Develop Coordinated/Centralized Housing and Placement Services

Coordinated care, centralized intake, and centralized referral and placement services were a key part of the Vision and have, coincidentally, become an increasingly important part of HUD’s CoC program model. Deployment of a community-wide Coordinated Entry System is now a HUD-mandated CoC funding requirement. Coordinated assessment and referral have also been a key element of MSHDA’s statewide response to homelessness, as HARAs were established in each CoC across the state in conjunction with the distribution of state- and federally-derived ESG resources. Responding to MSHDA’s mandate nearly a decade ago, the Coalition designated The Salvation Army to serve as the community’s HARA, building on the Army’s prior history in coordinating centralized intake and referral. In 2009, the community expanded this commitment to include services for single men, single women, and families and renamed the function as the Housing Assessment Program (HAP). The Salvation Army continues to administer the HAP on behalf of the Coalition.
More recently, the Coalition has worked to strengthen the HAP’s connections to the Grand Rapids Area’s 211 system. Households with housing crisis needs, but who are not necessarily homeless or imminently at-risk by HUD standards, can initiate contact with 211 rather than overwhelming the HAP with pressure to respond to every instance of housing-related need. In this model, the 211 system conducts an initial screening and refers eligible persons to HAP as necessary. At the same time, the community has clarified related roles and responsibilities of referring agencies. Prioritization for referral to housing resources is based on use of the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT), a tool widely used nationally for this purpose. Households that report domestic violence are not given additional assessment by the HAP, but, rather, are referred directly to the YWCA Domestic Violence program for assessment and referral.

There was a general sense of agreement across informants regarding the importance of having a centralized intake and referral system in order to rationalize the distribution of resources and simplify client access to services. However, as might be expected with a complex mechanism such as this, the implementation has had — and continues to have -- some ‘hiccups’. The HAP can only function successfully in its centralizing and coordinating role within a collaborative and trusting system. Early implementation of the HAP struck some as ‘too controlled’ and ‘top down.’ Other respondents were concerned that the HAP was not sufficiently ‘client-centered’ or ‘customer-oriented.’ At the same time, other providers who had initially been cautious about integrating referrals to and from the HAP recognized that it is an important resource for the community and should be ‘given room’ to mature. Over the past several years, the HAP has continued to evolve as a significant component of the community’s commitment to coordinated entry.

c. Advance Tenant-Landlord Strategies to Maintain Housing

Key informant interviews and focus groups yielded little evidence of community-wide progress in what was initially intended as one of the Vision’s core strategies for helping homeless households obtain and maintain affordable housing — i.e., engaging landlords as collaborative partners. Providers reported that individual agencies and organizations have been active in cultivating agency-specific relationships with particular property owners or management companies, but that no system-wide strategy or protocol had ever emerged. A representative from the Rental Property Owners Association (RPOA) who participated in one of several focus groups shared an important perception from the property owners’ perspective. On the one hand, he was hopeful that providers could step forward to help at-risk tenants with support for services and rent as a means of expanding access to affordable housing opportunities. On the other, he expressed frustration that this promise hadn’t yet fully materialized.

d. Improve Discharge Policies

Focus on enhancing institutional discharge policies so that individuals would not be released from public systems of care into homelessness was an approach advocated by HUD and embraced by the community at the time that the Vision was being crafted. Many communities around the country experienced difficulty in implementing this effort, as those public institutions (e.g., Corrections, Foster Care, Public Hospitals, and Mental Health facilities) were generally not easily accessible to, much less
e. **Connect Special Populations with Mainstream Resources**

Over the past several years, the community has been able to demonstrate meaningful progress in expanding access to supportive services through mainstream resources. The recent re-organization of the Coalition (discussed below) has been especially important in this regard, as it has renewed outreach to and inclusion of providers and systems that specialize in working with particular sub-populations – among them, domestic violence, men and women living with mental illness, youth aging out of foster care, and homeless and runaway youth. In particular, the coordination of mental health resources with housing resources seems to have markedly improved.

By way of example, network180 serves as the Kent County Community Mental Health Authority Board and administers Medicaid behavioral health services in the community. These include services linked with housing. Network180 also has ‘Housing Resource Specialist’ staff embedded in various supportive housing resources in the community. Additionally, agency funding to Pine Rest supports two Housing Resource Specialists working with residents of Dwelling Place’s Herkimer property. Similarly, network180 has a long-standing funding relationship with the Genesis Non-Profit Housing Corporation, paying for staff linked to an agreed-upon number of rental units. Network180’s Board of Directors took the lead in identifying that it should align its resources as an agency with the Vision and, in particular, with the Vision’s endorsement of a ‘Housing First’ approach to housing individuals living with mental illness. In turn, this agency has increased involvement in the Coalition and provision of housing-related behavioral health supports.

Direct involvement in the Coalition by other agencies representing sub-populations is somewhat less substantial. Though the YWCA and its Domestic Violence program, for example, is represented in the Coalition, they historically have had less direct or active engagement in shared programming or services. Respondents indicated that households with an identified domestic violence issue were generally ‘handed off’ to the YWCA and then regarded as having been taken care of at that point.

Focus on homelessness among youth and engagement with providers working with homeless youth was also not particularly strong in key informant interviews and focus groups. While organizations such as Fosters Forward and Arbor Circle are actively engaged with homeless youth in the community, participants in the mainstream services focus group indicated that data documenting the extent of homelessness among youth was sparse, and that knowledge of the needs of youth aging out of foster care was similarly scarce.

Despite multiple challenges over the past decade in fully mobilizing mainstream resources, the community has maintained its active efforts toward advancing these critical collaborations.

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3 Significantly, though network180 actively supports integration with the Coalition’s activities, it doesn’t itself track housing outcomes from its providers for these arrangements.
**Goal Two: Opening the Back Door Out of Homelessness**

‘Opening the Back Door Out of Homelessness’ was viewed by the framers of the Vision as essential to success in rapid placement of homeless households in affordable permanent housing, and identified as a second core goal of the Vision. Strategies associated with this goal included: reliance on a ‘Housing First’ approach; reconfiguration of the continuum of community housing options to emphasize interim and/or permanent housing rather than emergency shelter; increasing the rate of housing retention; and expansion of permanent, affordable housing options. Among key activities projected in association with this goal were shifting resources from the provision of emergency shelter to Rapid Re-Housing; implementation of a low-barrier ‘Housing First’ strategy for individuals and families; and expediting access to mainstream resources.

a. **Refocus System from Shelter to Rapid Re-Housing**

The community has evidenced demonstrable change, over time, in shifting emphasis from emergency sheltering to a broad-based focus on Rapid Re-Housing. To a significant degree, this was the result of an unprecedented level of investment by both federal and state agencies in this approach. In response to the economic downturn of 2008, the federal government allocated $1.5 billion (nationally) in funds for the Homelessness Prevention and Rapid Re-Housing Program (HPRP) -- awarded through states and municipalities. As mentioned above, this initiative provided a swift and substantial injection of nearly $3 million in new resources partially directed toward the emerging Rapid Re-Housing approach in Grand Rapids and Kent County. The federal HEARTH Act of 2009 – amending the core legislation supporting most federal homeless programming and HUD’s CoC model – further extended and institutionalized this framework. At the same time, the former ‘Emergency Shelter Grants’ program (originally focused on emergency sheltering operations) was revised and renamed as the ‘Emergency Solutions Grants’ (ESG) program, expanding emphasis on homelessness prevention and Rapid Re-Housing, and adding new resources that could only be spent on these rental assistance activities. Other public and private sector resources (e.g., HOME Tenant Based Rental Assistance (TBRA), Community Development Block Grant (CDBG) Public Services funding, and philanthropic funding) were added in to this mix, supporting expansion of Rapid Re-Housing as a high-priority intervention.

Consistent with this change in overarching policy and funding priority, several organizations shifted what historically had been emergency sheltering resources towards Rapid Re-Housing and permanent housing solutions. In 2009, tied to this agenda, several shelters serving individuals and families were taken offline, including The Family Lodge (single women and families), Catholic Charities (families), and Well House (individuals and families). With the support of the Grand Rapids Community Foundation, Well House shifted its core mission from sheltering to the provision of permanent, low-barrier affordable housing using a ‘Housing First’ model.

It is important to note that the entire community was not philosophically in concert as this change in housing crisis response was taking shape. Housing crisis providers were often at odds with one another in regards to underlying values and commitments in their practice. The same diversity of resources and energies that was a singular strength of the local system was also at the heart of sustained philosophical and cultural conflicts in local practice and priorities. Some providers viewed housing as a fundamental right and saw their organizational effort as an embodiment of commitment to social justice; others viewed their programming as an expression of religious faith or charity, and defined and managed their housing services with a decidedly moralistic attitude. For some, the notion of ‘Housing First’ was in conflict with the perspective that persons needed first to ‘earn’ their right to housing and ‘prove’ their worthiness for access to supports. For others, ‘Housing First’ was behaviorally problematic in that they believed that persons who had lost their housing needed first to demonstrate their housing-readiness through
resolution of associated personal and economic challenges. So while there was a general recognition in the community of the value of shifting emphasis from simply sheltering to rapidly re-housing persons who were experiencing homelessness, there was also notable lack of unanimity in exactly how best to pursue and operationalize this change in focus.

Figure 1, below, provides an illustration of related changes in the inventory of shelter beds, transitional housing units, and permanent housing units based on counts in the CoC Housing Inventory Chart (HIC) from 2005-2015:

- The overall number of emergency shelter (ES) and transitional housing (TH) beds and units for individuals and families increased during this period, by 49 net beds. Within that number, however, the bump upwards in the emergency shelter count was the result of adding new men’s shelter beds in response to increasing need, as well as the reclassification of other beds in line with HUD-issued guidance.

- The overall number of permanent supportive housing (PSH) beds/units during this period increased substantially -- up by 323 additional units.

- As Rapid Re-Housing resources were included in the inventory for the first time in 2014; 206 Rapid Re-Housing units were added to the HIC count.

- Another 24 units of other permanent housing (OPH) were also included and added into the HIC count, for the first time in 2014.

The data here demonstrates the dual realities of trending and commitments in the Grand Rapids Area over the past many years. While there has been a strong commitment by the community to the expansion of permanent supportive housing, as a strategy for housing those in need of longer-term support to maintain housing stability and success, the number of sheltering beds has also increased in response to increasing housing crisis demand.

When asked the extent to which the community has moved from a shelter-based system to one focused on Rapid Re-Housing, Over half of the survey respondents thought that the system had shifted ‘significantly’ or ‘somewhat’.
b. Implement ‘Housing First’ for Individuals and Families

Multiple strategies in the Vision were connected with the adoption and implementation of a ‘Housing First’ philosophy. This approach was seen as key to shifting the community’s homeless response system from emphasis on sheltering to the provision of permanent housing. Interviews, focus groups, and review of Coalition documents confirmed that the implementation of this approach has, like the development of centralized intake and assessment, been a primary focus of the Coalition’s energy over the past decade.

The implementation of a ‘Housing First’ framework has both met with some success and has been fraught with challenges. The Vision document defined ‘Housing First’ as: “rapid placement in permanent housing upon the occurrence of a crisis” (p. 11). The discussion that follows this definition in the Vision provides fuller description and clarification: “Homelessness will be understood as a housing issue, first and foremost, with the provision of housing as the fundamental solution… Where an episode of homelessness cannot be avoided, the central system will facilitate movement to permanent housing as quickly as possible, with minimal time spent in an interim placement…. ‘Housing readiness’ screens that may have inhibited or prevented re-housing previously should be replaced with rapid entrance to low-barrier housing that provides services, as appropriate” (p.11).

In other words, ‘Housing First’ changed the focus of the homeless response system so that housing would be the community’s foundation for resolving homelessness, transitions to permanent housing would be as short as possible, and access to appropriate permanent housing would not be inhibited by ‘suitability’ screens and/or conditions.

HUD defines ‘Housing First’ as: an approach in which housing is offered to people experiencing homelessness without preconditions (such as sobriety, mental health treatment, or a minimum income threshold) or service participation requirements, and in which rapid placement and stabilization in permanent housing are primary goals. [Permanent Supportive Housing] PSH projects that use a ‘Housing First’ approach promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services.4

This definition is similar to the functional one from the Vision. Despite this convergence in vocabulary, however, one of the key findings from the community assessment process was that there seems to be little or no consensus among the Coalition’s various stakeholders about what ‘Housing First’ actually means in definition or looks like in practice. Interview and focus group participants also articulated a wide variety of definitions for what ‘success’ might mean for households served in a ‘Housing First’ framework. Perspectives ranged widely -- from ‘not being on the street’ and ‘accessing fewer emergency services’ to ‘not having lease violations’ and/or achieving ‘self-sufficiency’ (to the point of no longer requiring housing

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This range in definitions of client level success reflect a parallel lack of consensus regarding systematic and programmatic success for this strategy. In other words, it has been hard for the Coalition to measure success of this strategy given lack of consensus regarding what success looks like. This was another way in which broad disagreements about the ‘Housing First’ approach has vexed both implementation and evaluation.

The community has also been hampered by lack of clarity on how the ‘Housing First’ concept may differ from what is meant by or referred to as ‘Rapid Re-Housing.’ Key informant interviewees, focus group participants, and even Coalition documents, themselves, seem to use both terms almost interchangeably, without much distinction.

Over the past decade, the community has, in fact, expanded the number of PSH units in its inventory. In the Coalition’s 2015 HIC count, 329 of the 1,090 permanent housing units (30%) have been set-aside for the chronically homeless, including units owned or managed by Community Rebuilders, Well House, Dwelling Place, Genesis Non-Profit Housing, the Grand Rapids Housing Commission, and Heartside Non-Profit Housing. The Coalition has actively responded to HUD’s prioritization of CoC program resources for the creation of PSH units for chronically homeless individuals and heads of household, regularly securing new PSH dollars for the expansion of this inventory. These PSH units use both scattered-site and facility-based models of housing subsidy assistance. Community Rebuilders reports significant success with scattered-site units using a ‘Housing First’ model. Well House has enthusiastically embraced the model in a project-based setting. However, other providers of permanent affordable housing have expressed wariness, most frequently tied to concerns for access to services for PSH tenants.

An important component of the ‘Housing First’ model is linking tenants, as appropriate, with supportive services and other mainstream resources. There is a general sense among supportive service and housing providers, alike, that supportive housing projects in the Grand Rapids Area have not adequately mobilized the supportive services that they need in order to help consumers achieve housing stability. With good reason, the Coalition’s membership and leadership include affordable housing developers, nonprofit housing providers, and homeless service providers. The overlapping (and sometimes conflicting) interests of these groups were consistently evident in key informant discussions. Service providers working with at-risk and homeless populations prioritize getting their clients into stable housing as rapidly as possible. Property owners and developers, however, repeatedly express concern regarding both financial risks and the challenges of maintaining peaceful living environments for all tenants when providing low-barrier housing to populations that can be difficult to serve.

In an effort to address these shared concerns, the community has -- for some period of time -- had a ‘Housing First’ Collaborative operating independently of the Coalition, with an interest in further developing and promoting the ‘Housing First’ model in Kent County. The Collaborative has helped to troubleshoot existing problems with implementation of ‘Housing First’, shares technical assistance and support, and has arranged ‘field trips’ to view successful projects in other settings similar in size and culture to Grand Rapids. One of the priorities of the Collaborative has been to advocate at the State level for changes to Michigan’s Medicaid program to allow more flexibility in reimbursement for and provision of home-based supportive services.

In considering key outcome measures for the ‘Housing First’ strategy articulated in the Vision -- in particular, assessment of ‘exits to permanent housing’ and ‘lengths of time homeless’ -- it is difficult to create comparative annual data any earlier than 2013, as the community’s HMIS data has only recently been of high enough quality to track data and clients across the system.

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5 See USICH website for more information regarding this prioritization: [http://usich.gov/opening_doors/](http://usich.gov/opening_doors/).
That said, in terms of exits to permanent housing in 2013, just under 40% of the homeless persons exited to a 'positive housing destination', as defined by HUD (see Figure 2). In 2014, this number rose to 43%. However, in 2015 (year-to-date through September), the percentage of homeless households who exited to a positive housing destination was only 28%, meaning that over 70% of the homeless households in Kent County have not been documented as having a positive housing outcome, thus far.

Looking at lengths of stay in homelessness across the various housing types over a recent period of time (January, 2012-September 2015), it is challenging to draw too many concrete conclusions;

- For emergency shelter, the average length of stay was 29 days, with 71% staying less than 30 days and 25% staying 30-90 days.
- For transitional housing, the average length of stay was 123 days, with 60% staying less than 3 months.
- For permanent housing, the average length of stay was 1,109 days or just over 3 years.

At first blush, the emergency shelter lengths of stay appear to indicate that households experiencing homelessness are relatively rapidly being re-housed and placed beyond shelter. However, as noted in Figure 2, above, more recent numbers of exits to stable housing are relatively low. Furthermore, across the same period, the recidivism rate of 31% for emergency shelter (the rate of return of households to emergency shelter) has been fairly significant. Further investigation will be needed to identify the real meaning of these shelter statistics. On the other hand, the lengths of stay for permanent housing are very strong. Given that the period of performance for this data was 3 years and 9 months and that the data pool would have included all entries into permanent housing since January, 2012, the average length of stay indicates that tenure in permanent housing, once achieved by a household, is fairly stable.

c. Expedite Access to Mainstream Housing Resources for Homeless Families and Individuals

Another important element of the strategy of ‘opening the back door’ was to increase access to and availability of permanent affordable housing resources as a way out of homelessness — making the right resources available to the right households at the right time. As described above, the community has made substantial strides in increasing its inventory of targeted permanent housing resources for persons exiting homelessness — though clearly not nearly enough. Prioritization of chronically homeless individuals by HUD, MSHDA, and the Grand Rapids Housing Commission for permanent housing resources has helped with this expansion. Nonetheless, there was broad agreement among local stakeholders that there is still not an adequate supply of housing options either for chronically homeless individuals or homeless families to meet current needs of the community.
Goal Three: Build the Infrastructure Necessary to End Homelessness

The third major goal informing and driving the Vision was the community’s recognition of the importance of investing in the cultivation of community infrastructure -- including engagement of mainstream resources, expansion of affordable housing supply, strengthening of organizational capacity and structure, and increasing access to community data -- as necessary to support and sustain success in achieving the broader aims of preventing and ending homelessness.

a. Align and Allocate Public/Private Resources Towards Permanent Housing

Across the community over the past ten years, the Vision appears to have served as a common touchpoint for both public and private sector leadership in their shared concern for effective homeless response. While public and private commitments and practices were not always fully aligned with the aims of the Vision, virtually all of the municipal officials and staff from private philanthropies who participated in this assessment indicated that the Vision had consistently influenced their considerations in prioritization and allocation of resources over the past decade. There were a multitude of illustrations that supported this point. The United Way and other private funders, for example, include questions about the use of the Coordinated Entry system and alignment with Vision goals and strategies in their housing-related procurements. The Grand Rapids Community Foundation is currently funding a project through the Corporation for Supportive Housing (CSH) seeking to construct a housing access model that identifies resources that might be mobilized and targeted to specific populations, sufficient to create and support housing supply adequate for ending homelessness. The City of Grand Rapids has directed a portion of their HOME funds to be used as TBRA to help expedite movement of homeless households into permanent housing. Kent County is using some of its ESG resources in support of Rapid Re-Housing strategies. Similarly, the Grand Rapids Housing Commission has long been an active collaborator in facilitating access to subsidized permanent housing. Both in one-on-one and in group conversations, public officials consistently expressed clear interest in leveraging public investments for enhancing development of affordable permanent housing options, and commitment to aligning municipal funding priorities, as much as possible, with pursuit of the priorities of the Vision.

b. Expand Supply of Safe, Affordable Housing

Consistent with the primary thrust of the Vision -- the recognition that safe, decent, and affordable housing is ultimately the key to success in addressing homelessness -- community leaders and stakeholders have done their best to stay attentive to strategies that might help to expand housing supply. This has been especially challenging in the Grand Rapids/Kent County housing market, which is currently experiencing one of the tightest rental housing environments in the country, with rental vacancy rates below 1.5% at the time of this writing. Recognizing the unavoidable linkage of success in achieving identified housing goals and the reality of the broader economic environment, Cloudburst undertook a focused housing market analysis as a part of the assessment process. (A full report on that analysis is included here as Appendix C.) What that report helps to illustrate and emphasize is that a confluence of dynamic forces in the local and regional housing market have conspired to create a special challenge in creating access to affordable rental housing for those most in need. The indirect consequences of the housing foreclosure crisis in the period from 2008-2010 included a push of former homeowners into the rental housing market. This coincided with a constriction of credit needed for production of affordable units, and then with a more recent “boom” in upscale rental housing development in center-city/urban neighborhoods. These dynamics have, conjointly, moved affordable rental housing in desirable locations beyond reach for many of the low-income renters who need it most. Cloudburst’s housing market analysis examines that dynamic and
addresses current market conditions and their implications for pursuit of the aims of the Vision. In that context, this report then suggests a series of strategies for expansion of access to affordable housing for households currently experiencing - or most at risk of – homelessness.

The Grand Rapids Area is fortunate to have, as active partners in the Coalition and the broader community, several of the State's most skilled and successful nonprofit housing development organizations. Their creative collaboration and partnership, dating back long before the birthing of the Vision, is one of the many elements of community infrastructure that holds greatest promise for impact in expanding permanent and supportive housing supply. Among the approaches that have been most productive in this regard has been focus on tapping financing resources through the LIHTC program. Within that context, local affordable housing developers have worked closely with State and local officials to find ways to support the creation of permanent, affordable housing options targeted for homeless individuals and families. Both Genesis Housing and Dwelling Place, for example, have received LIHTC financing from MSHDA, combined with the commitment of project-based Housing Choice Vouchers, in order to finance sustainable permanent housing models. Moreover, the active participation of affordable housing developers such as ICCF, Genesis, and Dwelling Place in the Coalition’s leadership signals an important enhancement of coordination of planning and capacity-building for the county-wide homeless crisis response system, more directly linking housing crisis service providers and permanent housing developers, moving forward.

c. **Strengthen Continuum of Care as a Coordinating Body for Vision Implementation**

As with any ambitious set of goals, implementation requires a well-organized and cohesive leadership structure to support and ensure success. From the outset, the community had designated its local CoC planning body as the entity responsible for oversight and implementation of the Vision. At the time of the Vision's publication, that entity was known as the Grand Rapids Area Housing Continuum of Care (HCOC) and was orchestrated under the auspice of The Salvation Army (as a fiduciary and administrative partner, but not as a governing institution). Under the federal model of homeless programs and systems design, CoCs are created as broad-based public and private collaborating bodies, linking nonprofit housing and homeless services providers, public agencies, mainstream services organizations, local officials, law enforcement agencies, educational institutions, private sector stakeholders, and homeless consumers for purposes of planning, funding, evaluation, and oversight of comprehensive community response to homelessness. As such, the capacities of a high-functioning CoC governance structure, theoretically, would be fully aligned with the functions most critical for providing effective leadership in advancing fulfillment of a community's long-term vision for preventing and ending homelessness.

While designating the HCOC as lead entity was conceptually sound at the time, implementation of the Vision foundered as a consequence of a series of conflicts that undermined the general efficacy of this choice. The absence of a specific action plan and assignment of clear responsibilities for follow-through hindered progress from the very beginning. Multiple transitions in CoC leadership obstructed continuity of effort. Lack of real consensus on direction and priorities was a source of continuing dissention. Concerns regarding transparency and neutrality in the governance and decision-making process created significant barriers to the building of trust and openness in communication necessary for robust collaboration. Added to these dynamics, the absence of access to clean and reliable data to inform planning dialogue and program evaluation made it difficult to establish and monitor any objective or measurable performance criteria or markers.

The configuration of the Grand Rapids/Kent County homeless response system presents a unique additional challenge, in that the community is blessed with an abundance of privately funded homeless services and housing providers who are neither dependent on HUD CoC funding nor on other public resources. While most of these private agencies and organizations have been willing partners eager to collaborate in pursuit...
of the primary aims of the Vision, their needs, concerns, and priorities have not necessarily been driven by HUD rules, priorities, and expectations. As indicated by their own self-reporting in private key informant interviews, many of these privately supported organizations felt, at times, alienated from the governance and strategic planning process. A number of respondents described having backed away from the Coalition and its efforts, as a result. Understandably, the alienation of a substantial number of key stakeholders in the homeless response system has inhibited the broader success of the Vision.

While this dynamic has been widely recognized in the community, it has also appeared to turn around rather substantially in the recent past. Responding to its own conflicted history, the CoC undertook a series of significant structural, governance, and personnel changes in 2012-2013. This included a shift in administrative oversight of the CoC to the community's ENTF, under the administrative auspice of the United Way. The CoC is now configured as the Coalition to End Homelessness (Coalition). Re-naming the entity as the Coalition signaled a broadening of scope and ownership, including movement away from being solely organized around HUD's prescribed CoC roles and rules. In this shift, management of the HUD-specific CoC funding process was then subsumed as a subsidiary, rather than primary, part of the Coalition's identity and scope. Community informants universally pointed to this transition as a crucially important step with regard to ensuring openness and objectivity in the planning process. Concerns had lingered that responsibilities for oversight of the CoC planning process and, implicitly, the allocation of HUD CoC resources, would be better served by an entity without a direct stake in funding decisions or outcomes.

The ENTF provides a particularly meaningful 'home' for the Coalition. As the entity within which the CoC is now nested, the ENTF has a much more expansive community mission. More importantly, perhaps, in the same period of transition, the Coalition substantially revised its governance charter and instituted a number of changes that helped increase transparency in decision-making, broaden member participation, clarify accountability, and enhance stakeholder buy-in. Three new core staff hired as part of this process have all played an important role in facilitating this transformation. These changes, in turn, have strengthened the Coalition as a body positioned to lead a more expansive and inclusive response to housing crisis in Kent County. As a consequence, there is now near-universal agreement that the Coalition is in a much stronger position to advance the evolving priorities and commitments of the Vision than it was a decade ago. Interviewees and focus group participants particularly honed in on issues of trust and transparency as important to a renewed sense of engagement and collaboration. While some tensions linger (old wounds in community process are often slow to heal), it appears clear that the community has at least turned an important corner.

d. Use of HMIS and Analysis of Data

One further building block in strengthening the community infrastructure has been the notable progress in development of access to ‘clean’, comprehensive, and reliable data through the community's HMIS. From the outset, the Vision identified utilization of HMIS as a key component of successful implementation and evaluation of its strategies. In many ways and for a variety of reasons, however, the Coalition's HMIS data has not been equal to the ambitions of the Vision. Until recently, many providers who do not receive HUD CoC funds were not participating in HMIS, beyond pitching in to the annual PIT count - and some were not even participating in the PIT. Given the breadth and depth of the area's independent charitable sector working with homeless persons 'on their own dime', much of the data regarding homeless demographics and needs has simply been missing from the picture.

While community-based agencies may well have
been recording their own data at the program level, the Coalition had been unable to integrate that information as part of a broader process of community-wide needs identification and program evaluation. Interestingly, many of the same informants who identified themselves as having been alienated from the work of the Coalition for much of the past decade also expressed a belief that the wider sharing of homeless data in community planning and analysis would provide a better basis for stakeholders to collaborate and engage with the Coalition. There has also been a companion recognition that performance evaluation and funding and investment review would be better served and more transparent if grounded in common data.

Prior to 2010, the HMIS for the CoC was based on a stand-alone implementation of the ServicePoint software platform, operated by The Salvation Army and dating back for a decade. The system itself was fully funded by The Salvation Army and supported as part of their commitment to community service and collaboration. While the HMIS in this model was ‘owned’ by the CoC, not all partners were fully comfortable with this arrangement. In addition, other State and local funders were asking many of the participating agencies to be generating performance reports that were functionally beyond the capacity of the existing system. Motivated by these practical and political concerns, partially to alleviate the perceptions related to HMIS accountability and governance, and partially to gain access to the performance capabilities of the Statewide HMIS platform, the CoC opted to migrate its HMIS functionality to the Michigan Statewide HMIS (MSHMIS) in 2010, and began funding the HMIS out of CoC allocations in 2012. Management and oversight of the local implementation was also moved to what was perceived to be the more neutral environment of the United Way. Great care was taken in the transfer not to sacrifice historical data, in transition. While there continued to be churn in HMIS staffing and systems coordination in the period between 2010 and 2013, a full-time local Systems Administrator was hired late in 2013. Stability and skilled effort in this role since then has helped immensely in stabilizing the system and enhancing the reliability of data. While participation in the community’s HMIS has been relatively high, dating back to 2008 (see Figure 3, above), the quality and utility of the data in the system had been somewhat questionable up until the period from 2013, forward. In its early years of Vision implementation, the community relied on data sources external to the HMIS to benchmark progress and plan for future needs. Part of this was due to difficulties in accessing reporting from the HMIS, but a significant barrier was also lack of faith in the quality and reliability of the data housed in the HMIS.

Inclusion of data in the HUD-mandated Annual Homeless Assessment Report (AHAR) provides a powerful and significant indicator of the extent and quality of data in the HMIS. To be included in this national report to Congress, data within the HMIS undergoes significant scrutiny and must pass decidedly high thresholds. As Figure 4 (below) illustrates, starting in 2009, Grand Rapids had at least one category accepted for inclusion in the AHAR and significantly increased its data inclusion by 2011, culminating in full participation starting in 2013.
A further barrier to increasing confidence in HMIS data was the emergence of a second case management software, *Virtual Case Manager* (VCM), in Grand Rapids in 2012. This software was adopted by several human service agencies in the Heartside neighborhood of downtown Grand Rapids, the central location of many sheltering services for persons experiencing homelessness. Like the *ServicePoint* software platform underlying the CoC’s HMIS, *Virtual Case Manager* is a web-based database designed for case management. It provides relatively simple client services tracking, sharing, and reporting, but is not known to be compliant with the HMIS Data Standards required by HUD. Of significant note, three of the organizations that adopted the VCM system are also major shelter providers in the CoC. Two of those three, Family Promise and Degage Ministries, have systematically double-entered housing information for their clients in both HMIS and VCM. The third, Mel Trotter Ministries, not wanting to incur the burden of dual data entry, began (in 2013) providing reports from VCM that indicated who received shelter and when, but did not report directly into HMIS. The CoC’s HMIS staff, instead, translated that information and entered it into the HMIS. While this was, to some degree, helpful, subsequent reports did not include demographic information about clients, impacting the overall quality of data in the HMIS. In the summer of 2014, the CoC’s HMIS staff was given direct access to VCM, enabling them to run reports when needed and providing the capability to look up demographic information about clients in real time. This change in process significantly and positively impacted the quality of data within the HMIS, improving it beyond even its prior quality levels. Mel Trotter Ministries, in partnership with Family Promise and the CoC, continue to move data from its programs onto the HMIS and has expressed an intention to enter data directly into the HMIS system in real time in the near future. This shift will finally provide the Grand Rapids Area with a full data set in a single system that will support more active data analysis and data-driven decisions for planning.
In assessing overall impact of the Vision for the Grand Rapids Area over the past decade, it seemed pertinent to focus in on the current status of the Grand Rapids/Kent County homeless response system as a general indicator of progress. As much as any other measure, this helps illustrate how far the community has come in implementing key elements of the Vision’s intended homeless practice. While the prior section focused on achievement of objectives associated with the Vision’s original ‘close the front door/open the back door’ framework, discussion in the section that follows is grounded in an alternative lens more consistent with a homeless response systems perspective.

HOMELESS SYSTEMS ORGANIZATION AND LEADERSHIP

The most recent version of the Grand Rapids/Kent County Coalition to End Homelessness Policies and Procedures Manual (adopted in 2014) states that its mission “is to prevent and end systemic homelessness in the greater Grand Rapids Area, guided by the values and philosophy set forth in the Vision to End Homelessness” (p.1). The fact that principles and values originally laid out a decade earlier are still seen as relevant speaks to the staying power and impact of that vision.

While the Coalition serves as the convening mechanism of the HUD-centered CoC for Grand Rapids/Kent County, leadership has explicitly worked to broaden its focus beyond simply acting as the organizing conduit for federal homeless programs funding. This recognizes the value of more comprehensive and inclusive response for those persons experiencing housing crisis in Kent County. It is important to note that recent changes to the Coalition governance structure have brought renewed confidence in the entity’s capacity for managing an impactful and broad-based response to homelessness in the community.

In order to foster broader and more systematic stakeholder engagement, the Coalition Steering Council is now comprised of both homeless consumers and multiple representatives representatives from a broad range of organizations working with various sub-populations, including veterans, persons living with HIV/AIDS, victims of domestic violence, and unaccompanied youth. The Steering Council also includes representation from the City of Grand Rapids, the City of Wyoming, and Kent County. While the Council serves as the primary decision-making entity for the HUD CoC, determining priorities and overseeing the competitive process for CoC funds, the recently adopted governance charter establishes a far broader array of purposes for the Coalition. These include responsibilities to:

- Promote community commitment to the goal of ending homelessness;
- Gather and analyze information to determine local needs of individuals and families experiencing
homelessness;

- Provide a comprehensive, well-coordinated, and clear planning process;
- Promote access to and effective use of existing programs;
- Implement strategic responses and measurement of program results; and
- Apply for other funding sources based on local priorities.

The Coalition has expanded its membership (now 62 voting members -- including nonprofit organizations, local government, and unaffiliated community members) to support this broadened role. It has also developed a more sophisticated working committee structure to support fuller and more active member participation. The committee structure has key elements in place to facilitate the implementation of a broadly-based and coordinated homelessness response system -- inclusive of diverse partners, based on use of high-quality HMIS data, capable of providing multi-systems coordinated entry, invested in broad systems coordination, and committed to data-based performance measurement and resource allocation.

PERFORMANCE MEASUREMENT AND THE THREE-YEAR COC ACTION PLAN

In April 2015, the Coalition membership approved a new three-year Continuum of Care Action Plan to End Homelessness, 2015-2017. As this Action Plan states, it intends to "carry forward the work that was begun in the [Vision to End Homelessness]" -- again, a reflection of the continuing impact of the original Vision statement. While this new document sets out "to build upon the vision that was created before", it is structured in a fashion that clearly identifies specific objectives, principal actors who will be responsible for achievement of those objectives, concrete action steps associated with implementation, and specific performance measurements to be used to assess achievement. Among these measurements are:

- Reduction in the number of households experiencing homelessness;
- Reduction in the number of unsheltered households;
- Reduction in the length of time households experience homelessness;
- Reduction in the number of times households experience homelessness;
- Increase in the percentage of households exiting to permanent housing;
- Improvement in the employment rate and incomes for program participants; and
- Increase in the number of units dedicated to chronically homeless.

It appears clear in this document that the community has learned from its earlier experience that it needed an actionable plan in addition to just a vision for change, and that that plan should be based on clearly articulated and measurable performance outcomes at its core. This in turn allows for key stakeholders to track and evaluate community-wide progress towards actual achievement of concrete goals. While this three-year plan addresses a broad array of homeless sub-populations (e.g., homeless veterans, youth, families, and chronically homeless single adults), what it does not yet do is ground specific program goals in analysis of existing data. Also, while

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6 The Action Plan can be found at: http://endhomelessnessskent.org/?p=90. This URL location will change when the Coalition launches a new website in 2016.
the Coalition has actively engaged its own membership in the creation and adoption of this plan, this is not a document that has been as widely circulated or promoted as a community-wide blueprint for action as the Vision had been.

One of the important aspects of adoption of this Action Plan, however, is its reflection of the community’s shift to focus on systems-level performance measurement. This follows a national trend (and related HUD mandate) to move emphasis toward measuring the impact and outcomes of community-based strategies on a system-wide level, rather than simply on a program- or client-level. HUD has long asked CoCs to measure client-level outcomes and document program-level performance, and it has urged CoCs to evaluate these results and to use them for program-level evaluations impacting annual renewal funding. With the shift towards system-level performance measurement, HUD is now holding CoCs directly responsible for the outcomes of their member organizations, whether funded by HUD or not. This new mandate asks that the CoC assess the success that each of the CoC’s programs have in achieving targeted outcomes in the context of the whole homeless system. In effect, the HUD expectation now is that the CoC convene and cultivate its own ‘culture of accountability’.

Looking ahead, HUD funding for CoCs will increasingly depend on the CoC’s ability to demonstrate system-wide success. The promising news in the Grand Rapids Area is that the Coalition has laid the necessary groundwork – through its recent Action Plan – for efficacy in this undertaking. An expected consequence of this shift will be to more closely bind all partners in local homeless response systems (both HUD-funded and other-funded organizations), in collaborative endeavor towards fulfillment of shared goals and in a spirit of mutual accountability for impact. This stands in marked contrast to the earlier history of the Vision, when virtually no mechanisms for broad external or community-wide accountability were consensually in place.

**HMIS AND DATA ANALYSIS**

The success of the new Action Plan will depend to a large degree on the ability of the Coalition and its HMIS data collection system to track and produce desired metrics, including capacity to:

- Collect the right data, from the right sources, relative to its varied performance measures;
- Continuously monitor data quality for completeness, accuracy, and reliability;
- Correlate data needed for system-wide performance measures across time;
- Produce consistent and accurate reports that measure progress over time; and
- Produce targeted reports that measure progress at the program, housing type, and population levels.

For the most part, the community appears ready to achieve this through its current HMIS functionality – though some strengthening of that functionality will be desired.

The current community HMIS functions as a community-level, longitudinal database that is now primed for use in coordinated entry, case management, performance measurement, and data analysis on a day-to-day basis. The data it now collects and reports allows for a high-level of consistency, integrity, and quality, while protecting the privacy and confidentiality of the persons represented in its records. Because people cycle in and out of homelessness throughout any given year or over the course of multiple years, an HMIS with good participation and data quality contains a much more accurate representation of the extent and characteristics of the persons
presenting to and being served by a community's homeless system. The current HMIS contains high-quality data that crosses over many years (dating back to around 2012), and thus provides opportunities for trending analysis, benchmarking, and understanding the clients the homeless system is trying to serve. Additionally, because the HMIS provides in-depth data for its entire homeless population, it is a vehicle that can provide invaluable data for program analysis and decision making.

Over the past several years, the community's HMIS has evolved to a point in its depth of quality and breadth of participation that it can now serve as a central tool for data-based and data-driven decision-making -- much as had been envisioned in the initial Vision statement. This is reflective of significant advance over the past several years. Problematically, while the characteristics of the data now being gathered within the HMIS can support such activity, the community has not yet established the functional capability to pull and utilize analytical reports out of the HMIS that fully actualize this capacity. Ironically, while the Action Plan can (with supplemental support) count on the system to be capturing data that will allow for performance measurement, the plan itself was not really based on prior analysis of data. In a sense, the community homeless response system is “data-ready”, but not yet “data-capable” for robust use of data in systems design and evaluation.

The Grand Rapids Area has an opportunity to utilize its HMIS to significantly shift its decision-making process to one based on data. Not only can its data support decisions on program design and resource allocation, but it also presents significant opportunities to collaborate with other public entities to help improve design -- and, hopefully, outcomes-- of housing and wraparound services, as well as targeting of prevention services.

In fact, the success of the Coalition's new Action Plan will depend significantly on the Coalition's ability to use the HMIS and other data that it has available to adequately understand who is homeless in Kent County, what their characteristics are, and where they are located. In order to measure its success in meeting its own and HUD's system-wide performance measurements, the Coalition will have to develop the administrative capacity to extract and analyze data from points across its system. This will mean understanding, evaluating, and troubleshooting the inputs and dynamics that may impact or shape that data, such as agency-level policies (e.g., tenure caps impacting shelter lengths of stay) and inconsistencies in interpreting and recording key data points (e.g., definition of chronic homelessness). Key informants for this assessment consistently reported both a hunger for data and a frustration that most of the data put into HMIS over the years has not found its way back to the community, either for evaluation or planning purposes. Improved analytic capacity and the production of regular reports for Coalition committees -- both currently within reach -- should go a long ways toward restoring confidence in the Coalition's strategic planning and resource allocation efforts (Appendix D provides a brief illustration of this enhanced capacity.)

**SYSTEMS DESIGN AND EVALUATION**

One of the Action Plan's primary goals is to ensure that there is an adequate supply of permanent housing resources in the community to serve the needs of the sub-populations that it targets. The first step in meeting this goal is determining housing need across populations and then assessing the current availability of housing resources for each population (including emergency shelter and supportive housing). Implicit in this approach are a number of nested tasks, including:

- Accurately identifying and describing the specific needs of each sub-population (including further subdivided needs within each population);
Identifying and cataloging existing housing resources that might be accessed by each sub-population;
Comparing needs with resources to identify gaps; and
Mapping and critically examining the pathways for accessing existing resources.

These are fairly sophisticated tasks that perhaps should have been undertaken in initially crafting the three-year Action Plan in order to accurately and effectively focus community efforts to develop new resources, adapt existing resources, and connect consumers with resources in an efficient and effective manner. Assessing housing gaps is not simply a matter of lining up “x” number of households in need against “y” number of resources available. All of these resources function within an ecosystem with many factors that determine suitability of a resource and access to it, including:

- Location (e.g., access to public transportation, services, employment, and other supportive resources);
- Entry, access, and eligibility requirements;
- Cultural and linguistic competency;
- Referral pathways; and
- Ease of and/or barriers to application for resources.

Here again, while the Coalition appears to be 'systems-ready' in its thinking and its general approach to systems design, it has not yet moved to a place where it is directly using either the data available in the community or the analytic tools that are within its reach to design, develop, or refine local strategies through such a process.

To the community's credit, the Grand Rapids Community Foundation has been supporting a related data-based systems design initiative -- funding the efforts of the CSH to determine housing need and resource availability for each of the Action Plan's target populations. CSH is working with the Coalition to compile an exhaustive catalog of all housing needs and all resources that might be brought to bear to insure ready access for the community's homeless and at-risk populations to homelessness prevention, Rapid Re-Housing, supportive housing, and permanent affordable housing options. While the data exists to support such an eco-systemic and data-driven planning strategy, and the homeless system is ready and eager to pursue and embrace this kind of approach, the Coalition's internal capacity to manage and implement such a process (independent of external funding) is still not yet firmly established.

**COORDINATED ENTRY**

Historically, one of the areas where the Grand Rapids/Kent County homeless response system has consistently stayed 'ahead of the curve' has been with regard to its Coordinated Entry system. As with a reliable data collection and analysis capability, a centralized and coordinated assessment and referral system is a crucial element for community-wide success. Done well, it offers a consistent, streamlined process to access the resources available in the homeless crisis response system. In August 2014, the Coalition adopted standards, policies and procedures for its coordinated entry system, to be overseen by a Centralized Intake Committee within the Coalition structure. This new framework was a re-design of the existing HAP system – itself a reflection of an effective strategy adopted by the Grand Rapids/Kent County CoC much earlier than in most other communities. In part, this re-design and the development of written standards, policies and procedures was a response to emerging HUD guidance, and
helps ensure CoC compliance with HUD expectations. More importantly, however, for purposes of this report, this redesign reflects the capabilities of the local community to create and implement sophisticated multi-agency collaborations that are consumer-sensitive and able to leverage the skills and resources of existing systems partners. In this case, the re-design builds on and amplifies the impact of resources of the United Way’s 211 system and the Coalition’s historical HAP system. Both systems refer inquiries and requests for assistance to each other. HAP is able to maintain a focus on assessing the status and needs of households who are experiencing homelessness (as defined by HUD), while the 211 system responds to households who identify a housing need but are not currently homeless by HUD standards. While provider assessment of the efficacy of this system is still mixed, the effort, itself, is evidentiary of a systems design strategy where the Vision process can take credit for success.

As discussed earlier, households who are referred to HAP are assessed for prioritization using the VI-SPDAT. Committees are actively working on developing more formalized referral protocols within and to elements of the re-designed HAP system. Much of the community’s housing crisis response network – including most private and faith-based shelters that receive no federal funding – are actively taking the majority of their referrals from HAP. All of the Coalition’s dedicated PSH scattered-site units accept referrals only from HAP. And while issues remain for some project-based PSH units, and other tax-credit and HOME-financed units, efforts continue to work out the wrinkles in systems integration. The key takeaway here is that since the HAP was first developed (following the adoption of the Vision document), it has been an essential feature of the community’s efforts to shift the homelessness response system from a program-focused orientation to consumer-focused response, and operates in a fashion that strives to increase the efficiency of the community-wide referral system.
Since publication of the Vision document, community stakeholders from the public, private, and nonprofit sectors have actively pursued the broad change in community systems necessary to achieve one of its landmark aims -- moving from ‘managing homelessness’ to ‘ending homelessness.’ For over a decade preceding creation of the Vision, the community had engaged in caring and committed crisis response, motivated by a combination of professional concern, personal faith, and common sense of communal responsibility, and seeking to ensure that individuals, families, and youth experiencing homelessness were not left on their own in the streets or places unfit for human habitation. The Vision was established at a moment when national homeless advocates, providers, and policy makers had just begun to give voice to the recognition that homelessness required a singular solution, i.e. the ability to obtain and maintain safe, decent, affordable housing. Leadership in the Grand Rapids Area shared that perspective, and the Vision was crafted with this paradigm shift in mind. While the motivation and insight that prompted this change was well-intended and well-received, the community -- and especially those charged and entrusted with Vision leadership -- may well have underestimated the complexity and difficulty of taking on and implementing associated broad-based systems transformation. Prompting and supporting complementary change in policy, practice, and priorities of an entire community-wide network of public, private, and nonprofit institutions and organizations is an ambitious and overwhelming undertaking. Successfully expanding and maintaining access to affordable housing for the community’s historically “hardest to house” -- especially in an increasingly tight rental housing market -- would prove to be an enormously complicated enterprise. Although passionately and energetically pursued, this challenge was not always effectively addressed.

In retrospect, pursuit of the Vision was simply not linked to the kind of systematic and strategic “action plan” that would have been exceedingly helpful in supporting broader and less conflicted progress in pushing out the envelope of systems change. Many of the key stakeholders interviewed in Cloudburst’s assessment process, in fact, described the thrust of the community’s Vision document as ‘a vision, not a plan’. The more that the Cloudburst Assessment Team dug into the history and impact of local efforts, the clearer it became that what was sorely lacking in the implementation was a long-term plan for action, and not just a vision for change. No strategic plan had been articulated that laid out milestones or markers of achievement, action steps for advancing specific goals, assignment of specific responsibilities or accountability for following up, or clear measures for defining when a goal would have been achieved. There was simply no well laid out strategy for translating the Vision into action, and no clear cut action plan to help guide or define progress.

In this same vein, the Vision authors had not really paid sufficient attention to establishing protocols for community decision-making necessary in implementation. There was no clearly agreed-upon structure for negotiating complicated choices affecting multiple community partners, and no process for nurturing shared understanding of evolving commitments or plans as objectives and challenges continued to unfold. While most community partners readily accepted the overarching values advocated in the Vision document (e.g., focus on housing as
the key solution to homelessness; adoption of broad ‘Housing First’ principles; and shift of emphasis away from emergency sheltering), many also acknowledged that simply accepting these broad and abstract values was far easier than crafting consensus on exactly what kinds of actions implementation of those strategies would require. As a consequence, seemingly broad consensus on core principles often camouflaged accompanying lack of actual agreement on key strategies critical to effective systems transformation. While there was universally expressed sentiment, for example, supporting the conceptual commitment to ‘Housing First’ goals, there was both practice-based and value-based disagreement about strategies necessary to act on and achieve these goals.

Nor was there ever established any particular structure or protocols for accountability for achievement of aims or objectives in the Vision document. While key stakeholders had informally agreed upon the principles and aspirations articulated, no system was put into place to hold partners accountable for performance, for change, or for specific results.

Grand Rapids/Kent County is blessed with a wealth of talented, caring, and well-resourced partners engaged in its efforts to combat homelessness. Many of these reflect varied skills, priorities, and internal cultures of practice that inform their work. Some approach this partnership with a commitment to social justice and the belief that all citizens have a fundamental right to housing. Some simply appreciate the importance of stable housing as a prerequisite for individual, familial, and communal success and well-being. Still others are engaged in the hard work from a charitable perspective, committed to ‘doing good’ for those most in need. While there is surely a strength and promise in this diversity of perspectives and capabilities, this array of viewpoints and capabilities also presents a certain challenge when working to develop a common, standardized, data-driven, and performance-based approach to community intervention and systems change. Not surprisingly, there have been multiple conflicts among and between shelter providers, service providers, and permanent and supportive housing providers as partners in the Vision sought to promote specific changes in community-wide practice and protocol. Here again, prior commitment to a clear plan of action at the outset, and articulation of a broadly agreed-upon plan for communal decision-making and accountability as implementation continued to unfold, would have helped facilitate and expedite broader and deeper systems change.

LEADERSHIP AS A CRUCIAL COMPONENT OF SUCCESS

Successful efforts at managing processes for complex systems change generally require nimble, sophisticated, and facilitative leadership, grounded in a context of collaborative buy-in and political support. According to reports widely shared in key stakeholder interviews, however, difficulties involving leadership, governance, and decision-making have served as persistent impediments throughout the history of the Vision’s implementation. While not laying blame for this dynamic on any given individual(s), it is apparent that conflict, distrust, and dissatisfaction with the process of leadership and decision-making has been a core theme in the ongoing narrative of the Vision — dating back to the handoff from the first Coordinator in 2007. Some of this concern was addressed in 2013 through revision of rules for governance and participation, transition of administrative oversight under the auspice of the United Way, and hiring on of new staff linked to the ENTF. Nonetheless, many of these issues have continued to linger as impediments to full-throated progress in advancing fulfillment of the Vision.
Survey data developed by Cloudburst and individual interviews with key stakeholders reflect a relatively widely held perception that issues with leadership through much of the lifespan of the *Vision* has inhibited implementation and reduced necessary shared commitments to required changes in community practice. In assessing related feedback from key community stakeholders, several core themes or concerns jump to the fore:

- **There did not appear to have been any particularly well-designed or well understood mechanism, protocols, or vehicles for managing local systems change**, and not surprisingly, the absence of a clear role definition for *Vision* leadership served as a key factor in exacerbating leadership conflict. Because the *Vision* document left open questions regarding structure, governance, performance measurements, accountability, and timelines, there was ample opportunity for confusion and concern regarding decision-making and direction, making successful leadership all the more difficult -- whoever carried this mantle. The absence of a collectively agreed-upon governance charter, and the fact that the *Vision* document, itself, never spoke directly to a community plan or process for how the implementing activity might best occur, left open the opportunity for misunderstanding and mistrust to fester. What some community partners may have viewed as admirably assertive engagement in pushing the envelope on behalf of the *Vision*, others understandably may have experienced as overly aggressive and overstepping the bounds appropriate to the role. It is worth noting, especially for purposes of community learning and future practice, that establishment of greater clarity in leadership structure and role definitions, along with adoption of new governance rules and expectations, have been fundamental to steadying the ship. These collective actions, taken largely in 2012/2013, appear to have improved stakeholders’ perceptions of the transparency, neutrality, and efficacy of the governance and leadership process. In turn, they have established a fairly solid foundation for success moving ahead.

- **Frequent transitions in leadership over the past decade significantly** disrupted what would have been a helpful sense of continuity of effort over time. Regardless of the underlying issues or dynamics, the relative frequency of turnover in leadership roles was problematic in solidifying a necessary sense of consistency in pursuit of common priorities and strategic intent. This turnover in core staffing was likely both a reflection of and a contributing factor to a persisting lack of trust or confidence in those at the *Vision’s* helm.

- **The perception of ‘conflict of interest’ in systems leadership** was also frequently cited as a cause of some concern. In most successful community change processes, confidence in the sense of fairness, balance, and objectivity of leadership are especially important. As community partners reflected on the history of the *Vision*, however, it was not uncommon for them to describe a sense of concern that some actors or organizations appeared to have had more of a ‘vested funding interest’ or specific stake in the direction of community planning. This prompted the sense, in turn, that these actors would be unable to participate in decision-making absent a conflict of interest. Whether or not that perception was grounded in any particular reality, the perception itself became problematic. Here again, the restructuring of governance and administrative protocols in 2013 seems to have succeeded at least in neutralizing this historical concern. And once again, the key lesson learned cycles back to the importance of having clear rules and expectations laid out ahead of time, so as to support confidence in the transparency and objectivity of community process.

A broad-based systems change process, to be successful, must make sure that all key partners are on the same page regarding the means by which decisions are collectively framed and determined, who has responsibility for managing that process, what powers and authorities are granted to whom, and how all these issues should and will be addressed. In this sense, still another lesson learned may be that ‘building the infrastructure for community systems change’ perhaps should have been a first order of priority in implementing the *Vision*, rather than a latter-day focus.
NURTURING CONSENSUS: ARE FOLKS ALL SINGING FROM THE SAME PAGE?

In implementing the Vision’s commitment to transforming community practice in homeless response, the community contended with another fundamental challenge -- i.e., assuring that all partners were operating out of a common and shared understanding of key principles, practices, and expectations regarding desired approaches in the provision of homeless response. Reflecting on sometimes conflicting elements of community input in the assessment process, it seemed to the Assessment Team as if community partners often were using the same vocabulary, but not always with the same understanding or intent. This arose, in particular, regarding the community’s approach to ‘Housing First’, Rapid Re-Housing, and Permanent Supportive Housing:

- **‘Housing First’ and Rapid Re-Housing.** Across the past decade, there appears to have been much confusion and conflict in establishing common understanding of the ‘Housing First’ model. Different agencies, actors, and organizations -- in all community sectors -- seemed to have held widely varied views of what ‘Housing First’ meant, how the model was intended to operate, who it was intended to serve, and what its implications for client engagement were. The Vision’s commitment to ‘Housing First’ seems to have stumbled, at least in part, due to a simple failure to establish a system-wide understanding of the meaning of basic terms. Much of this confusion might have been more helpfully addressed through a pro-active and inclusive training and outreach program, focused on cultivating shared insight into core principles and collective apprehension of key practices associated with ‘Housing First’.

  There was also a related lack of clarity regarding Rapid Re-Housing practices. The terms Rapid Re-Housing and ‘Housing First’ seem to have been used somewhat interchangeably by partners across the Grand Rapids community. While these two concepts are surely complementary, the distinctions between them are important. Homeless and at-risk of homelessness populations are heterogeneous and each of these strategies have a place in a diversified response. The needs of a chronically homeless individual living with a mental illness -- and the strategy to meet those needs -- are not the same as those of a family with children that may have had an interruption in income or a change in family composition that thrusts them into a housing crisis. The Assessment Team often heard frustration that appears to have been grounded in a misperception of push for a ‘one size fits all’ mentality in the Coalition’s approach to homelessness response; and the lack of clarity in understanding of terminology appears to have been a contributing factor. A more robust community investment in collective training might well have helped support the more active and prolific expansion of permanent supportive housing options for persons exiting homelessness, as well as the fuller engagement of community-based nonprofit housing developers in an accelerated expansion of affordable and supportive housing resources.

- **Shifting Emphasis from Emergency Shelter to Permanent Housing.** Similarly, efforts to shift the focus of the community’s homeless response system from emergency sheltering to permanent housing -- through use of Rapid Re-Housing assistance and application of a ‘Housing First’ approach -- appears to have alienated many key actors. Again, this conflict in implementing the Vision seems to be a consequence of miscommunication and failure to establish a shared understanding of language and intent. Shifting emphasis of the system from emergency sheltering to an intensified focus on permanent housing is not the same as eliminating community investment in emergency shelters. Nonetheless, early and repeated messaging in the community focused on the desire to decrease the number shelter beds, as if that was, itself, a specific objective of the Vision. Not only was this an understandably confusing posture for Vision implementers to be adopting, but this occurred at the same moment as the general economy was collapsing and in a period during which the community clearly needed immediate and expanded access to housing crisis resources.

  This, disconnect, unfortunately, had the impact of unnecessarily generating conflict between advocates...
of the ‘Housing First’ perspective and homeless services providers in general. A more strategic approach, grounded in fuller understanding of terms and concepts, would have recognized the compatibility and complementarity of both perspectives, and might well have avoided – or at least minimized – many of the difficulties that the community experienced. Misunderstandings that prompted conflict among service providers might have been substantially deflected with fuller attention to cross-systems training, education, and orientation.

**IT HELPS TO HAVE THE WHOLE TEAM AT THE TABLE: THE HOMELESS RESPONSE SYSTEM IS BROADER THAN JUST THE CONTINUUM OF CARE**

For much of the past decade, dialogue in the community has been fundamentally driven by the understandable concerns and priorities of those agencies and organizations benefitting from HUD CoC funds. This is no small sum, as over $5 million is invested each year by the federal government in 25 projects in the Grand Rapids/Wyoming/Kent County CoC. As HUD mandates for particular approaches to practice and performance have become increasingly prescriptive over the past several years, those expectations have unavoidably shaped the thrust and emphasis of program priority and strategy at the local level. Because CoC funding is awarded competitively nationwide, based on criteria that HUD’s homeless programs office propagates, it has clearly been in the community’s interests to focus on developing and implementing strategies consistent with those ratings criteria.

In the Grand Rapids Area, however, many of the community’s most active and important providers of homeless crisis programs, supportive housing, and supportive services have little, if any, dependency on these federal funds, and thus have not historically been motivated by the same factors. To the degree that the central implementing body for the Vision (i.e., the Coalition) also serves as the community’s CoC planning and decision-making entity, it has responsibly stepped up to ensure maximum compatibility and competitiveness for purposes of successful pursuit of CoC funding. An unintended consequence of this focus on HUD-centric commitments, however, has been the partial exclusion of a great many caring and committed partners who are simultaneously contributing actively to broader homeless systems’ response.

While it is certainly true that HUD’s homeless programs funding is a major element of support in the Grand Rapids homeless services landscape, those organizations with independent, private, or faith-based funding are not beholden to the same criteria, perspectives, or priorities – even though those practices ultimately and arguably may be worth adopting system-wide. Nonetheless, the central focus and function of the Grand Rapids/Wyoming/Kent County CoC on HUD-centric principles has, to some degree, had the impact of alienating a great many partners who might otherwise be more active players at the same table. Ironically, at the same time as HUD’s CoC model presumes and promotes broad-based engagement of all key stakeholders in creating a comprehensive system for community-wide homeless response, focus on HUD’s initiatives and expectations appears to have impacted who is and who isn’t participating fully in the community’s conversation and, in turn, has impacted outcomes achieved. Important and committed partners outside of the CoC grantee network (e.g., private sector, faith-based, and mainstream systems) appear not to have been as fully or effectively engaged as they might have been.

The ‘take home’ lesson here is that the community would likely have benefited from a reframing of Vision planning and practice by more fully recognizing the broader interests of partners in a diverse ‘homeless response system’, and not allowing itself to be so exclusively preoccupied by HUD-generated or CoC-specific issues and dynamics. Overemphasis of focus on CoC projects and funding appears, at times, to have clashed with the need for attention to a broader framework for strategic planning considering a more diverse vision of homeless response. It may
be helpful to note, however, that as is the case with other dynamics that characterized the system's process and progress over the first seven to eight years of the intended ten-year implementing span, this issue appears to have taken a turn for the better over the past two to three years. As much as the reorganization of the Coalition's governance and participation structure has transformed the nature of leadership and decision-making across the CoC, recent changes have also created a more open and welcoming environment for more active inclusion of a broad array of community partners.

ACCESS TO DATA MAKES A DIFFERENCE!

While the Vision had staked out an important position from the outset that sought to rely actively on data to help drive and define program planning, evaluation, and prioritization, the community's capacity for gathering and analysis of reliable data never quite caught up with its intensity of interests and desire. As described in fuller detail in Section II, above, the quality and integrity of data accessible to the community has only recently attained a level that supports its broader use and application. In retrospect, more attention could have and should have been paid to increasing participation in the HMIS system and increasing integrity of data in that system, early on. In the initial years of Vision implementation, low rates of HMIS participation by non-CoC-funded providers led to lack of comprehensive data and an inability to produce a desirable system-wide view. The subsequent absence of meaningful performance data and difficulty in pulling out user-friendly reports for programs and agencies made it extraordinarily difficult to manage an open and objective debate in the community about the relative value and impact of varied interventions and/or program investments.

Most partners across the community would have preferred to have had access to performance and outcomes data that more fully reflected the comparative results of differing strategies and practices, early on. Consideration of complex and value-laden issues calls for data-based deliberation, but there continued to be a lack of access to data with sufficient integrity needed to support data-based decision-making. It has really only been in the past two to three years that the quality of the community's HMIS data has improved sufficiently to be used as a meaningful tool for analysis of programmatic process and impact. This is consistent with the community's long-standing desire for reliance on data to drive project performance evaluations. While the community's data quality has now risen to this higher level of integrity and reliability, the system now needs increased support for data analysis. The availability of data, alone, is not sufficient; ease of access to and capability for analysis of that data is what will now make the biggest difference. Progress made in the past several years in gathering and basic reporting out of standard data has laid the foundation for more sophisticated analysis, but the challenge for the community now is how best to create and support that capacity for widespread data retrieval, application, and use.

CULTIVATING A CULTURE OF ACCOUNTABILITY

While the Coalition has recently adopted a series of system-wide performance measures in its three year Action Plan, developing the means to measure them, deploying explicit strategies to achieve them, and broadening participation in consideration of program impact and outcomes will be key to the community's success, moving forward. As with the original Vision, it will be essential that these measures are clearly articulated, widely understood, and fully agreed upon. Similarly, there will need to be established a collective commitment to strategies designed to achieve those outcomes. Using commonly and consensually agreed upon measures, the community will then be able to evaluate success at the system-wide level. It will also be important that the Coalition and its leadership regularly, consistently, and transparently report out these results to the broader community.
and that community stakeholders engage in an active and reflective use of this data to evaluate progress and performance. Investing in cultivating a community-wide culture of mutual accountability will be key to ensuring continuing advancement of the principles and values that were first articulated in the Vision and that continue to shape the community’s system for homeless response.

THE SOLUTION TO HOMELESSNESS IS HOUSING

Virtually no one in the community disputes that the ultimate solution to the problem of homelessness is access to sustainable and affordable housing. The perpetual challenge facing champions of the Vision, however, has been the enormity of the difficulty in identifying, developing, and opening affordable housing opportunities for the numbers of persons in the Grand Rapids Area experiencing homelessness. Throughout the history of the Vision’s implementation, development of targeted alternatives for homeless households has never been sufficient to meet the level of experienced need. The extent to which the community has been able to direct resources to ensure access to a continuum of permanent housing options for diverse sub-populations has been limited as a dual consequence of realities of the housing market and constraints in resources that can be brought to bear in this regard. (The Housing Market Analysis included as Appendix C in this report details the market pressures and forces mitigating against more rapid growth of access to affordable housing for persons exiting homelessness.)

Nonetheless, the community has sustained and grown its commitment to expanding housing options for those most in need through creative application and leveraging of available resources. Nonprofit housing providers, homeless services providers, and private developers are increasingly active in collaborations aimed at expanding access to affordable and sustainable housing. They are also all participating more fully and actively in Coalition and community processes aimed at maximizing impact of available tools and resources. While the increase in numbers of housing units for persons exiting homelessness has not been sufficient to address local needs, the community does, at least, appear to be coming together to identity, implement, and enhance the efficacy of a series of housing-related strategies. To this end, there has been visible and active support from municipal and foundation funders for moving resources toward housing creation, accompanied by increasingly active support from faith-based and other private sources. While not directly connected to solving the problems of homelessness, the community's engagement in the Great Housing Strategies initiative may indirectly generate positive impact in this sector. This initiative launched a process to review best practices, tools, and strategies for future affordable housing development in Grand Rapids. Continuing efforts to increase alignment of investment and resources from both public and private sector partners will make a substantial difference in achieving desired outcomes in this particularly challenging agenda.

It is important to note that the prevention of homelessness and the diversion of at-risk families away from the loss of housing and entrance into emergency shelter is a vital part of the community's housing-focused solution to homelessness. The retention of at-risk households in existing housing avoids the social and financial costs of homelessness, as well as the need for investing in expanding units of affordable housing stock. While the Vision's core commitment to “closing the front door to homelessness" was founded on this insight and understanding, many of the community's initial plans for creative intervention with an eye toward prevention appear to have fallen short in implementation. That notwithstanding, there continues to be a broad-based recognition among community stakeholders of the importance of expanding efforts that focus on reducing the incidence or recurrence of homelessness and helping households that are precariously housed maintain stability in the housing that they currently have.
WORKING TOGETHER IS THE KEY TO MAKING IT WORK!

Despite the many trials and tribulations that have characterized much of the prior decade's efforts towards implementing the Vision, the community is working actively together and appears well positioned to build on 'lessons learned' in continuing pursuit of its ambitious objectives. To its great credit, the community has a strong and persistent appetite for success in its commitment to ending homelessness. The Grand Rapids Area was one of the first communities in the country to pull together a long-term vision for preventing and ending homelessness. From there, it pursued a broadly encompassing agenda that – admittedly, in fits and starts – has continued to find ways to generate admirable success. Each small success, in turn, helps build the strength and capacity of the overall system over the long haul. At its core, this is a consequence of community partners' continued willingness and ability to work together.

As a prime example, the expansion and successful implementation of operations of the HAP as a county-wide coordinated entry system is indicative of the community's capacity to pursue and successfully implement complex systems change. Similarly, emphasis on increasing access to Rapid Re-Housing assistance has been successful to the degree that public sector resources have been invested in this strategy as a central concern. In this same vein, public officials repeatedly give voice to their clear interest in increasing investments in development of affordable permanent and supportive housing options, and in aligning municipal funding priorities with those priorities, grounded in the Vision. Similarly, local foundation funding awards have been targeted towards support of activities implementing central principles of the Vision. Among these, recent support to the CSH for development of a comprehensive report on financial modeling for resources committed to ending homelessness may prove to be of special significance. A key dimension of all of these examples of success, that the community can and should continue to build upon, is the extensive degree of alignment of principles, priorities, and practice, across key community sectors.

To an increasing degree, that alignment is reflected in City and County funding, philanthropic and foundation investment, and private sector supports, as well as in CoC funding priorities. There is enormous promise and potential in the degree to which primary stakeholders and partners from these many community-based systems specifically describe and discuss the continuing role of the Vision in helping shape and define their funding criteria and commitments. Working together, based on common and shared priorities, towards collectively agreed-upon commitments and objectives, is arguably the community’s most substantial foundation for continuing progress.
Cloudburst’s assessment of community progress was primarily framed as a retrospective analysis -- focused on identifying impact of the Vision to End Homelessness over the past decade, and developing insights into the community and systems change process that might be instructive for community leaders and stakeholders going forward. The Cloudburst Team was not charged with laying out specific recommendations for extension of the Vision nor with mapping out specific proposals for continuing community action. In reflecting on general findings and ‘lessons learned’ through the assessment process, however, the Assessment Team was able to identify a number of general thoughts as non-specific and ‘high-level’ process recommendations for potential community consideration. These are not intended to take the place of or supersede active community planning and commitment to continuous improvement in homeless response systems planning. Nor are they summarized here in any particular order of priority. These are framed primarily as broad process recommendations based upon insights garnered as a consequence of the assessment process.

SECTION V

Recommendations For Community Consideration

A. BUILD ON THE POSITIVE PROGRESS OF THE RECENT PAST AND FOCUS ON THE FURTHER CULTIVATION OF A BROAD-BASED HOMELESS SYSTEM OF RESPONSE.

As noted, the Grand Rapids/Kent County community appears to have turned a significant corner over the past two to three years in advancing its long-term commitment to homeless systems change. Local leadership and partners should work to sustain and build forward based on that positive energy.

1. Partners should remain attentive to and continue to hold themselves and the system accountable for transparency, inclusiveness, and neutrality. Recent changes in governance structure and leadership have substantially altered the tenor of the interagency dialogue, and care should be taken to extend and build on this improved climate of collaboration and change.

2. Increase involvement of private and faith-based partners in a coordinated community-wide response to homelessness. Faith-based agencies have stepped forward in recent years as highly productive co-collaborators in building a comprehensive homeless system of care. There is promise of profound impact in continuing to leverage efforts of diverse providers based on this shared commitment to comprehensive response.

3. Cultivate and broaden the participation of permanent housing providers for the purpose of expanding supply of PSH units for households exiting homelessness. Permanent housing providers in the community have demonstrated a willingness to take on new and larger risks in targeting units for chronically homeless adults and families. The community should seek to nurture and extend more active partnerships linking homeless services and affordable housing providers so as to ‘grow’ this pool of PSH opportunities.
Support and enhance the full-fledged alignment of public sector resources, private sector partners, and nonprofit providers towards continued fulfillment of the shared goals articulated in the Vision. As these community partners have been increasingly vocal in their expressions of alignment with each other vis-à-vis implementation of the Vision’s goals and objectives, there is great promise in working to ensure follow-through on actions that embody greater consistency of priorities, policies, and investment of resources.

Support the revision of state-level rules and regulations, including Medicaid rules, to allow the increased use of other state and federal resources for the funding of supportive services.


1. Establish systems and protocols that ensure and maintain accountability for achieving established targets. The Coalition membership has collaborated actively in crafting this three-year plan. Interagency partners have worked hard at developing consensus to accept and approve this strategic plan and its targets as a shared foundation for moving forward. Each of the goals in this plan includes the identification of responsible actors, specific implementing activities, and strategies for measuring achievement. It is incumbent on the community to ensure that partners work together to support and hold each other accountable in following through with implementation and evaluation.

2. Provide support for more sophisticated and more active reliance on community-based data analysis to ensure performance measurement and accountability. A key to success in follow-through on the three-year action plan will be the community’s ability to generate timely and user-friendly data analysis and reporting. Focus on cultivating that capacity will be important.

C. SUPPORT CONTINUING SHIFT OF FOCUS FROM PROGRAM-BASED TO SYSTEMS-LEVEL PERFORMANCE AND MEASUREMENT.

Systems-wide performance is one of HUD’s key emerging priorities; as such, it will impact heavily on competitive scoring and the CoC’s prospects for sustaining funding. To an increasing degree, communities are being asked to hold themselves accountable for community-wide impact of resources on homelessness, and not just for program-level performance. This systems-wide orientation is consistent with the community’s growing attention to ‘collective impact’ and serves as a more constructive framing of evaluation of investment for community services providers, the public sector, and private funders, alike. The following recommendations are shared in this context:

1. Bring community partners together to construct a functional vision of how interrelated components of an ideal homeless response system might best look and operate. Engage community stakeholders in review of preferred outcomes and systems design through creation of an ideal ‘client access, assessment, and referral experience strategy’ (CAARES). This should include partners broader than just those in the homeless services sector (including representatives from the RPOA, Police, Mainstream Service Providers, and Business Sector).
The community should design and implement a process that explicitly addresses community-wide responsibility and accountability for implementing goals identified through this process. The Coalition should work closely with its municipal and charitable partners to share organizational and system-level performance data, engage in public consideration and evaluation of that data, and generally hold each other accountable for community-wide success.

**D. INVEST IN EXPANDING DATA USE AND ENHANCING CAPACITY FOR DATA ANALYSIS.**

Homeless response system partners in the community have universally expressed an interest in enhancing their capacity for data-based and data-driven evaluation and planning of programs, services, and strategies. The community has significantly advanced its capacity for collecting reliable and comprehensive HMIS data, but has not yet developed capabilities for tapping that data for purposes of program review, performance review, needs assessment, or strategic planning.

1. **Funders should consider supplemental investment in creation of community-based data analytics capacity and functionality.** Ideally, this functionality would work to complement the current HMIS systems administrator role at the Coalition and would provide additional data analysis and reporting capability both for the CoC and for the community at-large. Coalition partners are investing heavily in the process of collecting consistent, reliable, and quality data. Funder investment in building capacity for more active and expansive use of that data through reporting and analysis can generate significant returns — for consumer responsiveness, for program enhancement, and for increasing efficacy of the homeless response system-at-large. (See Appendix D for illustrative examples.)

2. **Community should consider implementing strategies that promote cross-systems data gathering and analysis.** Above and beyond increasing analysis of homeless data within the HMIS, the community should consider development of cross-systems data analytics functionality and/or data warehousing for cross-systems correlation analysis, program design, systems planning and evaluation, and promotion of cross-systems collaboration. This might include linking schools data, human services data, early childhood data, corrections data, and other related human services data as a means of identifying trends, needs, and cross-systems impacts/results.

3. **Community should conduct systematic assessment of community needs grounded in analysis of HMIS data** as a basis for directing community investments in permanent supportive housing, targeting of rent subsidies and Housing Choice Vouchers, and prioritizing deployment of Rapid Re-Housing resources.

**E. INVEST IN TRAINING OF KEY COMMUNITY PARTNERS TO ENSURE CULTIVATION OF COMMON USE OF VOCABULARY, SHARED UNDERSTANDING OF COMMON CONCEPTS AND PRACTICES, AND A COLLECTIVE FOUNDATION FOR CONSISTENCY IN COMMUNITY-WIDE SERVICES PLANNING AND DELIVERY.**

1. **Bring partners together in shared ‘training experiences,’** preferably administered by a knowledgeable/neutral outsider, who might help the community to press ‘reset’ in its commitments to ‘Housing First’ and Rapid Re-Housing. As discussed at length in the assessment report findings, above, these concepts have
been widely misunderstood, partially as a consequence of the community’s failure to invest in systematic trainings to establish common baseline vocabulary.

2 **Develop a shared understanding of the meaning of ‘ending homelessness’**. Broad skepticism, grounded in lack of understanding of what ‘ending homelessness’ looks like and means, undermines the collaboration and commitment required to sustain community-wide buy-in and investment. In this regard, national leaders are seeking to help communities identify benchmarks and criteria that can help refocus community conversation on understanding the concept of ‘ending homelessness’ as the attainment of the status of ‘functional zero’. Key elements of this new construct include: a) The community has systems, resources, and capacity to respond quickly and effectively to the occurrence of homelessness, to ensure that homelessness is rare, brief, and non-recurring; and b) The community can document that the number of persons exiting homelessness and moving into permanent housing is greater than or equal to the numbers of persons entering homelessness.

**F. EXPAND AND INTENSIFY FOCUS ON HOUSING-BASED SOLUTIONS TO HOMELESSNESS.**

Recognizing that the ultimate solution to homelessness is increasing access to affordable and sustainable housing, the community should review and consider recommendations embedded in the *Housing Market Analysis* report developed and submitted as an adjunct to the *Vision* assessment (see *Appendix C*). Included in those recommendations are the following suggested strategies:

1 **Enhance community capacity to use available rental housing for persons and families exiting homelessness**

   a) *Continue emphasis among housing/homeless services providers on Housing First and Rapid Re-Housing strategies.*

   b) *Continue efforts to expand access to rental subsidies and rent assistance supports* to make available housing affordable and sustainable.

   c) *Increase access to rental units that will accept Housing Choice Vouchers and other HUD-funded rent subsidies* (e.g., Rapid Re-Housing and CoC Leasing Assistance) by expanding collaborations linking local Public Housing Authorities, the Rental Property Owners Association, and community services providers.

   d) *Maintain priority on homelessness prevention*. When affordable units are scarce, there is an additional premium for helping households maintain the housing they already have, as they may have extreme difficulty finding another unit, especially after an eviction.

2 **Increase the supply of PSH units, recognizing that many occupants will need to reside in these units for the indefinite future.**

   a) *Build dialogue between property owners and service providers* to better address concerns that have historically limited collaborations. As suggested above, engage both housing and service providers in joint ‘Housing First’ trainings, to ensure common understanding of the model and to ensure fidelity.

   b) *Offer project-based vouchers to developers of tax credit based or other subsidized housing in desirable locations*, thereby increasing availability of units with walkable connections to jobs, services, and amenities.

   c) *Create ‘mainstreamed’ housing settings environments* by developing projects where 25 percent or fewer of the units are PSH units and are integrated with other individual or family housing.
d) **Continue the evaluation of the adequacy and efficacy of on-site supportive services** – including addressing quality/intensity of services array, hours of operation, appropriateness of supports, provision of space for on-site service coordination and delivery; reprogramming CoC funding to provide necessary supports for PSH residents; enhancing relationships between service providers and property management; and adoption of shared management models that involve qualified service coordination agencies in front-of-house property management responsibilities.

**e)** **Focus on measures to ensure the success of those who can ‘graduate’ from their PSH unit thereby opening up units for new entrants** - including identifying tax credit units and voucher support for persons leaving PSH units; facilitating access to follow-up supportive services for persons who have recently left PSH units, as needed; exploring use and/or resolving issues with ‘move up’ housing vouchers from MSHDA; and working with employers to provide ‘van pool’ or other transit services supports at shift changes for those transitioning from PSH units to housing that is not located on transit lines.

3. **Enlist, expand, and support the substantial capacity and potential of both nonprofit and for-profit developers in the production of affordable housing accessible to households exiting homelessness.**

**a)** **Coordinate efforts of the Coalition with those of the Grand Rapids Great Housing Strategies initiative, as a means to more fully support the development of affordable units.** For example, the Zoning Ordinance already allows accessory dwelling units in single-family neighborhoods, encouraging mixed-use buildings (with housing on the upper floors) in commercial districts, and promoting infill development by permitting small homes on narrow lots.

**b)** Engage developers in conversations that help identify and clarify ways that local governments can **remove barriers and provide incentives to encourage development** of more affordable units – especially those at the lower end of the cost scale.

**c)** **Attract investment in projects developed with LIHTCs, relying on supports that may include:** providing HOME funds to fill gaps; setting aside land bank parcels in strategic locations at below market costs for affordable housing; expediting permitting and/or approval of ordinances to approve Payment in Lieu of Taxes (PILOTs); and working with the MSHDA LIHTC QAP to allow transit-oriented development as an alternative to its ‘Walk Score’ requirement.

**d)** **Enact inclusionary zoning requirements** to ensure that a portion of new units developed are affordable, and ensuring that ‘affordable units’ are developed in a range of unit-types with affordability at various income levels.

**e)** **Review and consider recommendations in the CSH Report on Financial Modeling for Assuring Housing Targeted to Ending Homelessness.**

The assessment process undertaken by the Cloudburst Team revealed a clear desire on the part of the Grand Rapids community to continue making progress toward its ultimate goal of preventing and ending homelessness. The community’s achievements over the past decade demonstrate a depth of creative energy, resilience, and resourcefulness that holds promise for sustained success. The recommendations referenced here are shared simply as means of providing an organizing framework for the community’s consideration as it moves forward in its efforts to advance the historical and still relevant aims of the **Vision**. Working together, key stakeholders might well apply these as useful principles toward continuing cultivation of a comprehensive, robust, data-driven, housing-centric and performance-oriented system of homeless response, both in the near and long-term future.