



**A COLLABORATIVE PLAN TO END HOMELESSNESS IN  
DALLAS AND COLLIN COUNTIES**

## D – ONE STRATEGIC PLAN

The D-ONE strategic plan is the result of Metro Dallas Homeless Alliance (MDHA) synthesising ideas and priorities from several local strategic plans including contributions from the Dallas Area Partnership, the Office of Homeless Solutions, Supporting Partnerships for Anti-Racist Communities (SPARC), and the current MDHA strategic plan.

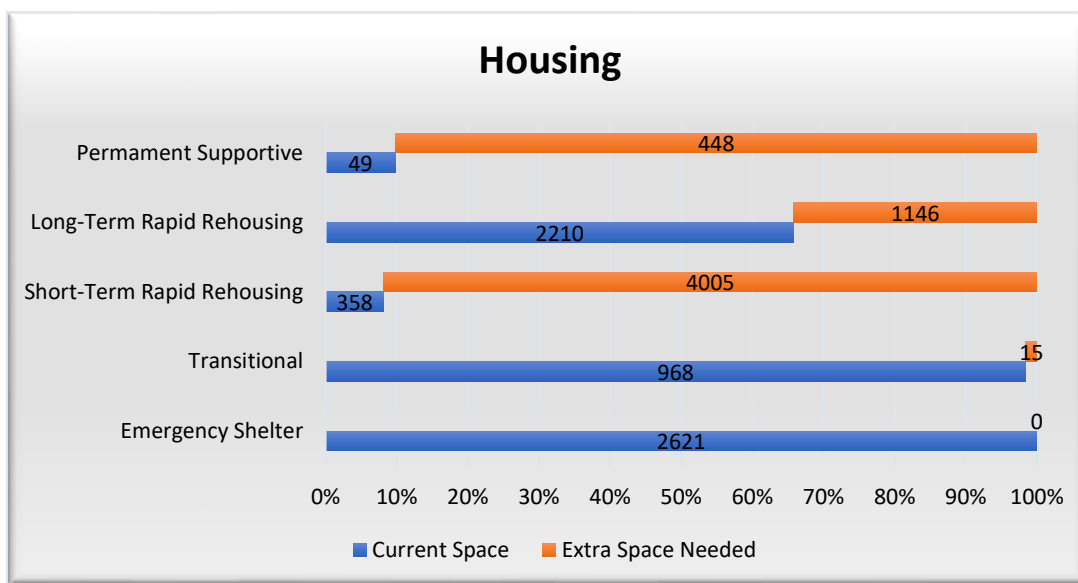
MDHA upholds a vision to end homelessness in Dallas and Collin Counties while becoming the top performing Housing and Urban Development (HUD) Continuum of Care (CoC) in the country. To actualize this vision, MDHA cannot work alone. It is critical that every social, political, non-profit, business, faith-based, private and public stakeholder committed to ending homelessness work in tandem.

The D-ONE strategic plan was developed to help achieve this goal. Every stakeholder has a significant role to play and it is important that each of us can see how our efforts are bringing an end to homelessness. Upon review of local priorities and needs, five categories were identified as the central framework for D-ONE. By bringing our collective attention to these five priorities, **Housing, Resources, Support, Coordination and Data**, we will ensure everyone in our community has a *home*.

## 1) HOUSING

There is an insufficient supply of affordable housing, especially for those that have incomes at or below 30% of Area Median Income (AMI). Public housing is insufficient and there is no ability to free up any Permanent Supportive Housing (PSH) units in the current system. Rapid Rehousing (RRH) is not sufficiently prioritized. Figure 1, shows how the units of housing available in the current homeless response system does not match the need of units in the system.

**Figure 1**



On top of this, people in need of housing face discrimination, high barriers to access, insufficient housing options, limited geographical choices, and a lack of support services to maintain housing.

### **Housing Goals**

#### **1.1 Increase Affordable Housing Supply**

- a. Create a comprehensive housing policy. It must include Needs, Types, Current Inventory, Rental Costs, Policy Recommendations, Housing Trust Fund, and Land Trust recommendations.
- b. Maximize development opportunities set forth in the bond issue proposition passed in November 2017 to fund economic development and housing.
- c. Work with public and community partners, including the Dallas Department of Housing and Neighborhood Revitalization and the Texas Department of Housing and Community Affairs to prioritize the development of new affordable housing opportunities.
- d. Evaluate alternate housing options to address limited housing inventory. This could include tiny homes, motel or apartment conversion, home sharing, host home programs, roommate matching, and shared housing.
- e. Increase the number of rapid rehousing units for non-disabled households with income.
- f. Convert up to 20 percent of a Housing Authority's Section 8 Tenant-based assistance to project-based assistance.

### **1.2 Improve and Expand the Coordinated Access and Prioritization Processes**

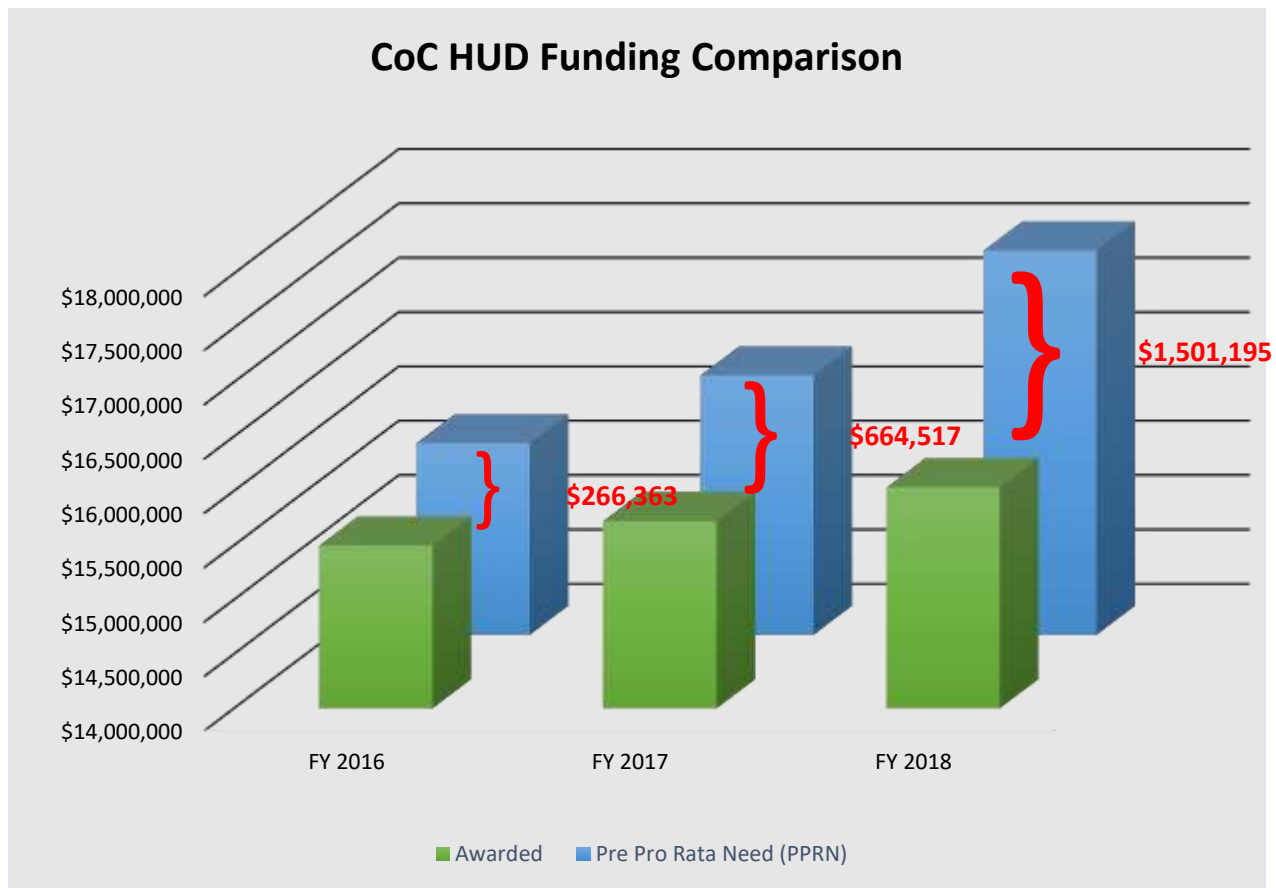
- a. Expand capacity and coverage of the Coordinated Access System (CAS) and Documentation of Priority Status (DOPS).
- b. Prioritize people experiencing homelessness on the Housing Authorities' waiting lists.
- c. Increase efficiency of the CAS to move people into housing

### **1.3 Increase Landlord Participation**

- a. Develop and implement a coordinated, countywide landlord outreach strategy to recruit new rental partners.
- b. Secure funding for the development of new financing options and flexible funding pools for landlords in exchange for affordable tenancy; thereby, preserving the affordability and quality of the existing housing stock.
- c. Create a Housing Navigator Network to identify, train and develop new housing navigators and to create system-wide standards for housing navigation.

## 2) RESOURCES

Dallas is one of the most economically affluent cities in the United States. With the right plan and coordination, there are enough resources (both public and private) within this community to end homelessness. It is critical that we secure and leverage these resources effectively. One primary resource that we must secure and leverage better is the CoC HUD funding. The CoC has been unsuccessful in reaching appropriate funding levels necessary to end homelessness in our community. In the last HUD Notice of Funding Availability, funding for the area was at 91% of Area Need, with approximately \$1.5 million dollars of available HUD funding left uncollected. Figure 2, shows the gaps between CoC HUD funding award (the amount the CoC received) and HUD eligibility formula/PPRN (what the CoC should receive) for the past 3 years.



**Figure 2**

Even where other public and private resources are available and awarded there is still a lack of coordinated focus when it comes to how these resources are used systemically.

### Resource Goals

#### **2.1 Educate and collaborate more closely to increase CoC funding**

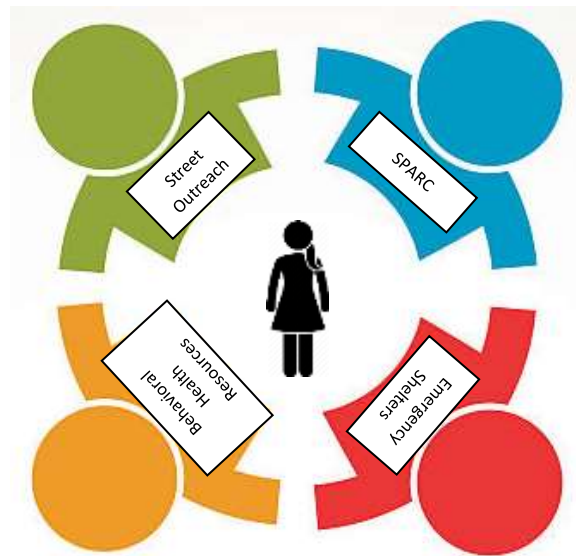
- Create opportunities to educate the public about the CoC.
- Build stronger support among government and public entities to support the CoC.
- Increase the number of non-CoC funded agencies that are part of the CoC.

## **2.2 Maximize and increase efficiency of public and private resources to end homelessness**

- a. Create a process to bring together public and private resources to ensure Dallas' homeless response system has the capacity to meet the needs of all households in crisis.
- b. Create a private funding pool/Funders Collaborative to maximize resource efficiency.
- c. Develop system improvement planning grants that create opportunities for programs to coordinate and implement strategic change.
- d. Research the feasibility of the Pay for Success Model in Dallas and Collin Counties.

### 3) SUPPORT

Housing people without support services simply does not work. Even the evidence-based practice of Housing First recognizes the limitation of housing only. We must prioritize the immediate housing need but not dismiss the pre-housing, secondary and tertiary needs. These additional needs vary from person to person and include street outreach, emergency shelter, case management, financial management, health care, behavioral health (mental health and substance abuse), as well as assistance with identification, transportation, food and clothing. With the appropriate wrap around supports, individuals and families can reach a level of stability to maintain housing long-term. Such stability ensures that individuals return to utilizing natural community supports and becoming an integral and valued part of the community fabric.



There is significant diversity across people experiencing homelessness. Their skills, talents, circumstances and challenges are as varied as the population of Dallas as a whole. It is critical that support services are developed and implemented with this diversity in mind.

#### **Support Goals**

##### **3.1 Improve street outreach services.**

- a. Create a universal approach and ensure complete coverage throughout the city including outreach to people who are chronically homeless and living on the street.

##### **3.2 Improve the emergency shelter system.**

- a. Create respite facilities for those discharged from hospitals
- b. Increase transitions from shelter to housing.
- c. Increase the shelter capacity of existing providers through contracted pay-to-stay shelter beds.
- d. Develop an emergency shelter system for inclement weather in the area.

### **3.3 Implement diversion and prevention practices.**

- a. Create an effective crisis response system that prevents homelessness whenever possible and rapidly returns people who experience homelessness to stable housing.
- b. Develop a method for targeting homeless prevention assistance to households most at-risk of entering emergency shelter.
- c. Create criminal justice, and hospital diversion models to assess the effectiveness of diverting high utilizers of these systems to housing alternatives instead of jail or hospital placements.

### **3.4 Coordinate immediate needs efforts.**

- a. Develop a coordinated system for any groups who are interested in providing immediate/basic needs to homeless individuals (meals, food, clothing, ID's, bus tickets, etc.).

### **3.5 Develop enough behavioral health resources to meet area demands.**

- a. Ensure availability of and access to high quality behavioral health treatment.
- b. Develop standards that ensure delivery of adequate behavioral health services across all housing options.
- c. Increase behavioral health services as part of street outreach.

### **3.6 Ensure cultural competency across the system.**

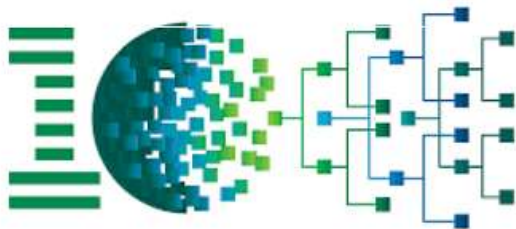
- a. Support and where possible advance the recommendations of the Supporting Partnerships for Anti-Racist Communities (SPARC) report.



#### 4) COORDINATION: PROCESSES AND TRAINING

The current homeless service system is fragmented, lacking both coordination of efforts and agreement on who does what. Navigation is often too complicated for providers and service users resulting in a lack of stakeholder buy-in and trust. Historically, the CoC's energy has been more focused on information sharing rather than problem solving and lacked fully implemented standards of care. As a result, collaboration suffers as there is no clear responsibility and accountability. An example of the impact of this fragmentation on the system includes the disproportionate number of marginalized groups that cannot access the system, such as people of color and LGBTQ communities.

A GOOD SYSTEM SHORTENS THE  
ROAD TO THE GOAL.



Processes and complementary trainings must be improved in order to end this fragmentation and support coordination of efforts.

##### Coordination Goals

###### **4.1 Develop and adopt a system wide strategic plan**

- a. Create a document that lays out the roles and responsibilities of each party. This includes the Continuum of Care, Dallas Area Partnership to End and Prevent Homelessness, the City of Dallas, Dallas and Collin Counties, and the Citizen Homeless Commission as well as agencies external to the homeless response system who serve people experiencing homelessness.

###### **4.2 Develop minimum standards for system wide services.**

- a. Work with providers and community members to determine what the minimum standards of service look like for every type of service in the homeless response system.

###### **4.3 Align demographics of the homeless population to the general population.**

- a. Identify and understand the cause of the gaps and create a plan to decrease the overrepresentation of minorities in the homeless population.

###### **4.4 Create a “system map” (flow chart) of the Dallas homeless response system**

- a. Illustrate the flow of households into and out of the system.
- b. Identify and document system agency roles and responsibilities.

#### **4.5 Provide training and technical assistance**

- a. Ensure the use of the leading evidence-based practices and innovative pilots.
- b. Ensure implementation of high-quality homeless services to include Housing First.
- c. Create minimum training standards for providers of homeless services to ensure skill development and competent staff, as well as the long-term sustainability of programs and agencies.

## 5) DATA

Data related to homelessness and housing outcomes is considered by the provider community to be unreliable, underutilized and incomplete. The current data collected and reported is not meeting the needs of the people experiencing homelessness, organizations delivering services, or the community at large is not good enough to support data driven decisions. Some of this may be attributed to growing pains of a newer (3 years old) data collection system meant to meet the demands of a Homeless Management Information System (HMIS). In its current form, there is an absence of cross-system data and system level reports are inadequate and not easily customized. We need to increase buy-in in the system and trust in the data.



Without timely and reliable data from all participants in the CoC, the goal to end homelessness in Dallas and Collin counties will not be realized. Data is critical to evidence-based decision making, continuous improvement of efforts, funding, and ultimately demonstrating our success.

### Data Goals

#### **5.1 Close the gap between current data system and data system needs.**

- a. Gain 100% participation in HMIS.
- b. Increase participation from privately funded organizations.
- c. Provide an HMIS able to connect with multiple data systems.
- d. Reduce provider time entering data.
- e. Create system capacity for real-time bed management and the electronic transfer of client information for seamless continuity of care ensuring all beds are represented in system data.

#### **5.2 Customize and create data reports and dashboards.**

- a. Make better use of all available data sets and identify additional sources of data in order to determine housing and service gaps in homeless assistance system.
- b. Provide quality system-level reports on usage and service touchpoints.
- c. Research and choose a Data Warehouse for the community to be able to share data across systems.

*\*Content Includes Information From:*

*Dallas Area Partnership to End and Prevent Homelessness – 3 Year Strategic Plan – 5.9.18*

*MDHA Strategic Plan – 9.1.18*

*Office of Homeless Solutions Plan – 8.1.18*