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Executive Summary

In 2020, we moved from crisis to crisis. From the COVID-19 pandemic to social and racial unrest to uprisings surrounding the presidential election, the homeless system was not immune to these larger issues. As a direct result, we adopted a new vision:

The Detroit Continuum of Care's vision is a collective response to prevent and end homelessness, grounded in racial equity, where:



The system is led by people who have experienced homelessness and who reflect the community



Members of the community experience homelessness rarely, and when they do, it's for a short time and only once



Homelessness and housing priorities are intentionally aligned for housing security



Housing and services are rooted in dignity

Grounded in this new vision, we realized the following:

STRENGTHS

We continue to see a downtrend in overall homelessness (down 22% since 2019) and declines within many subpopulations including single adults (-25%), adults (-21%) and children (-21%) in families, seniors (-21%), and people who have experienced long bouts or repeated episodes of homelessness (-22%). Also, permanent housing continues to be the solution to ending homelessness. Those placed in permanent housing retained it or moved to other permanent housing at a rate of 99%.

OPPORTUNITIES

Though we did see an overall decline in homelessness, it is not certain if the decline is temporary. Some shelter beds were taken offline due to COVID to allow for social distancing, which attributed to the decline. Additionally, COVID resulted in a longer length of homelessness from 105 to 110 days for those in shelters and transitional housing programs. Another opportunity for improvement is amongst unaccompanied youth. The rates of youth under 18 without a parent or guardian who are experiencing homelessness continue to increase, climbing 41% from 2019.

Overall Homelessness			
2019	2020		
10,006	7,811		

Youth Homelessness				
2019	2020			
58	82			

While we celebrate our accomplishments, we are striving for continuous improvement.

Homelessness in Detroit - Overall Picture

The data contained within this report was collected during the 2020 calendar year through the Michigan Statewide Homeless Information System (HMIS).

Client Characteristics	*Overall Homeless	Single Adults (25+)	Youth (18-24)	Unaccomp. Youth (under 18)	Adults in Families	Children in Families	Senior (55+)	Chronically Homeless
Total in HMIS – Accounting for 96% of Overall Homeless in the Detroit Continuum	7,811	4,665	791	82	1,077	1,577	1,878	1,817
Male	63%	78%	53%	17%	20%	50%	83%	71%
Female	37%	22%	46%	83%	80%	50%	17%	29%
Other (Transgender/ Non-binary)	<1%	<1%	1%	-	-	-	<1%	<1%
Age 0-4	9%	-	-	_	-	44%	-	-
Age 5-10	7%	-	-	-	-	35%	-	-
Age 11-14	3%	-	-	5%	-	15%	-	-
Age 15-17	2%	-	-	95%	-	6%	-	<1%
Age 18-24	12%	-	100%	-	25%	-	-	7%
Age 25-34	15%	19%	-	-	38%	-	-	16%
Age 35-44	13%	18%	-	-	20%	-	-	17%
Age 45-54	15%	24%	-	-	11%	-	-	24%
Age 55-64	18%	29%	-	-	5%	-	74%	28%
Age 65+	6%	10%	-	-	1%	-	26%	8%
Average Age	35	49	21	16	33	6	61	47
African American	87%	83%	88%	88%	93%	96%	84%	86%
White	12%	16%	11%	11%	6%	3%	15%	13%
Other	1%	1%	1%	1%	1%	1%	1%	1%
Disabling Conditions	50%	65%	42%	44%	44%	10%	73%	100%

^{*}Overall numbers are unduplicated numbers. 381 persons were reported in more than one sub-population category during the year.







COVID-19 Response

The Detroit CoC had to make substantial changes in response to the COVID-19 pandemic to mitigate the risk of an outbreak and ensure that clients and staff remained safe. These modifications have been broken into the following six categories:

1. Policies & Procedures

- All congregate living facilities (e.g. Emergency Shelters) were given verbal and written guidance from the Detroit Health Department (DHD) to promote client and staff safety while maintaining operations. DHD helped shelters to adjust the layout of their facilities and modify their capacity to allow for social distancing. Local guidance was updated regularly in alignment with federal direction. System leadership also came together to loosen regulatory burden upon congregate providers wherever possible.
- In addition to the policies developed to ensure safety in congregate facilities, guidance was developed for our non-congregate PSH, RRH, and TH providers. The guidance was designed to help providers make adjustments to program operations, provide client and staff education about COVID-19, and safely continue supportive services to clients.

2. Isolation & Overflow Shelters

The City of Detroit, in partnership with DHD, opened an isolation shelter for clients displaying COVID-19 symptoms and clients that tested positive for COVID-19 to mitigate the spread of the virus in congregate settings. The isolation shelter provided on-site nurses to monitor symptoms and to care for clients. Two overflow shelters were also opened to allow for the active shelters to reduce capacity and promote social distancing. A total of 174 additional beds were added with the overflow shelters.

3. Health Screenings & Testing Strategy

 To mitigate the spread of COVID-19 it was crucial for congregate facilities to provide daily health screenings to clients. A health screening tool was created based on CDC guidelines. In addition to health screening, congregate living facilities and drop-in day centers were provided with twice monthly COVID-19 testing.

4. Centralizing Supplies & Funding

- Personal protective equipment (PPE) and cleaning supplies were difficult to come by at the start of the pandemic. The City of Detroit engaged numerous donors* to secure the equipment needed to keep our facilities clean and safe. Between March December, 23 PPE distributions were provided to 40 sites with the capacity to serve 3,020 persons experiencing homelessness. Providers received thousands of needed supplies including gloves, masks, gowns, hand sanitizer, various disinfectant agents, and thermometers.
- In addition to the efforts made by the City of Detroit to secure PPE for shelters and congregate facilities, HAND was able to procure and distribute more than 7,000 face masks to providers and clients in noncongregate housing programs (PSH, RRH, and TH).

5. Communication & Collaboration:

Collaboration was a critical element in early and ongoing pandemic response. An inter-agency team was formed at the start of the pandemic that met regularly to make real-time decisions and system adaptations. This team was largely responsible for developing and overseeing the multifaceted pandemic response strategy discussed above. The CoC also committed to regular communication with providers and the public. This allowed for the quick implementation of necessary changes and the space to troubleshoot issues as they arose. Two major streams of ongoing communication were forged: CoC-Wide Webinars and COVID-19 Data Reports.

6. Vaccinations

• The City of Detroit, HAND, Detroit Health
Department, and additional partners used the
last quarter of 2020 to plan for the release of the
COVID-19 vaccines in early 2021. It was determined
to host vaccination clinics at the various shelters and
congregate facilities. To promote vaccine uptake and
combat misinformation, local strategy incorporated
educational sessions with medical professionals at
each facility prior to the clinic.

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^{*} Partnerships were with the following generous donors: the City of Detroit, Michigan Department of Health and Human Services, the McGregor Fund, Wurth Service Supply & Northern Safety Industrial, Daniel Friedus, Promess Incorporated, Katrina Chaves, GM Cares, Rock Ventures, Ward Church Northville, Fifth Generation, State of Michigan - Mask Up Michigan Campaign, Southwest Counseling Solutions, and Detroit Wick.

Coordinated Assessment Model (CAM) in the Detroit CoC: 2020 Review

In 2020, the Coordinated Entry (CE) system in Detroit, known locally as the Coordinated Assessment Model (CAM) continued to implement & function under the CAM 2.0 model.

Key Data Points Summary

There was a significant increase in the volume of households presenting to CAM after CAM switched to a call center model in response to the COVID-19 pandemic.

 CAM staff had 42,248 total engagements with households, an average of 147 engagements per day

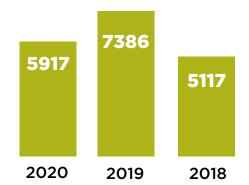
While CAM engaged significantly more households over the phone than in person, intakes actually decreased as engagements increased.

- CAM staff conducted
 8,211 total intakes in
 2020, an average of
 29 intakes per day
- CAM staff made a total of 2,294 diversions in 2020, an average of 8 per day
- CAM staff made a total of 5,917 referrals to shelter in 2020, an average of 21 per day

Total shelter referrals in 2020 were lower than 2019, however they were still higher than 2018.

Note: Coordinated Entry/CAM referrals in 2020 do not include the following program types: Veteran Housing Projects (VASH, SSVF, GPD TH, Piquette PSH) and HOPWA.

Total Annual Shelter Referrals



The referrals made to permanent housing programs also decreased slightly from 2019-2020

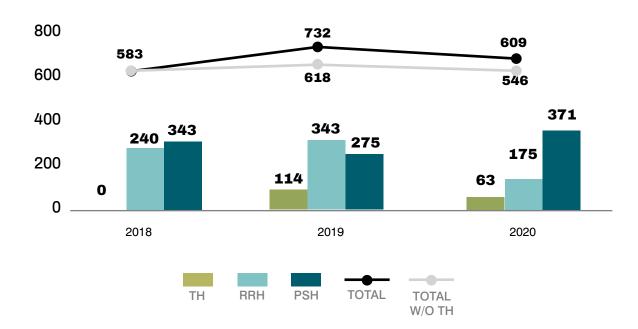
Definitions:

- "Engagements" are counted each time CAM Intake Staff interacts with a household. This includes in-person visits and connected calls.
- "Intakes" are counted as each time a household is seeking shelter and CAM either diverted the household to a safe place to stay or referred the household to shelter.



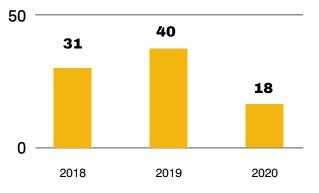


Housing Referrals 2018-2020

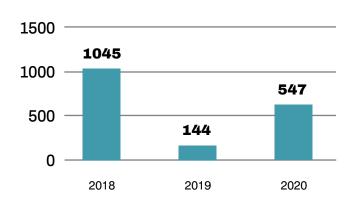


The number of Housing Choice Vouchers pulled in 2020 increased from 2019 but was still well below levels from 2018.

Moving Up Vouchers Pulled



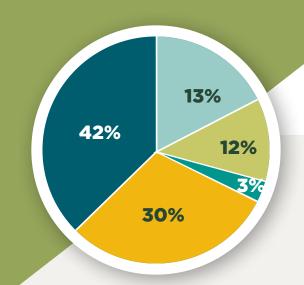
HCVs Pulled



Chronically Homeless

Over the course of 2020, a total of **1,817** people were identified as being chronically homeless.

A person is considered chronically homeless if they have been diagnosed with a long-term disabling condition and have been homeless 4 or more times in the past 3 years or have been or has been homeless one year continuously with that disabling condition. A family is also considered chronically homeless if one or more household members meet the requirements of the definition above. These individuals and families are often prioritized for intensive housing and supportive services, as they have significant barriers to housing, such as poor rental histories, no income, untreated mental health and/or substance abuse issues, chronic physical health concerns, unemployment, and more.



EXIT DESTINATIONS

- Exit to Temporary Housing
- Exit to Other/Missing
- Exit to Institution
- Exit to Homelessness
- Exit to Permanent Housing



23% of our overall homeless population are chronically homeless

71% of the chronically homeless population are male

36% of the chronically homeless are seniors 55+

42% of the Chronically Homeless exited to Permanent
Housing (PH) in 2020. Of that:

56% were exited with subsidy

44% were exited without subsidy

A total of **1,242** chronically homeless individuals exited during 2020

Seniors 55+

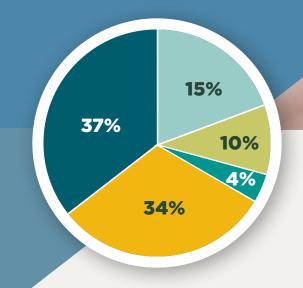
Over the course of 2020, a total of 1,878 seniors 55+ experienced homelessness.

Seniors 55+ represent 24% of our total homeless

26% of the seniors experiencing homelessness in the Detroit CoC are over the age of 65 years old

83% of the seniors experiencing homelessness are male

73% of the seniors experiencing homelessness had a disabling condition.



EXIT DESTINATIONS

- Exit to Temporary Housing
- Exit to Other/Missing
- Exit to Institution
- Exit to Homelessness
- Exit to Permanent Housing

37% of the Seniors 55+ population exited to Permanent Housing (PH) in 2020. Of that:

49% were exited with subsidy

51% were exited without subsidy

A total of **1,547** Seniors 55+ exited during 2020

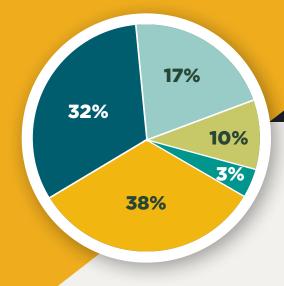
Single Adults 25+

Over the course of 2020, a total of **4,665** single adults 25+ experienced homelessness.

Single adults 25+ make up **60%** of our overall homeless population

78% of the single adults 25+ experiencing homelessness are male

65% of the single adults 25+ experiencing homelessness had a disabling condition



EXIT DESTINATIONS

- Exit to Temporary Housing
- Exit to Other/Missing
- Exit to Institution
- Exit to Homelessness
- Exit to Permanent Housing



32% of the Single Adults
25+ exited to Permanent Housing
(PH) in 2020. Of that:

43% were exited with subsidy

57% were exited without subsidy

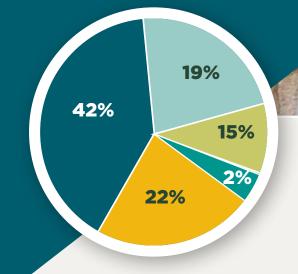
A total of **3,988** single adults 25+ exited during 2020

Youth 18-24

Over the course of 2020, a total of 791 youth 18-24 experienced homelessness.

Youth 18-24 make up 10% of the overall homeless population.

53% of youth 18-24 experiencing homelessness are male, 46% are female and 1% are trans or non-conforming



EXIT DESTINATIONS

- Exit to Temporary Housing
- Exit to Other/Missing
- Exit to Institution
- Exit to institution
- Exit to HomelessnessExit to Permanent Housing

42% of the Youth 18-24 exited to Permanent Housing (PH) in 2020. Of that:

14% were exited with subsidy

86% were exited without subsidy

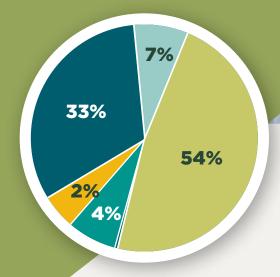
A total of **583** youth 18-24 exited during 2020

Unaccompanied Youth (Under 18)

Over the course of 2020, a total of **82** unaccompanied youth under the age of 18 experienced homelessness.

Unaccompanied youth under 18 make up 1% of the overall homeless population

83% of the unaccompanied youth experiencing homelessness are female



EXIT DESTINATIONS

- Exit to Temporary Housing
- Exit to Other/Missing
- Exit to Institution
- Exit to Homelessness
- Exit to Permanent Housing

33% of the Unaccompanied Youth (Under 18) exited to Permanent Housing (PH) in 2020. Of that:

100% were exited without subsidy

A total of **72** unaccompanied youth under 18 exited during 2020

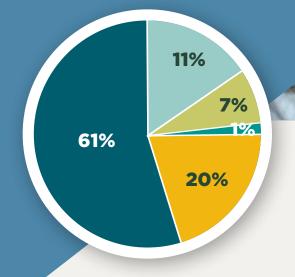
Families

Over the course of 2020, a total of **961** families experienced homelessness.

Individuals in Families make up 34% of the overall homeless population.

80% of the 1,077 Adults in Families experiencing homelessness are female,

50% of the 1,577 Children in Families experiencing homelessness are male and 50% are female.



EXIT DESTINATIONS

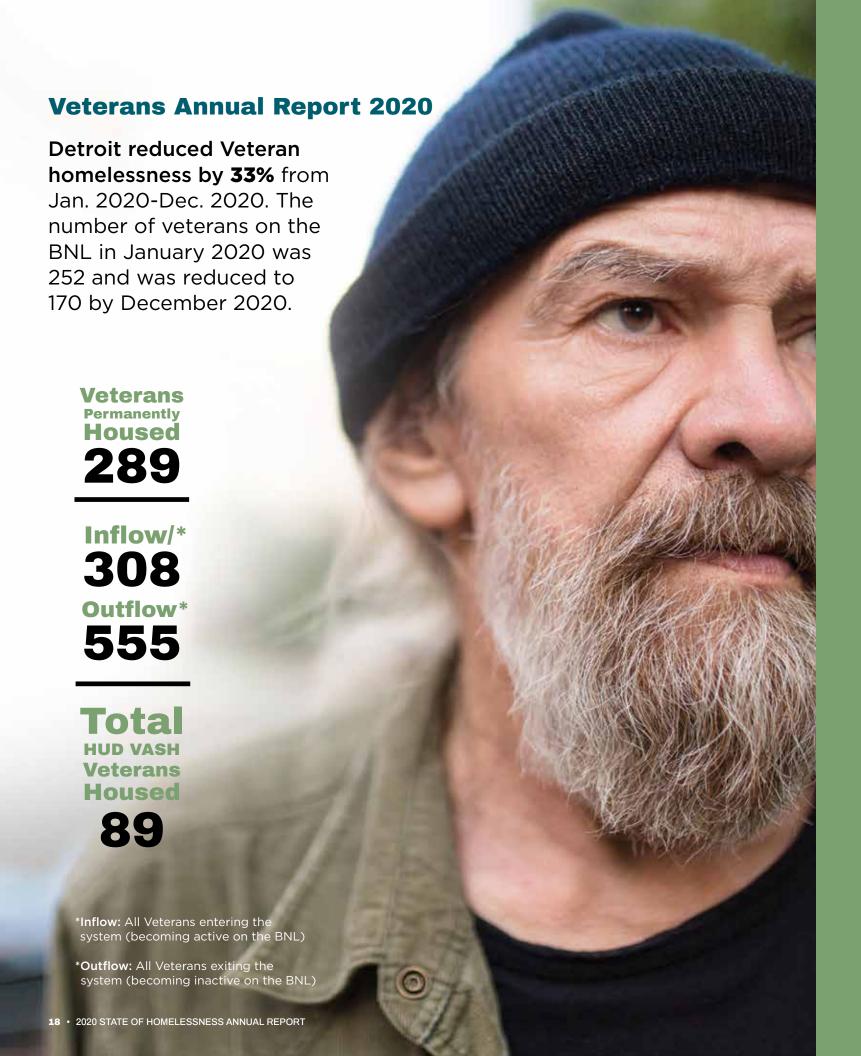
- Exit to Temporary Housing
- Exit to Other/Missing
- Exit to Institution
- Exit to Homelessness
- Exit to Permanent Housing

61% of households with children exited to Permanent Housing (PH) in 2020. Of that:

44% were exited with subsidy

56% were exited without subsidy

A total of **594** families exited during 2020



CONTINUING THE ROAD TO REDUCTION

- Developed and implemented Incentive Plan: Quicken Loans Veteran Housing Fund by Rocket Mortgage was designed to enable and support Veterans moving from the temporary program known as Grant Per Diem (GPD) to Permanent Housing (PH).
 - \$150,000 Grant Award
 - From June 2020-December 2020 Spent: \$32.179.54
 - 16 enable applications, 23 supporting applications
 - receiving both enable and supporting funds.
 - Available to all Veterans on the community By-Name List, residing in GPD programs and moving into PH
- Case for Investments: Began September 25, 2020, when representatives from Veteran community agencies and the V.A. met to surface barriers that pass-through funding could solve. Six ideas surfaced and three were submitted December 4, 2020.

All three proposals were funded.

Proposal 1: Staffing for Veteran Access Point (CAM) at VA Medical Center

- Dollar Amount Requested: \$65,000
- Lead Receiving Agency: Southwest Solutions Inc., which is the agency managing comparable positions across other sub-populations

Proposal 2: Tableau dashboard creation and

- Dollar Amount Requested: \$60,000
- Lead Receiving Agency: The Homeless Action Network of Detroit



- Dollar Amount Requested: \$60,000, spread over 3 years for assistance with creation, implementation, and management of Affordable Housing database by Padmission, Inc.
- Lead Receiving Agency/Fiscal Agent: To be determined by local RFP process in conjunction with the City of Detroit
- **DRMM VIP-2 GPD:** Closed out resulting in all Veterans being successfully permanently housed. DRMM moving forward with converting 61 units to
- VASH vouchers: Strategic team met to evaluate the utilization of VASH vouchers in Detroit. Due to enhanced efforts in preventing and diverting homelessness, it was determined that the Detroit market is over-saturated with vouchers; and approximately 80 vouchers will be returned for disbursement in other communities with current needs. This will still allow ample vouchers in Detroit for our homeless Veterans.
- Emergency Hotel Assistance (EHA) successes: in EHA in 2020.
- CARES Act: All SSVF providers received a 103% increase for FY2021 budget

Racial Equity

In 2019, the CoC Analysis Tool was introduced. The CoC Analysis Tool was published by HUD and visualized Point-In-Time (PIT) Count and American Community Survey data to facilitate analysis of racial disparities among people experiencing homelessness. This tool includes data on all persons, persons in poverty, persons experiencing homelessness, and other pertinent information by CoC and State. The number of people experiencing homelessness represented in this tool is drawn from the 2019 Point in Time (PIT) Count data reported in the Annual Homeless Assessment Report (AHAR) to the U.S. Congress. PIT Counts are unduplicated 1-night estimates of sheltered and unsheltered homeless populations conducted by CoCs nationwide during the last week of January each year. This analysis is a critical first step in identifying and changing racial and ethnic bias in our systems and services. It helps show us where there may be gaps so that we can act accordingly.

In reviewing this tool, we noticed that in the Detroit CoC, black families with children represent 79% of people experiencing poverty however, during the PIT Count black families represented 97% of people experiencing homelessness. White families with children represented 14% of people experiencing poverty, whereas during the PIT Count white families with children represented only 2% of people experiencing homelessness. We also see higher rates of Hispanic ethnicity when we look at families in poverty, at 10% however, Hispanic families experiencing homelessness represented only 1% during the PIT Count. This demonstrates that poverty is not the sole factor attributed to the racial disparities among families experiencing homelessness. As a community we would need to consider other factors that may contribute to this disparity and move to work at diminishing those factors. We look forward to further analysis when the 2020 updates are added to the CoC Analysis Tool.

Source: HUD Exchange https://www.hudexchange.info/

In CY 2020, HAND started the We Cannot Be Silent Campaign to empower those with lived experience to participate more fully in political processes in addition to voting and to create a dialogue about homelessness and inclusion in civic life. The goal of this campaign was to create a steppingstone to elevate the voices of those with lived experience by partaking in voting registration initiatives, data tracking, and analysis, applauding and encouraging anti-racist policies, advocating for our community, and partnering with interdisciplinary collaborations. We ensured our COVID response was rooted in an equitable framework and continued our emphasis on Housing First practices. To begin to work towards further community analysis and systemic change to address and diminish the evident disparity found within the CoC Racial Equity Analysis tool, there have been collaborative partnerships formed with NIS as well as distribution of a qualitative and quantitative-based survey to over 600 individuals. Our next steps involve another round of surveys to build upon our first round of data with our CoC Staff & Partner Agencies. We hope to use the data found within our surveying attempts to build upon the conversations being held with NIS and open a platform to allow our CoC and Community as a whole to discuss racial equity, disparities, and bias within our systems and services. We will utilize our findings to make data-driven decisions to ensure equitable systems & processes.

To see a complete breakdown of this CoC Analysis Tool you may visit the HUD Exchange website at: https://www.hudexchange.info/resource/5787/coc-analysis-tool-race-and-ethnicity/

Changes in Homelessness

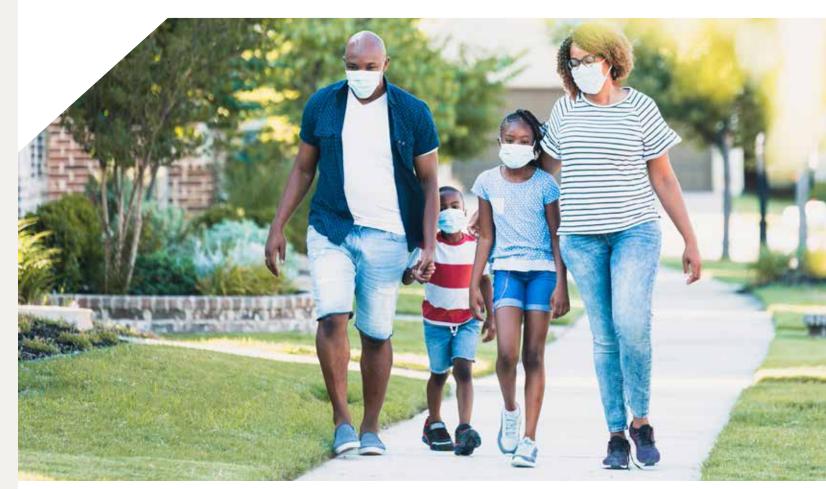
During 2020, there was a total of 7,811 people experiencing homelessness. As we have shown in previous Annual reports, this number has decreased consistently over the years. Since the start of the fiscal year 2018, we have seen a 29% decrease in the number of people experiencing homelessness.

While efforts to decrease the number of homeless has been on a downward trend, in the year 2020 we were faced with a pandemic that drastically affected our CoC providers. With the new challenge of navigating clients through the Detroit CoC during a pandemic, providers were able to set in place safe protocols that helped with mitigating the spread of COVID-19.

A big factor in the overall homeless count dropping by 22% from last year is due to shelters having lower capacity to be more in line with COVID safety measures. There was also a decrease of two emergency shelter projects

and a decrease in some seasonal beds. In March 2020, there were COVID shelters open to help with quarantining symptomatic clients and COVID positive clients so they could be in a safe area until they were cleared to leave, and either go back to a shelter or other living situation. Opportunities were provided to help with evictions and RRH programs that were able to keep individuals and families longer during the pandemic. Even during the eviction moratoriums in place in 2020, the Eviction Diversion Program (EDP) served 2248 households and distributed \$7.93 million in financial assistance to help prevent people from becoming homeless.

The Youth numbers for unaccompanied youth (under 18) had seen a steady increase since 2018 when it dropped from 95 to 47 and now in 2020 it has risen to 82. There is a youth committee that is working closely with youth data and working to understand what can be done to capture this data more efficiently and consistently.



3 Year Data Comparison

The table below shows a comparison of homeless data over the past three years.

COMPARISONS	2018	2019	CHANGE 2018-2019	2020	CHANGE 2019-2020
Overall Homeless	10,744	10,006	-7%	7,811	-22%
Single Adults (25+)	6,870	6,221	-9%	4,665	-25%
Youth (18-24)	869	878	1%	791	-10%
Unaccompanied Youth (Under 18)	47	58	23%	82	41%
Adults in Families	1,377	1,366	-1%	1,077	-21%
Children in Families	2,084	2,008	-4%	1,577	-21%
Seniors (55+)	2,613	2,384	-9%	1,878	-21%
Chronically Homeless	2,231	2,326	4%	1,817	-22%



System Performance Measures

What are the System Performance Measures (SPMs)?

The SPMs are a series of measures intended to help a community gauge its progress towards reducing and ending homelessness. These measures tell us how well our projects are working together as a system to make an impact on homelessness.

What are the measures and how are we performing?

There are six SPMs that Detroit is currently measured on:

- 1. Length of time homeless
- 2. Returns to homelessness
- 3. Overall number of persons experiencing homelessness
- 4. Employment and income growth for persons served in CoC-funded programs
- 5. Number of first time homeless
- 6. Exits to, or retention of, permanent housing

Each of these measures is often additionally broken down into sub-measures. Full details on the CoC's performance on the SPMs can be found at www.handetroit.org/reports. You can also find information on Detroit's performance as compared to other Continua of Care at www.handetroit.org/spms. Detroit's performance is highlighted on three key priority measures.

*Note: The FY2019 SPM data in this report reflects data that was resubmitted for the FY2019 period. Therefore, the FY2019 SPM data in this report may differ from a prior report.

How does HUD use this information?

HUD evaluates a CoC's performance on the SPMs in the annual CoC competition, with an expectation that a CoC's performance will improve from year to year. *The data below covers the period of 10/1/2019 - 9/30/2020.

Not surprisingly, due to the way in which the COVID-19 pandemic impacted the homeless service delivery system, in some cases Detroit's performance over this period on some measures worsened when compared to the prior year. At the time of the publication of this report, it was unknown how HUD would make accommodations for CoCs when evaluating their performance on the SPMs considering the pandemic.

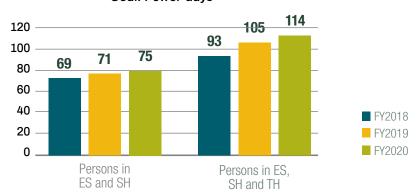


Measure #1: Length of Time Homeless

This measure is the length of time (in days) that a person spends in either an Emergency Shelter (ES) or Safe Haven (SH) program, and then in either an ES, SH, or Transitional Housing (TH) program. It is expected that lengths of stay in TH programs will be longer than other program types given the nature of the program. The length of time people are remaining in homeless programs continues to trend upward.

Over the course of 2020, this increase in length of time may have been impacted by the pandemic, during which housing providers experienced difficulty with moving people out of shelter and into housing due to stay-at-home orders, a decrease in available units to move people into due to eviction moratoriums, and other pandemic-related factors that slowed a persons' movement into housing.

Average length of time homeless (days) Goal: Fewer days



Measure #2: Returns to Homelessness

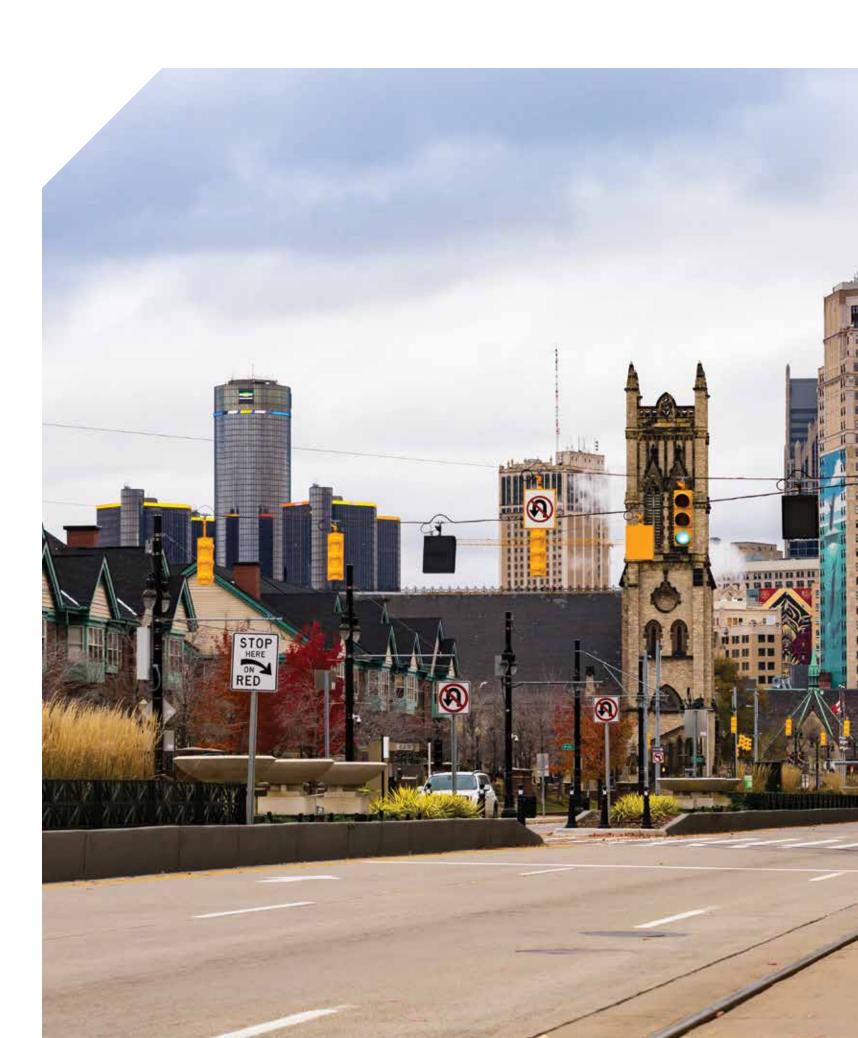
This measure looks at the extent to which persons who leave a program to permanent housing subsequently return to homelessness. The chart below demonstrates that persons who return to homelessness after being housed are more likely to do so within the first six months of being housed. Knowing this fact should result in additional attention being given to after-care services for persons exiting from homelessness, to help ensure housing stability during those first few critical months. The overall

rate at which people return to homelessness within two years of exit to permanent housing did increase by 1% over the last reporting period, with that 1% increase also being seen in the longer-term time intervals post exit to housing.

This may point to broader systemic concerns impacting a person's ability to retain their housing, such as loss of job opportunities or rising rental rates.

Percentage of Returns to Homelessness Goal: Lower percentage



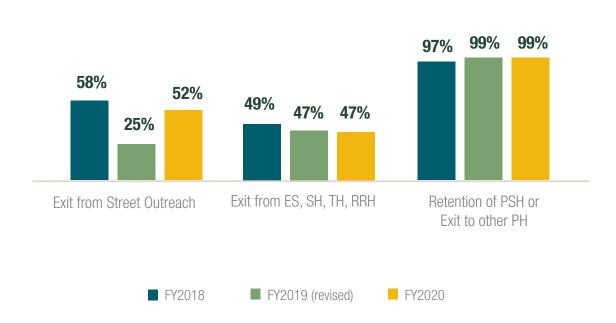


Measure #7: Permanent Housing Placements

This measure considers successful housing placements differently, depending on the program type that the person is exiting from.

- For Street Outreach (SO) programs, a successful housing placement includes placements into permanent housing, temporary placements, and some institutional settings. Improvements in recording exit destinations contribute to improved performance.
- The measure for exits from ES, SH, TH, and RRH only considers placement into permanent housing destinations as a positive outcome. Low rates of exit from shelter to permanent housing impact this measure. Performance on this measure has remained steady over the past few years.
- The measure for PSH looks at the percentage of persons who retain their PSH placement or move to another permanent housing destination. Detroit's PSH programs consistently perform well in assisting people with retaining permanent housing. Performance on this measure has improved by 2% from FY2018 to FY2020.

Exits from Program Type to Successful Placement or Permanent Housing Goal: Higher Percentage



Comparison to National Data

The charts below compare the Detroit CoC's performance on the three key SPMs as compared to national averages for the FY2019 (10/1/2018 - 9/3/2019), the most recent publicly available national data. Comparing Detroit's performance to national SPM data should be done with a note of caution, as there are many factors contributing to differences in performance between communities, including HMIS coverage rates, local data quality, local housing stock, and local economic factors. Additionally, HUD does not compare a CoC's performance on the SPMs to national averages; rather, HUD compares a CoC's performance only to itself.

SYSTEM PERFORMANCE MEASURE #1: LENGTH OF TIME IN ES, SH, AND TH

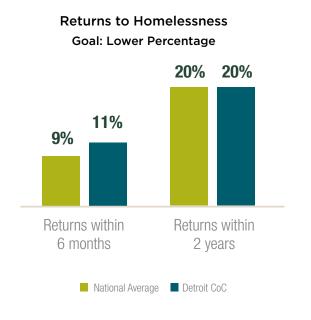
While Detroit's average length of time people are homeless in shelters, Safe Havens, and transitional housing programs is lower than the national average, it is important to note there are many factors impacting this measure, including differences in resources communities may have available for persons to move into.

Average Length of Time (Days) Persons Served by Emergency Shelter, Safe Haven, and Transitional Housing Goal: Fewer Days



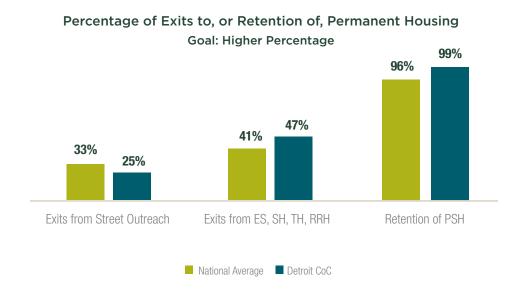
SYSTEM PERFORMANCE MEASURE #2: RETURNS TO HOMELESSNESS AFTER EXIT TO PERMANENT HOUSING

Detroit's performance on the percentage of people who return to homelessness within two years after exiting to permanent housing is comparable to the national average; however, when looking at performance for returns within 6 months of exit, Detroit's performance is slightly below the national average.



SYSTEM PERFORMANCE MEASURE #7: EXITS TO, OR RETENTION OF, PERMANENT HOUSING

Detroit's performance is comparable to, or better than, the national average when it comes to exits to, or retention of, permanent housing. It is important to note that the data for exits from Street Outreach programs includes exits to some temporary locations, such as shelters or institutions, in additional permanent housing.



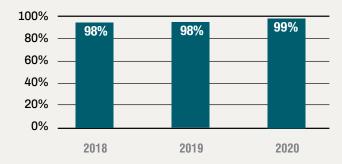


2020 Accomplishments¹

PERMANENT SUPPORTIVE HOUSING OUTCOMES

One of the primary goals of Permanent Supportive Housing (PSH) is to help people remain housed, including either remaining in PSH or moving to another permanent housing placement. The PSH programs in Detroit historically perform very well in this area:

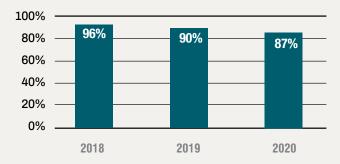
Percentange PSH Residents Remaining Permanently Housed



RAPID RE-HOUSING

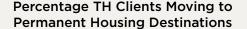
Overall, the rates at which people exited from an RRH project to a permanent housing destination remained quite high in 2020. One item of note is that there were also about 33% fewer people who exited RRH in 2020 than in 2019. This is not surprising, given that over the course of 2020, due to the pandemic, time limits in some RRH projects were lifted allowing people to remain in the project longer if they were not able to transition out of the project to a permanent housing resource.

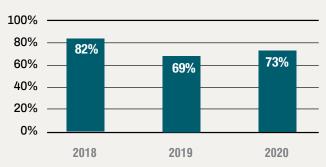
Percentage of People Exiting to Permanent Housing from Rapid Re-Housing



TRANSITIONAL HOUSING

Like Rapid Re-Housing, Transitional Housing (TH) is a temporary program, with a primary performance expectation that people are exited to permanent housing. Over the course of 2020, the overall performance of TH projects did increase slightly from 2019, with an overall average of 73% of people served exiting to permanent housing. Like was seen with RRH, there were fewer people exited from TH in 2020 than in 2019 (20% fewer). Again, this was likely due to the pandemic and clients being unable to obtain other housing and thereby not exiting the TH project. Clients who did exit were able to exit to permanent housing to a greater degree than the year prior.

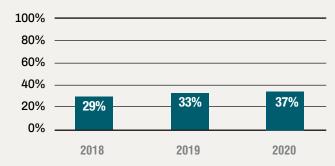




EMERGENCY SHELTER

Emergency Shelter (ES) is a temporary program, with a performance expectation being that people are exited to permanent housing. While shelters have typically struggled to exit people to permanent housing, overall, over the past three years there has been improvement in performance. Over the course of 2020, 37% of people who exited a shelter exited to permanent housing which, while still a relatively low performance rate, is an increase from the prior year. Of significance as well for shelters is that there were about 30% fewer people who left shelters in 2020 than in 2019, and about 28% fewer people served in shelters in 2020 than in 2019. The decrease in persons served in shelters aligns with reports from the Coordinated Entry system which has reported a decrease in people accessing Coordinated Entry for emergency housing resources in 2020.

Percentage Exiting Emergency Shelter to Permanent Housing

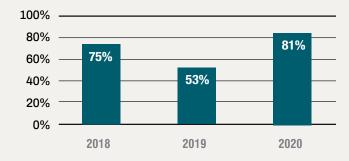


¹A different method of generating the reports from HMIS was used for the 2019 report than in prior years, which ma contribute to some of the differences in the data.

STREET OUTREACH

Street Outreach (SO) is a program focused on engaging persons experiencing homelessness in places not meant for human habitation, with a performance expectation to assist individuals in getting off the streets and into a positive destination. Positive destinations include both permanent and temporary housing. Over the course of 2020 significant efforts were made to improve the accuracy of reporting exit destinations of persons served, which has also contributed to the improved performance rates.

Percentage Exiting Street Outreach to Positive Destinations







Permanent Housing

There were **525** households housed in the Detroit CoC Permanent Housing programs in 2020

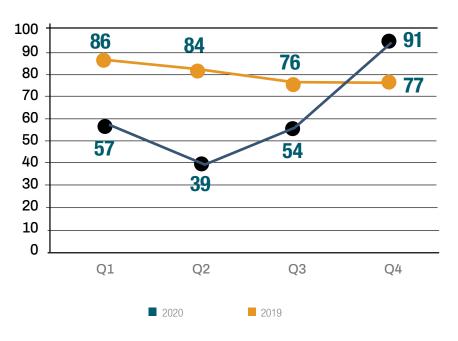
Permanent Supportive Housing 2020 Overview

The CoC was committed to focusing on individuals experiencing chronic homelessness. Though there was a decrease in the number of clients housed in PSH in 2020, chronic households *represented 99%* of the total households *referred to PSH*. The implementation of the HUD Waivers during COVID-19 combined with limited available housing contributed to this decrease.

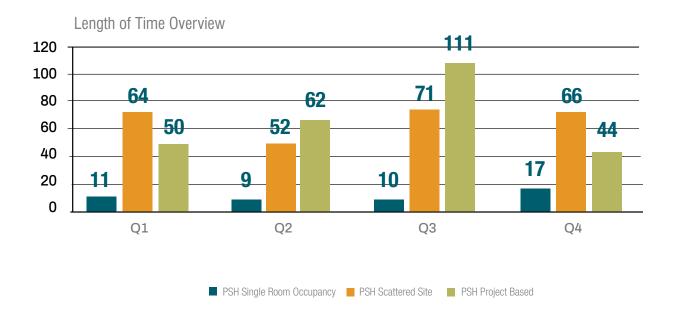
PERMANENT SUPPORTIVE HOUSING DATA SNAPSHOT

Total Housed in PSH during 2020: 241

Number of Households Housed in a PSH Program in the Detroit CoC 2020 vs. 2019



Average Length of Time (Days) from Referral to Housed in 2020 Detroit CoC PSH Programs



Source: HMS Housed Data

Rapid Re-Housing 2020 Overview

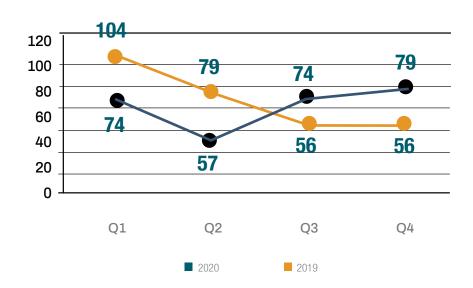


In 2020, we saw a significant decrease in the number of "new" households being housed in RRH. The implementation of the HUD Waivers during COVID-19 combined with limited available housing contributed to this decrease. We started analyzing the length of time it was taking to get housed through our RRH programs to provide a baseline for future goals as well as to assist with planning around available resources.

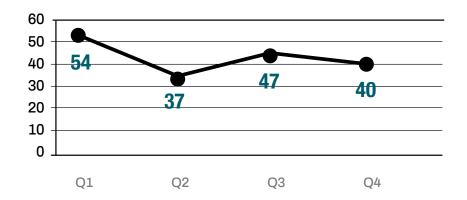
RAPID RE-HOUSING DATA SNAPSHOT

Total Housed in RRH during 2020: 284

Number of Households Housed in a RRH Program in the Detroit CoC 2020 vs. 2019

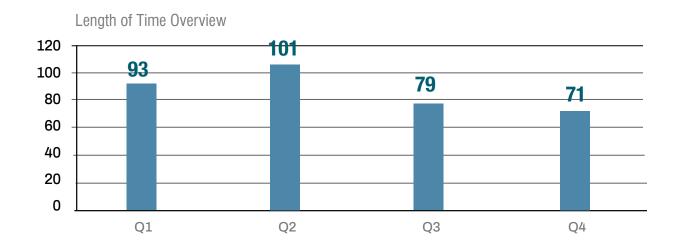


Number of Households Housed in a SSFV RRH Program in the Detroit CoC 2020



Source: HMS Housed Data

Average Length of Time (Days) from Referral to Housed in 2020 Detroit CoC RRH Programs



Source: HMS Housed Data

Continuum of Care Funding for Homeless Services

The Detroit Continuum of Care received a total of **\$27,280,221** in Continuum of Care funds to support projects serving people experiencing homelessness. The funding for these projects is to be spent over the course of 2020 and 2021.

HUD FY2019 DETROIT CONTINUUM OF CARE AWARDS

	New Awards	Renewal Awards	
Permanent Housing			
Permanent Supportive Housing	\$ 1,094,948	\$ 18,397,046	
Rapid Re-Housing	\$	\$ 3,351,008	
Transitional Housing-Rapid Re-Housing	\$	\$ 916,874	
Transitional Housing		\$ 753,233	
Supportive Services Only			
Coordinated Entry Services	\$	\$ 1,806,879	
Homeless Management Information System	\$	\$ 390,233	
CoC Planning	\$ 570,000	N/A	
TOTAL	\$ 1,664,948	\$ 25,615,273	
GRAND TOTAL	\$ 27,280,221		

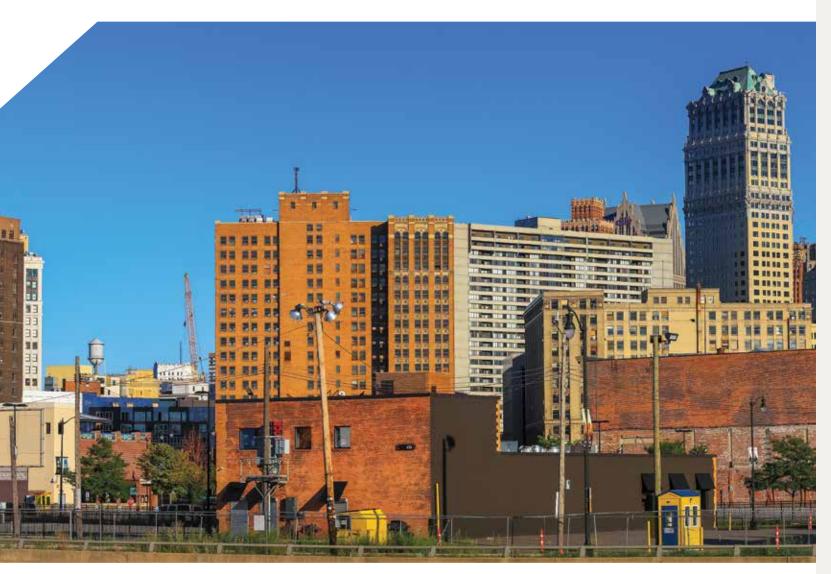


Homeless Action Network of Detroit (HAND)

Since 1996, the Homeless Action Network of Detroit (HAND) has served as the lead agency for the CoC for Detroit, Hamtramck, and Highland Park. HAND is governed by a Board of Directors composed of representatives from the community. In its role as the lead agency for the CoC, HAND carries out the following activities:

- Promote integrated, community-wide strategies and plans to prevent and end homelessness;
- Provide coordination among the numerous local organizations and initiatives that serve the homeless population, and
- Manage the CoC's single, comprehensive grant application to HUD for McKinney-Vento funding which includes Continuum of Care funds and State Emergency Solutions Grant (ESG) funds.

The governance charter for the Detroit CoC was adopted on May 19, 2015, and most recently revised on May 21, 2019. A copy of this charter can be found on HAND's website at https://www.handetroit.org/s/Detroit-CoC-Governance-Charter-FINAL-May-2019-kac4.pdf



What is HMIS

The Homeless Management Information System (HMIS) is a web-based software application that homeless assistance providers use to coordinate care, manage their operations, and better serve their clients.

Such software applications record and store clientlevel information on the characteristics and service needs of homeless persons. HMIS implementations can encompass geographic areas ranging from a single county to an entire state. An HMIS knits together homeless assistance providers within a community and creates a more coordinated and effective housing and service delivery system. The United States Department of Housing and Urban Development (HUD) and other planners and policymakers at the federal, state, and local levels use aggregate HMIS data to obtain better information about the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs.

HMIS was first developed in the late 1990s in response to a mandate by Congress requiring states to collect this data as a condition of receiving federal money from HUD to serve homeless populations. The impetus behind this mandate was to reduce and eventually solve homelessness, a problem that could never be solved if it was not understood and if progress toward that goal was not tracked. The Detroit CoC's HMIS was implemented in August 2004 in collaboration with the Michigan Coalition Against Homelessness (MCAH). The Detroit CoC is part of the Michigan Statewide HMIS implementation and uses WellSky Community Services (ServicePoint) as their HMIS application.

The Detroit CoC's HMIS also serves as an outcome-based system that facilitates timely, efficient, and effective access to needed services and supports for persons who experience and are at risk of homelessness.

Data Included in This Report

This report gives a review of data collected through the HMIS during the 2020 calendar year. Based on our estimates, the date data in this report represents approximately 96% coverage of persons experiencing homelessness in the Detroit CoC from January 1, 2020 to December 31, 2020.

Data Limitations

The data in this report is not intended to provide a complete count of the homeless population in the Detroit CoC due to the circumstances noted below.

- 96% of homeless providers in Detroit use HMIS however, there are some organizations and programs that do not report into the HMIS, including domestic violence programs which are prohibited from using the HMIS by federal statutes.
- A response may not have been recorded for all clients to some questions, which contributes to some responses not adding up to 100%. We continue to work to improve data completeness and accuracy.
- The data for this report was pulled from the HMIS using several reporting queries. As each query may have pulled the data slightly different from the system there, may not always be a one-to-one match of data among the graphs and tables.
- The percentages displayed throughout the report are rounded to the nearest whole number.

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Agencies Using the System

Over the course of 2020, there were 40 agencies actively entering or reviewing data in the HMIS.

Matrix Human Services		
Michigan Children's Home Society		
Michigan Veterans Foundation		
Neighborhood Service Organization		
NOAH Project		
Operation Get Down		
Operation Welcome Home		
Pope Francis Center		
Positive Images		
Ruth Ellis Center		
Salvation Army		
Southwest Solutions		
St. John Community Center		
The Heat and Warmth Fund (THAW)		
Traveler's Aid Society of Detroit		
United Community Housing Coalition		
Veterans Administration Medical Center		
Volunteers of America		
Wayne County Neighborhood Legal Services		
Wayne Metropolitan Community Action Agency		

HAND continues to work to implement HMIS data collection and reporting at additional agencies and within additional programs to help ensure the most complete and robust data possible for the Detroit CoC.

The Detroit Continuum of Care

In 2009, the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act amended the McKinney-Vento Homeless Assistance Act and codified in law the role and functions of the Continuum of Care (CoC). Each community had to establish a CoC in compliance with the new CoC Program Interim Rule, published by the Department of Housing and Urban Development (HUD) on July 31, 2012.

The Detroit CoC coordinates the implementation of a housing and service system that meets the needs of all persons experiencing homelessness throughout its geography. The Homeless Prevention and Response System includes:

- Outreach, engagement, and assessment
- Shelter, housing, and supportive services
- Homelessness prevention and diversion strategies

The Detroit CoC is a year-round planning body of representative stakeholders in the community's work toward ending homelessness. Its work includes gathering and analyzing information in order to determine the local needs of people experiencing homelessness, implementing strategic responses, and measuring results.

The Detroit CoC Board is a group of elected and appointed leaders of the CoC who have authority to make decisions on behalf of the CoC. The CoC Committees are the action planning components of the continuum. In the Committees, strategies are developed, deepened, and expanded into timed workplans.

Seven standing CoC Committees are designated in the CoC governance charter established by the Detroit CoC. The committees are the Chronic Leadership Committee, Performance and Evaluation Committee, CAM Governance Committee, Special Events, Veterans Leadership Committee, Youth Committee, and Family Committee.



There are also the following board committees listed in the governance charter: the Executive Committee, Grievance Committee, Values and Funding Priorities Committee, and the Low Income Housing Tax Credit Review Committee.

Program sub-committees established by the CoC Committees review programmatic and fiscal data performance, recommend expectations and coordination, scan the environment for best practices and innovations, and evaluate the outcomes of the Continuum overall and projects funded under HUD. Sub-committees are designed to be representative of the funded service categories within the CoC.

The CoC Lead Agency provides technical, administrative, and meeting support to the CoC, CoC Board, and the Committees. The Collaborative Applicant is designated by the CoC to prepare and submit the CoC funding application to HUD each year. The Homeless Management Information System (HMIS) Lead is designated to provide oversight and implementation support to the Detroit CoC's HMIS. In 2015, the Detroit CoC established a Memorandum of Understanding with the Homeless Action Network of Detroit (HAND) to serve as the CoC Lead Agency, Collaborative Applicant, and HMIS Lead.

More details about the Detroit CoC including the Governance Charter are posted on HAND's website at https://www.handetroit.org/continuum-of-care.

Structure of the Detroit CoC:

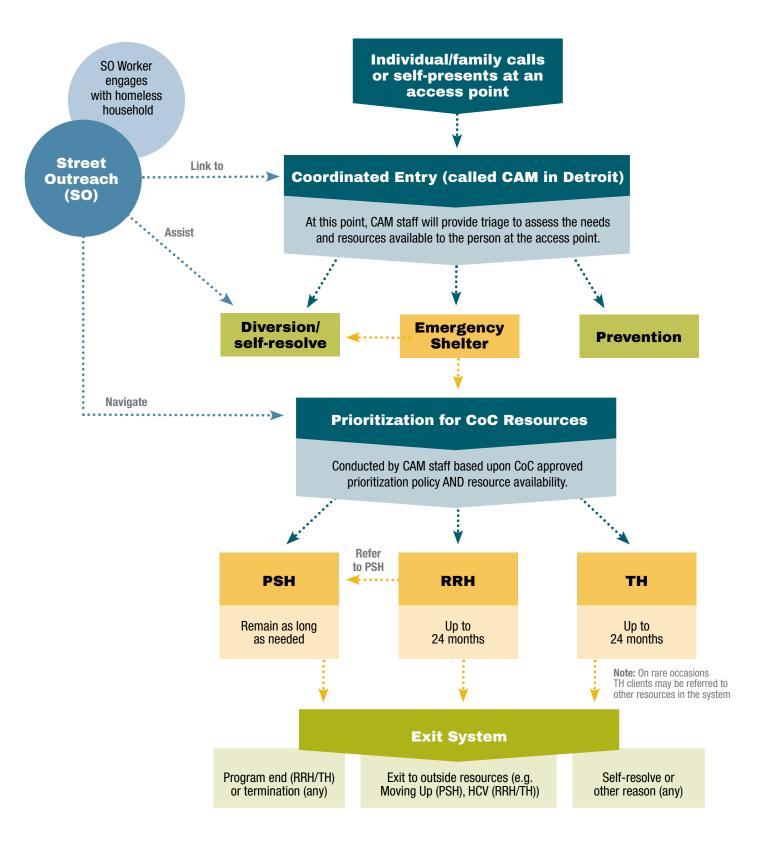


^{*}Designated Role (DR) is a role in which the CoC body identifies the entity that fulfills the roll

Who Makes up the Detroit CoC

CoC Genera				
Voting Membership General (Non-Voting) Membership		CoC Board		
Completed Voting Application and currently remain in good standing	Attended at least 1 General Membership Meeting in 2020	Elected or Appointed by CoC General Membership		
Alternatives for Girls (AFG) Capuchin Soup Kitchen Cass Community Social Services (CCSS) City of Detroit Create Opportunities to Succeed (COTS) Community & Home Supports (CHS) Community Housing Network (CHN) Community Social Services (CSS) Covenant House (CH) Detroit Housing Commission (DHC) Detroit Rescue Mission Ministries (DRMM) Detroit Wayne Integrated Health Network (DWIHN) Emerald Development Group Freedom House (FH) HAPI Housing Program Homeless Action Network of Detroit (HAND) Mariners Inn (MI) Neighborhood Legal Services MI (NLSM) Neighborhood Service Organization (NSO) NOAH Project Operation Get Down (OGD) Pope Francis Center Positive Images Red Maple Resources Southwest Counseling Solutions (SWCS or SWS) Travelers Aid Society of Metropolitan Detroit (TASMD) United Community Housing Coalition (UCHC) Wayne Metro Community Action Agency (WMCAA) Curtis Smith (Individual)	 The Ark Association Boys Hope Girls Hope of Detroit Capital Impact Partners Central City Integrated Health (CCIH) Champions of Tomorrow Community Health Awareness Group (C-HAG) Crossroads of MI Detroit Action Commonwealth (DAC) Detroit at Work Detroit Health Department (DHD) Detroit Victim Assistance Development Centers (DCI) Dream Detroit 313 Exodus Foundation Fort Street Open Door Integrity Housing Joyce Driver (Individual) JVS Human Services Kore Outreach McGregor Fund Methodist Children's Home MI Dept. of Health & Human Services (MDHHS) MI State Housing Development Authority (MSHDA) Motor City Mitten Mission (MCMM) Nurse-Family Partnership Salvation Army Senior Regional Collaborative St. John's Community Center VA Medical Center (VAMC) Veterans Administration (VA) Volunteers of America (VOAMI) Wayne State University 	 Alternatives for Girls (AFG) Capital Impact Partners Cass Community Social Services (CCSS) Central City Integrated Health (CCIH) City of Detroit Create Opportunities to Succeed (COTS) Deloris Cortez (Individual) Detroit City Council Detroit Housing Commission (DHC) Freedom House (FH) Homeless Action Network of Detroit (HAN) McGregor Fund Neighborhood Service Organization (NSO) NOAH Project Pope Francis Center Southwest Counseling Solutions (SWCS or SWS) United Community Housing Coalition (UC) VA Medical Center (VAMC) Wayne Metro Community Action Agency (WMCAA) Wayne State University 		

How Someone Flows Through the Detroit CoC







Mission: PROVIDING LEADERSHIP TO ADDRESS HOMELESSNESS

handetroit.org