

Knoxville's Plan to Address Homelessness

Successes, Challenges and Recommendations



CITY OF KNOXVILLE
MADELINE ROGERO, MAYOR

PREPARED BY THE OFFICE ON HOMELESSNESS (OOH)

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Introduction

In April 2014, Knoxville City Council voted to adopt *Knoxville’s Plan to Address Homelessness*. Centered on the principle that homelessness is not an acceptable circumstance for anyone in our community, this plan was a collaborative effort of the City government and community stakeholders.

Knoxville’s Plan was developed as a full, comprehensive effort and replaced a prior initiative that focused primarily on chronic homelessness. We were determined to learn from and build on that previous effort’s successes, address its challenges and broaden its scope. We agreed that preventing and ending homelessness would be the aspirational goal of this plan, and we chose to focus on building and improving our collaborative system to address the issue, rather than seeking to pin a definitive date on ending all homelessness or one specific component of it. We found that for a problem as complex as homelessness, announcing a specific date when we would officially end it actually tends to undermine the effort, rather than creating a clear, practical and motivating goal upon which to focus. The grandiosity of announcing that *we will end homelessness by a certain date* causes some stakeholders to immediately dismiss the effort as implausible. It also creates a binary measurement of outcomes that undervalues even significant, meaningful progress that isn’t a total end to homelessness. Finally, while it is good to focus efforts on specific populations as a part of a comprehensive effort, we chose not to direct our efforts toward any one single category to the exclusion of others, in order to avoid creating initiatives that could end up *robbing Peter to pay Paul*.

“Homelessness is not an acceptable circumstance for anyone in our community.”

At the same time, *Knoxville’s Plan to Address Homelessness* is not a vague call to just “do something about it.” The plan set a framework to drive our collaborative efforts, and set out goals for us to pursue. This report follows that framework and reviews our successes and continued challenges in pursuing those goals. As Mayor Madeline Rogero’s term of office draws to a close, we will offer this accounting of successes and challenges to make recommendations to the next Mayor and City Council for building on this ongoing work to prevent, reduce and end homelessness in Knoxville.



GOALS

Goals

The goals set out in *Knoxville's Plan to Address Homelessness* provide a comprehensive and focused framework.

The plan calls for us to work together to:

1. Provide leadership, collaboration and civic engagement;
2. Improve the crisis response system;
3. Create and maintain access to a variety of decent, appropriate, affordable permanent housing;
4. Increase economic opportunities; and
5. Improve health and stability.

These goals were established to be similar in structure to the federal plan to address homelessness at the time. They were also matched by the Tennessee state plan that was adopted afterward. We will discuss what each of these goals means, and review what we have achieved in each area, as well as what challenges remain.



I. PROVIDE LEADERSHIP, COLLABORATION & CIVIC ENGAGEMENT

I. Provide Leadership, Collaboration & Civic Engagement

The ideas in this section are central to the whole concept of having a plan to address homelessness in the first place. Knoxville is a community that exemplifies caring and compassion for others and that also demands accountability not only from government, but from each other. This plan uses those values as the driving force for this effort. When carried out in an *ad hoc* way, any charitable effort can end up pitching the values of compassion and accountability against each other. Homelessness can be a very visible community problem that often causes many individuals and community groups to offer an immediate response. The inherent complexity of the factors that contribute to homelessness, however, can limit the effectiveness of *ad hoc* initiatives to respond. In addition, that complexity, coupled with the sheer scope of the problem, can put many solutions beyond the individual ability of even large organizations that exist within our community. It is only through *intentional leadership, collaboration and civic engagement* that we can align our compassion with our desire for accountability, enabling us to achieve significantly more together than we can apart.



Mayor Madeline Rogero

The concept of *political will* is critical to the success of any community's plan to address homelessness. Of all the individuals and organizations that have stepped up, elected political leadership holds a unique and important position to act as a neutral convener of all the stakeholders to help them find shared goals and ways to collaborate, so everyone's efforts will complement each other and ultimately be more effective.

To implement this plan, **Mayor Madeline Rogero** created a permanent **Office on Homelessness (OOH)** as part of the City **Community Development Department**, which provides staffing and resources to support this initiative. Rogero also established the **Mayor's Roundtable on Homelessness**, which she has chaired at its quarterly meetings throughout her two terms in office. The Roundtable brings together the leadership of Knoxville's housing, shelter and social service organizations so that the decision makers from each can share information and communicate directly, collaborate and be accountable to one another and to the people we all serve. Partner agencies who have been part of the Roundtable have all expressed their appreciation for the Mayor's commitment to it and have emphasized its value and importance, and an essential means of furthering inter-agency collaboration and accountability.



Michael Dunthorn, Homeless Programs Coordinator for the Office on Homelessness

Michael Dunthorn, Homeless Programs Coordinator for the Office on Homelessness, serves as staff for the Roundtable, works with the **Office of Neighborhoods** and other City departments, and provides information on homelessness to **City Council** the media and the public. OOH also coordinates the community's annual multi-agency application to the **U.S. Department of Housing and Urban Development (HUD)** for *Continuum of Care (CoC)* funding.

The Mayor and City Council have consistently used information from this plan, the Office on Homelessness and data from the **Knoxville Homeless Management**



Information System (KnoxHMIS) to inform their decisions regarding the allocation of resources to pursue the plan's established goals for addressing homelessness.

The Mayor's Roundtable on Homelessness has served as an effective forum for coordinating efforts to implement the Plan's goals and also to review and discuss new challenges that have arisen over time. The Roundtable requested the **Knoxville-Knox County Coalition for the Homeless** to create a set of standards for outreach and case management and adopted those standards once developed. The Roundtable also supported the Homeless Coalition's efforts to create a new *Coordinated Entry System (CES)* to provide for a standardized, multi-agency intake, assessment and referral system for services and housing. The City allocated local funding to support the CES, and Roundtable members signed Memoranda of Understanding with the Mayor, committing their agencies to work with and implement the CES initiative.

Nationally, while some communities are reporting significant progress in reducing homelessness or certain populations among the homeless, other areas including major U.S. cities are witnessing considerable spikes not only in the total number of people homeless, but particularly in unsheltered populations. The data we have for Knoxville places us in between the extremes. While we face the same economic challenges including a shortage of affordable housing, we are remaining relatively steady with regard to the total numbers of people experiencing homelessness in our community.

The Knoxville-Knox County Homeless Coalition was formed in 1986. This organization meets monthly to bring together homeless shelter, housing, and service agency staff, and it serves as a forum for direct operational coordination. The Coalition's President represents this body on the Mayor's Roundtable.

The Coalition also serves as the designated *HUD Continuum of Care* organization, which holds the responsibility for HUD's CoC application process for federal funding. The Coalition delegates the direct coordination of that application process to the OOH. The Coalition also designates the CoC's official Homeless Management Information System (HMIS) provider, which is the **University of Tennessee Social Work Office on Research and Public Service (SWORPS)**. Operation of the Coordinated Entry System (CES) is a HUD mandate for CoCs, and SWORPS has also been designated to carry out that function.



Coordination of services

With so many independent agencies, organizations and individuals that have stepped forward, collaboration and coordination are necessary to be effective in meeting needs and to be accountable with charitable and taxpayer-funded resources.

Central to the entire effort is the **Knoxville Homeless Information System, or KnoxHMIS**, provided by **SWORPS**. KnoxHMIS is a secure, community-wide multi-agency database that collects information on shelters, services and housing related to homelessness in Knoxville, as well as on the individuals and families accessing those resources. HMIS is a function mandated by HUD for each community, but Knoxville makes full use of this resource to understand the extent and nature of homelessness here, to coordinate shelter, housing and services, and to report back out to the community on this subject.

KnoxHMIS carries out HUD's required annual *Point-in-Time* counts of individuals and families experiencing homelessness in Knoxville and Knox County, and also provides extensive, year-round reporting to HUD, which is compiled with data from across the country and reported to Congress. In addition to required reporting to HUD and individual agency use of HMIS data, KnoxHMIS provides full and detailed reporting on homelessness to the Knoxville Community. KnoxHMIS creates an extensive annual report and since the 1980s has also continued reporting on a series of biennial surveys of individuals and families experiencing homelessness.

At the request of the **Mayor's Roundtable on Homelessness**, and supported by City funding, KnoxHMIS developed a new, user-friendly online *dashboard report* on homelessness in Knoxville and Knox County. Updated quarterly, the dashboard report provides a highly transparent look into local homelessness data, which is easily accessible by the public and their elected representatives.

Although HUD-mandated HMIS databases are operated across the country, Knoxville's transparent, user-friendly online dashboard report was the first of its



kind, and has served as a national *Best Practice*. The OOH routinely receives compliments from other communities and states from across the country, along with requests for more information on how the dashboard was created. Inquiries have come in from 17 places and counting, from Juneau to Los Angeles, and Boston to Sarasota. KnoxHMIS readily shares this information in response to those requests and has also presented on the dashboard at national conferences.

Each January, communities across the country create a “snapshot” Point-in-Time count of people experiencing homelessness on one night. In Knoxville, that number dropped from 861 in 2014 to 800 in 2019. The number of unsheltered people reported for one night in January went from 81 in 2014 to 195 in 2019. That increase may be due to an actual increase, but is also at least partly

because of increased outreach efforts and a better ability to count those who may be out there. KnoxHMIS records the number of active clients receiving some type of assistance from a partner agency during the year. In the most recent KnoxHMIS Annual Report, that number of active clients for all of 2018 is reported at 9,183, which is down slightly from 9,232 reported for all of 2014.

HMIS data shows military veteran homelessness has decreased by 36% since 2014, largely due to Federal initiatives to end veteran homelessness. Veteran homelessness decreased by 3% from 2017 to 2018. More detailed data is available in the KnoxHMIS 2018 Annual Report.

In May 2018, **KnoxHMIS** created a new multi-agency *Coordinated Entry System (CES)* designed to provide a more uniform intake, assessment and referral system to assure that individuals and families are directed to services and housing placements that are optimal for their individual needs, and to assure that those who are the most vulnerable are given priority access to more intensive resources like permanent supportive housing.

Creating a CES is a requirement for agencies receiving Continuum of Care or Emergency Solutions Grant funding from HUD. We also determined locally that a properly implemented CES would serve our purposes as well, and with the support of the Mayor’s Roundtable on Homelessness, the Homeless Coalition created a workgroup to develop the concept to address both HUD requirements and local priorities. The City of Knoxville then provided funds to SWORPS to develop and implement this system.

Working with the **Coalition** and the **OOH, SWORPS** created the *Coordinated Housing Assessment and Match Plan*, or *CHAMP*, to carry out this strategy. Using a best-practice assessment tool, social workers interview individuals and families at intake in order to assess their needs, refer them to the best available

housing and resources and prioritize those who are the most vulnerable to receive placements first. To assure that intake and referrals are being properly carried out, CHAMP partner agencies meet regularly both to coordinate outreach efforts, and to coordinate referrals and placements for the most challenging cases. Agencies participating in CHAMP's regular outreach and case coordination meetings have noted their effectiveness in improving inter-agency communication, which is resulting in better service delivery for their clients.

CHAMP generates a single, unified waitlist across agencies for placement in Permanent Supportive Housing. Making the transition to the single waitlist has created some challenges, but partner agencies are committed to streamlining the placement process to assure supportive housing vacancies are filled as quickly as possible.

As of this writing, there have been 1,600 client intakes made through the CHAMP system, and 1,008 of those exited from the system. Of those, 21% were placed in housing through the CHAMP process, and 24% were able to find housing on their own. Some people may have moved on, and so 29% were "lost to follow-up," meaning outreach workers were unable to find them again.

After establishing the CHAMP process for all HUD-funded agencies, near-term next steps will include bringing non-HUD-funded agencies into the system, which will further simplify the intake experience for individuals and families community-wide. CHAMP has proven already to be highly effective at identifying the most vulnerable of those out on the streets, challenging Permanent Supportive Housing providers to find ways to meet the needs of this population.



Faith-Based Organizations

Community Faith-Based Organizations (FBOs) are at the heart of work to serve, shelter and house homeless individuals and families. Many of the partners at the Mayor's Roundtable on Homelessness are faith-based organizations, and it is not lost on us that our faith-based partners have been among the first to step forward to serve, shelter and house the homeless.

The Compassion Coalition, now a part of **Knoxville Leadership Foundation**, provides training and resources to area congregations, including its *Cost of Poverty Experience (COPE)*, which helps church members understand the life experiences of individuals and families who are living in poverty, and how those experiences provide challenges and contribute to how decisions are made by those individuals and families. This training provides understanding and context for those who would seek to provide help and assistance, and it is often a very eye-opening experience for those receiving the training. The Compassion Coalition also provides a call center that helps member congregations be more informed and better able to assist individuals and families who may come to them seeking assistance.

Over the past several years there has been an increasing awareness of the need



for more affordable housing, including more units of permanent supportive housing to house and serve homeless individuals and families who need case management and social services in order to succeed in permanent housing.

Faith-based advocacy organizations have taken up this issue, particularly the need for affordable housing and for Permanent Supportive Housing. It is critical for their voices to be heard during public processes required for the creation of these types of housing.

Two significant challenges noted in the plan to address homelessness are yet to be implemented. There are congregations throughout the community that have significant surplus real estate holdings that

could be put to use to develop additional affordable and permanent supportive housing. Development of these types of properties for that purpose would have the benefit of being created as a part of existing neighborhoods, with the support of congregations that are already there. Property being donated by congregations for this purpose also reduces the cost of development, making affordability of the housing possible.

A second remaining challenge is *ad hoc* charity provided in an uncoordinated manner to the most visible unsheltered homeless populations. Meals served and supplies handed out in a transactional “drive-by” manner are often at best a missed opportunity for a point of engagement that could otherwise be used to help unsheltered individuals and families connect with resources, which could actually help them end their homelessness. A good example of going from an *ad hoc* approach to a collaborative one is described later in the Assertive Outreach section of this report on page 18.

In some cases, a meal provided outdoors or under a bridge will divert individuals from receiving meals within the walls of partner agencies that are equipped to offer long-term help in addition to a sandwich or a bowl of soup. Blankets, clothes and other supplies are often handed out not only without coordinating with established service providers, but also without coordinating with the many other people who drop off more of the same things. The result is that much of it goes unused, and City Public Service teams must spend time and resources picking it up and hauling it away.

Compassion Coalition already does frontline training for member churches to educate them about what agencies are doing, which is a good start to addressing this concern. A larger coordinated communications effort to reach out to civic organizations, congregations and people of faith could help redirect much of their passion to help toward collaborative and coordinated efforts that can do much more to change people’s lives for the better.

II. IMPROVE THE CRISIS RESPONSE SYSTEM

II. Improve the Crisis Response System

People who are homeless or at immediate risk of becoming homeless are at a point of crisis. Depending on individual circumstances there are any number of immediate needs that must be met. If we want to change outcomes, however, crisis responses must quickly shift to helping individuals and families get to long-term solutions that will prevent or end homelessness. Improving the crisis response system must be about meeting immediate needs and then pivoting towards long-term solutions.

Preventing Homelessness

A program of the **Knoxville-Knox County Community Action Committee (CAC)**, *Homeward Bound* has continued its collaboration with **Knoxville's Community Development Corporation (KCDC)** to provide case management at four KCDC public housing high-rise apartment buildings. CAC case managers help residents who are identified as at-risk of being evicted to fix the problems that would otherwise result in eviction. A small number of residents in this situation are helped to move to other locations prior to being evicted, but most are able to correct the problem and remain in their homes. This initiative is operated with funding from the City of Knoxville. The success of this program in four KCDC locations highlights the feasibility of expanding it to additional public housing locations. Helping people in vulnerable situations retain their housing is a good investment that prevents homelessness in a cost-effective way.

Challenges seen from this program include the need for more Permanent Supportive Housing so that public housing residents who continue to struggle to stay housed could have a higher level of supportive services available to help them overcome that struggle. There is also a need for more housing with services and assistance to help seniors remain stably housed, as adults who are homeless are aging. In 2018, the peak age for all active clients recorded in KnoxHMIS was at 57 years old. Without continued intervention, an additional 916 persons served in 2018 may age into senior citizen status within the next five years. The data also shows that homelessness among senior citizens (persons age 62 or greater) has increased by 55% since 2014, and homelessness among seniors increased by 13% from 2017 to 2018.

Other HUD-funded homelessness prevention programs have proven more challenging to operate. HUD has established requirements that homelessness prevention resources not be expended on those who are not truly at-risk of losing their housing. As such, prevention services funded through the Tennessee Housing Development Agency's administration of the HUD Emergency Solutions Grant (ESG) have, in recent years, begun requiring that prospective clients must already have received a detainer warrant for their eviction. While this assures program clients are truly at risk of losing their housing, it ultimately puts the intervention too late in the process. It is very difficult to reverse an eviction. It is also much more difficult to help someone who has been evicted to then be accepted at another location. As a result, ESG resources used in Knoxville have been shifted to the "Rapid Rehousing" programs described later in this report.

Programs such as **The Salvation Army's Emergency Assistance Program** prevents homelessness by offering a safety net for low-income families and individuals through assistance with utilities, groceries, fuel, transportation, clothing, furniture and other household items. Their case manager also refers clients to other community resources.

Another point of intervention identified to prevent homelessness is energy efficiency in affordable housing. In many cases, housing with affordable rents and mortgages is older and less energy efficient. Higher utility costs put residents at risk for not only losing their housing for nonpayment of utility bills, but once homeless, they are also unable to move into a new place until the old utility bills are cleared.

Through the federal *Low-Income Home Energy Assistance Program (LIHEAP)* and other local charities, millions of dollars are spent locally helping pay utility bills for people stuck in these situations. The money is spent each year, but the problem only repeats itself until something is done to make those housing units more energy efficient.

This issue was raised with the City's **Office on Sustainability**, ultimately resulting in **Mayor Rogero** creating the *Smarter Cities Partnership* in 2013, bringing together over 20 community organizations seeking to improve the quality, comfort and affordability of inner-city homes through energy efficiency. Since 2013, the Smarter Cities Partnership has engaged dozens of community leaders and residents to improve energy efficiency and weatherization services in Knoxville.

The partnership created highly successful initiatives, including **Knoxville's Extreme Energy Makeover**, *Savings In the House* residents' energy efficiency education program, **The Knoxville Utilities Board's Round-It-Up** weatherization program, and local implementation of the **Tennessee Valley Authority's Home Uplift** program for residents with limited incomes. The Partnership's innovative

work and continued focus has helped secure over \$20 million in resources to support education and energy efficiency upgrades, all with a specific focus on helping low-income families take control of their utility bills. Through these programs, local partners have helped Knoxville residents in 1,700 homes improve comfort, quality and affordability through energy efficiency.



Making transitions out of institutional settings

People coming out of institutional settings like inpatient mental health treatment, hospitalization, or even the foster care system are often at a point that can make them very vulnerable to homelessness. The right interventions can prevent that from happening.

For individuals who are being discharged from inpatient programs, the **Helen Ross McNabb Center's** *Community Inpatient Liaison* helps with accessing *Inpatient Targeted Transitional Support (ITTS)* funding for individuals who are in need of housing and access to other community resources. Funded by the **Tennessee Department of Mental Health and Substance Abuse Services**, ITTS provides temporary (up to 6 months) of financial assistance for items such as rental and utility deposits, transportation, medication co-pay, etc. until SSI or other income and benefits can be restored, thereby enabling them to move into community settings when they are clinically ready.

Candidates for ITTS support are discharged from a number of local inpatient programs, including Helen Ross McNabb Center's Knox County *Crisis Stabilization Unit (CSU)* and **Cherokee Health Systems'** *Hamblen County CSU*, as well as from **Peninsula** and **Ridgeview** psychiatric hospitals. McNabb's Community Inpatient

Liaison provides side by side assistance, as needed, for clients to assist in linkage to community mental health outpatient providers and appointments.

For patients being discharged from the hospital, **Knox Area Rescue Ministries** has created a *Respite Care* program in partnership with Covenant Health, discussed in *Part V.* of this report.

While not an institutional setting, people seeking to escape domestic violence circumstances are also at a crisis point that makes them vulnerable to homelessness. Knoxville's **Family Justice Center (FJC)** provides a one-stop resource to assist victims

who are leaving domestic violence situations. With over four dozen community partners, the FJC serves as a clearinghouse to assist domestic violence victims with social services, security and housing placements. **The Salvation Army** and the **YWCA** are among those partners, and in 2019 both are seeking to use HUD *Continuum of Care* resources to expand housing options for DV victims. **The Salvation Army** is changing its existing *Transitional Housing/Rapid Rehousing Program* to specifically serve this population. The **YWCA** is seeking new funding through the CoC to create a new rapid rehousing program in Knoxville that would replicate a similar program they are already providing in the surrounding counties.

Youth aging out of the Foster Care system is another crucial point where the right interventions are needed to prevent homelessness. One new resource is **KCDC's**



Family Unification Program (FUP) which can provide housing choice vouchers for youth and young adults in this situation. This initiative is discussed further in the *Permanent Housing* section on page 29.

To further address this and related issues, a new **Youth Homelessness Council (YHC)** has been created as a part of the **Homeless Coalition**, bringing together specialized resources that serve youth and young adults who are homeless or at risk of becoming homeless. This group has in turn helped create a new **Youth Advisory Board (YAB)** made up of youth and young adults who are now or have previously experienced homelessness. The YAB provides valuable insight and advocacy for this population and is advising the YHC as it coordinates resources and creates plans to develop new services and housing appropriate to this population. In 2019, the Homeless Coalition applied for a HUD Youth Homelessness Demonstration Grant, which would provide technical assistance for the development of a comprehensive plan to address youth homelessness, along with funding to implement the plan. This application was not successful, but the group is already preparing for the next application round expected in 2020.



Assertive outreach

For most people in the community, the issue of homelessness primarily brings to mind people who are unsheltered, literally living on the streets, in camps and under bridges. This population in fact represents a minority of the total population at risk of or experiencing homelessness in Knoxville. KnoxHMIS reports that the unsheltered population was 21% of all active clients served in 2018. Nonetheless, the unsheltered population is often the most visible to the community at large, and includes people who are among the most vulnerable and facing the most challenges to gaining access to permanent housing.

While many individuals and families will ultimately seek out shelter, services and housing on their own, addressing the needs of this population also requires that we carry out active outreach to find every person and work to engage them with the resources that will help them obtain and maintain stable, permanent housing.

CAC Homeward Bound's REACH program has provided county-wide homeless outreach for decades. Outreach social workers build trust and rapport with people in camps and other locations in order to motivate even long-term chronically homeless individuals to make the changes necessary to come in from the outside. For many people in these situations, their hope for overcoming barriers to housing is very low. Just convincing them that it's possible is a barrier in itself to overcome. In a year,

CAC will engage almost 450 individuals, and are able to connect over a hundred to active case management. Eighty five percent of those who go through the program obtain permanent housing.

In 2013, **KARM** opened *NaNew's Courtyard*, which offers safe, welcoming outdoor shelter and refreshment, where **KARM** staff and volunteers work to discern needs and direct people to resources. The Courtyard was developed on the south end of **KARM's** building on Broadway to create an inviting first point of contact for people who would otherwise be literally out on the streets.

Since its opening, the Courtyard has also provided opportunities for better coordination with other community and faith-based organizations' outreach efforts. One example is the *Bridge Ministry* of the **Roman Catholic Diocese of Knoxville**, which initially started out serving food at various locations under the Interstate 40 viaduct. After facing a number of challenges with those *ad hoc* locations, the group's leader reached out to **KARM** and was welcomed to carry out their outreach in the Courtyard. This collaboration is an excellent example of how by working together, community members can show caring and compassion to people in need, and can also support and reinforce the work being done every day by organizations like **KARM**. Rather than potentially drawing people away, the Bridge Ministry draws them into *NaNew's Courtyard*, enhancing opportunities for people to learn about and engage with **KARM's** programming that can help them come in off the streets and end their homelessness.

In an effort to bring more people in and provide additional outreach to people who

remain unsheltered in the area, **KARM** has used the Courtyard to create and host *CityNights*, which is a time of worship, communion and community in the evenings on Wednesdays, Saturdays, and Sundays, with the Courtyard open to all. *CityNights* has seen success in bringing new people to **KARM**, especially young adults who are coming in from nearby campsites.

Even as partner agencies and ministries work to provide shelter and resources to draw people in off the streets, Knoxville continues to face challenges presented by unsheltered homelessness. Living in camps and places not meant for human habitation is unsafe and unhealthy, and it also creates safety, sanitation and environmental issues for the community at large. Balancing compassion, human dignity and the need to maintain the health and safety of all is a challenge that returns us to the principle that *homelessness is not be an acceptable circumstance for anyone in our community*.



In response to a significant unsheltered population gathering under Interstate 40 at Broadway, the **City of Knoxville** created a daytime *Safe Space* at that location to provide a place for people to be during the day if they are not yet engaged with a shelter or program to help them find their way off the streets. This resource is not intended to compete with the efforts of established agencies like **KARM**, **VMC** and the **Salvation Army**. The gates are opened each morning and closed at the end of the day by security guards who are present all day to maintain basic order and safety. The operating hours of the space were set specifically to assure that no one using this space would find that they had lingered too long and missed the opportunity to go across the street to **KARM** in time to stay in their overnight shelter.

Basic amenities are provided in the *Safe Space* to assure there is a welcoming public place that is off of the sidewalks and streets, but the goal is always for people to connect with resources that will help them move off the streets and end their homelessness. Picnic tables and benches are located in the space and portable toilets are available.

At the same time the *Safe Space* was developed, **VMC** created a new street outreach program to focus particularly on the unsheltered population in that area as well as downtown. The case managers working for this program have significant experience helping chronic homeless individuals obtain and successfully retain permanent housing. **VMC's** social workers hold well-attended regular "office hours" at the *Safe Space* in order to begin to build the necessary trust and rapport with potential clients. In its first year, this program has engaged with hundreds of people, connecting 129 people with a housing case management program, and helped 10 of them to go all the way from the streets to permanent housing.

Helen Ross McNabb Center's *Project for Assistance in Transition from Homelessness (PATH)* provides services to homeless individuals who have severe and persistent mental illnesses. *PATH* can provide direct street outreach, and also accepts walk-in clients. *PATH* also works through the *Coordinated Entry System's* regular meetings of partner agencies' outreach teams to take "warm hand-off" referrals from other outreach workers. This ensures that regardless of the first

point of contact, eligible individuals can receive mental health treatment and assistance in securing affordable housing, supportive income and other basic necessities.

The recent increased focus on street outreach has brought new awareness of the significant vulnerability of many people in the unsheltered population, and it further emphasizes the high-priority need for the development of more Permanent Supportive Housing in our community. Chronic street homelessness cannot be solved without an additional supply of permanent housing with appropriate supportive services.





Coordination with law enforcement

The Knoxville Police Department (KPD) has developed a number of initiatives to more effectively coordinate police work with this effort to address homelessness. The City of Knoxville and the **KPD** work to help support those who are homeless and not to criminalize their unfortunate situation. **KPD** policy aligns with the central concept that *homelessness is not an acceptable circumstance for anyone in our community*. While our community partners work to create more options for services, shelter and housing, we continue to be faced with addressing circumstances where people remain unsheltered.

When camps on public and private property become unsafe and unsanitary, it falls upon the Police and City **Public Service Department** to address the situation. **KPD** created a policy that maintains a respect for human dignity and provides advance notice to vacate the camp, along with information on available resources. Ideally, people will seek out shelter and services. At a minimum, the intent is for people to have time to collect their personal effects and belongings, so that items like identification and important documents are not lost, and that cleaning out a camp does not make it harder for people to access permanent housing. **KPD** has also appointed **Officer Thomas Clinton** to a full-time position to focus on addressing unsheltered homelessness. Clinton is *Crisis Intervention Team (CIT)* trained, interacts with and builds rapport and trust with this population, keeps track of camp locations and other related issues, and actively coordinates with the City **Public Service Department**, the **Office on Homelessness**, and with shelter, social service and housing agencies.

Clinton also coordinates with the **VMC** to administer a family reunification program. In his routine interactions, Clinton occasionally identifies individuals in camps who may have family at another location who are willing to take the person in, house them and assure they won't return to the streets. VMC social workers take referrals from Clinton and work to verify that their family is willing and prepared to take the individual in. With verification, the person is assisted with the cost of travel to return home. It is important to note that this is a limited program and is not used just to send people away. The program is designed specifically to end the person's homelessness through family reunification, which in these limited cases is a cost-effective alternative to options available to them here.

With the opening of the new daytime *Safe Space* on Broadway, **KPD** also has a place available to redirect people who might otherwise gather and block sidewalks and other public spaces.

Having enough police officers to work every day with the unsheltered population to assure public safety and help connect them with the right resources needed to help them end their homelessness remains a challenge.

As mentioned earlier, well-meaning, but *ad hoc* and ultimately transactional efforts at charity are an ongoing issue. Police and the Public Service Department must routinely clean up and dispose of donated clothing, blankets and other items that get wet, dirty and accumulate in piles, because the donors aren't coordinating with anyone to first find out what's actually needed. This wastes effort and resources that could be far more effective when used to actually help people connect with ongoing work to provide shelter, services and permanent housing.

Emergency Shelter

KARM continues to serve as the largest provider of emergency shelter services in Knoxville, with over 300 overnight beds for singles and 14 beds for up to four families, plus additional options for overflow when capacity is reached. To assure that their shelter resources not only meet an immediate need but serve as a starting point for residents to move forward, **KARM** has implemented a number of programmatic changes and enhancements in the last several years. **KARM** has continued to share shelter, program and client data with **KnoxHMIS**, and has also enhanced its use of internal data to make sure that people staying in shelter and eating meals at **KARM** are also engaging with the other available resources that will help them restore their lives and move on into permanent housing, employment and healthy community. If someone has been in shelter for a while without connecting to other resources, the data system will prompt **KARM**'s staff and volunteers to connect with that person and help them start taking that path. Ultimately, if someone is able to engage with those resources but chooses not to do so, their continued stay in shelter will be limited until they opt in to programs that will help them end their homelessness.

KARM operates several in-house programs that will help their guests rebuild their lives and find their path out of homelessness. Starting with *LaunchPoint*, this

four-week program helps guests develop a life plan and learn how to implement it. To date, LaunchPoint has helped more than 850 men and women move forward in their lives. **KARM** also operates three other in-house employment-related programs discussed later in this report.

Additionally, **KARM's Serenity** program offers a 12 -to-18 month residential program for women seeking a safe place to recover and enjoy a restored life of freedom from addiction, domestic violence and homelessness. The *Serenity* building was completely renovated and expanded in 2018, allowing this program to provide residential recovery services to 33 women at a time.

Family Promise of Knoxville continues to provide emergency shelter for intact families of all configurations. With capacity to serve up to 14 people in four households, Family Promise partners with area congregations through its **Interfaith Hospitality Network (IHN)** to meet the basic needs of children and parents who are homeless. Host organizations provide volunteers and open their facilities to provide shelter to families in need. For a week at a time, about once a quarter, each of these host sites converts classrooms into bedrooms for guests of the program. **Family Promise** operates a day center with childcare, laundry and shower facilities, assistance with housing and employment searches, life skills training, and intensive case management services.

The Salvation Army's Joy D. Baker Center serves women with or without children affected by domestic violence and also serves as a shelter for homeless women with children in a monitored, secure facility. In addition to providing housing and meals, our 24-hour staff serves as counselors and liaisons with both the court and the school systems and can assist with job placement or referrals to other agencies. In its *Downtown Center*, the **YWCA** provides 58 units of transitional housing for women in a safe environment, along with supportive services that promote self-sufficiency. At *Samaritan Place*, **Catholic Charities** provides 11 units of emergency shelter, 22 transitional housing units, and 16 permanent supportive housing units for seniors. **Helen Ross McNabb** Center manages four units of housing for runaway youth and six transitional housing units for homeless youth. McNabb also provides 24 transitional housing units for victims of domestic violence. **Steps House** operates 40 transitional housing units along Boggs Avenue to serve military veterans through the **U.S. Department of Veterans Affairs Grant Per Diem Program**.

Unsheltered homelessness continues to be a pressing community problem even with these emergency shelter and transitional housing resources. With support from the **City of Knoxville** and **Knox County**, **VMC** will be opening *The Foyer*, a new low-barrier shelter in fall 2019, in cooperation with **The Salvation Army**. This new shelter is being constructed in the Salvation Army's former thrift store on Broadway, next to the daytime *Safe Space*. **VMC** will operate the shelter, will provide 40-45 beds to vulnerable and hard-to-reach individuals experiencing homelessness and connect them to housing opportunities. The build-out of the facility will also include restrooms available during the daytime for people at the *Safe Space* next door.

The Knoxville community still faces significant challenges in providing sufficient

emergency shelter to serve specific populations. There is additional need for shelter for families, particularly shelter that can serve families of all configurations, such as two-parent households, single-father families and families with adolescent boys. Emergency shelter that can serve the elderly is an increasing need. Shelter that can accommodate individuals and families with pets has also been identified as a need. Overall, households experiencing homelessness as a family (i.e. households with a minor children and guardian) have decreased by 14% since 2014, but family homelessness increased by 12% from 2017 to 2018.

There is also an identified need for shelter and services specifically to serve homeless youth and young adults, including LGBT youth, who can be particularly vulnerable in a general population shelter. Young adults who are homeless and seeking a college education also have unique shelter and housing needs. Efforts to focus on and better understand youth homelessness have increased in recent years. In 2014, we began to track data on unaccompanied youth homelessness (i.e., persons ages 12 through 24 on their own without a parent or guardian). Prior to 2014 data on unaccompanied youth homelessness was not collected. The fact that the CoC partners are all working collaboratively on this issue and collecting data is a success. The data shows youth homelessness has increased by 28% since 2014, largely due to improved record keeping. Unaccompanied youth homelessness increased by 9% from 2017 to 2018. Overall, unaccompanied youth homelessness is likely under-reported because many youth do not identify as homeless and specific services for youth homelessness are minimal.



A significant challenge that is devastating people in Knoxville and across the country is the opiate crisis. Even people with family, social networks and financial resources often lose all of that when they become addicted, ending up on the streets. People who start with less can end up in the same situation even more quickly. The effects of this profound type of addiction can then cause people on the streets to be more resistant to accepting help with shelter, services and housing assistance. Additional resources dedicated to outreach and treatment for addictions are needed to address this challenging cause of homelessness.

All4Knox is a new joint effort of the Mayors of **Knox County** and the **City of Knoxville**, with facilitation and coordination support from **Metro Drug Coalition**, the **Knox County District Attorney General's Office** and **Knox County Health Department**. The initiative is working to bring together governments, businesses,

nonprofit organizations, faith-based communities and many others in a coordinated fashion to address the substance misuse epidemic.

III. CREATE AND MAINTAIN
ACCESS TO A VARIETY OF
DECENT, APPROPRIATE,
AFFORDABLE PERMANENT
HOUSING

III. Create and Maintain Access to a Variety of Decent, Appropriate, Affordable Permanent Housing

Affordable housing is the obvious foundation to any effort to prevent, reduce and end homelessness. Although the list of contributing causes of homelessness is extensive, lack of permanent housing is the defining factor for the problem, and affordability is the central issue. There continues to be a nationwide shortage of affordable housing units, and that is true of Knoxville as well. It has also been proven true here and elsewhere that the stability of having a permanent place to call home is fundamental to solving those myriad other factors that cause homelessness.

An enormous amount of effort and resources has been committed to reversing the affordable housing shortage in Knoxville.

Since **Mayor Rogero** took office in December of 2011, the **City of Knoxville** and its housing partners have together invested more than \$236 million in the construction and rehabilitation of affordable housing. This includes \$47.5 million invested through the City's housing programs, which have leveraged an additional \$189 million from other public and private sources. These investments have resulted in the creation or rehabilitation of 4,503 units of affordable housing, with 3,787 completed and 715 additional units in the pipeline as of September 1, 2019. These numbers represent significant progress towards closing the affordable housing gap, but there is still much more to do to meet the need.

Maintain and Improve the Existing Stock of Affordable Housing

The City of Knoxville has carried out programs such as its *Rental Rehabilitation* and *Owner-Occupied Rehabilitation* programs, which help incentivize the stabilization and improvement of existing affordable housing.

Through its targeted weatherization strategies, the **City of Knoxville's Smarter Cities Partnership** discussed earlier in this report is another successful effort to maintain the existing stock of affordable housing.

KCDC is the redevelopment and public housing authority for the **City of Knoxville** and **Knox County**. Currently **KCDC's** affordable housing portfolio includes 3,525 low-income units being managed under the *Low-Income Public Housing and Project-Based Rental Assistance Programs* and 82 *Mod-Rehab* units. **KCDC** currently has a portfolio of 4,026 *Housing Choice Vouchers*. Of those, 214 are currently being used as *Project-Based Vouchers (PBVs)*, which link the voucher subsidy to specific affordable housing units, many of which are used for Permanent Supportive Housing. Another 155 vouchers are being used as *Homeownership Vouchers*, where the recipient uses the voucher to pay on a mortgage, switching their housing from rental to permanent homeownership. There are an additional 355 vouchers that are in the process of becoming PBVs for housing that is currently being built or is under development. There are 3,173 vouchers currently in use for scattered-site leases across the community, leaving 169 currently available for use with new tenants for new leases. **KCDC** is in its third year of converting its low-income public housing properties to

HUD's Project-based *Rental Assistance/Rental Assistance Demonstration (PBRA/RAD)* program. This program was designed to assist in addressing the capital needs of public housing by providing **KCDC** with access to private sources of capital to repair and preserve its affordable housing assets. *PBRA/RAD* allows for mixed financing options via loans through *Low Income Housing Tax Credits*, **KCDC**, **City of Knoxville** and private lenders in conjunction with *capital funds, operating subsidy* and *Replacement Housing Factor funds*.

These improvements are completed or underway in 17 phases at multiple public housing locations, with improvements at an additional four locations planned in the next one to three years.

Local partners are carrying out a number of rapid rehousing programs designed to help individuals and families stop and reverse the downward spiral of homelessness by quickly accessing resources and permanent housing placements.

Funded primarily through *HUD Continuum of Care* and *Emergency Solutions Grant* programs, **CAC** and **VMC** have successfully carried out rapid rehousing programs to quickly serve families who have recently become homeless. **The Salvation Army** is implementing a new *Transitional Housing/Rapid Rehousing Program* that provides a short-term place to stay while working to quickly make a permanent housing placement. Starting in 2020, this program will focus on serving victims of domestic violence.

Since 2016, we have been able to determine overall time-to-housing for persons who qualify for rapid re-housing programs. In 2018, the time to housing improved by 28 days, down to 52 days when compared to 80 days in 2017. Availability of affordable housing continues to be a significant challenge in further reducing this time-to-housing measure.

Starting in 2018, **The Helen Ross McNabb Center** partnered with the **University of Tennessee College of Social Work** and the **Substance Abuse and Mental Health Services Administration (SAMHSA)** on a *Cooperative Agreements to Benefit Homeless Individuals (CABHI)* grant to provide services to homeless families in Knox and surrounding counties. Through this grant, they are serving about 90 families over a three-year period and focusing on ensuring that the families have access to permanent housing, mainstream benefits, and behavioral health and recovery services. The program is community-based and follows the Integrated Treatment for Co-occurring Disorders model (a **SAMHSA** evidence-based practice). Maximizing access to existing affordable housing is critical so that every possible affordable



housing unit can be matched with someone who needs it. Since 2015, the **Homeless Coalition**, in partnership with the **City of Knoxville**, service providers and other organizations, has held an annual *Landlord Summit*. This one-day conference provides landlords with valuable information on Landlord/Tenant law, the Section 8 voucher program, Codes Enforcement, weatherization and lead paint programs, and social services that are available to help their tenants stay stably housed. The Summit has been successful at bringing in more property owners each year, creating new opportunities to help landlords make affordable housing available.

A newly identified solution to address the affordable housing shortage may be the creation of a cross-agency system of “housing navigators,” to better assist individuals and families to gain access to scattered-site affordable housing options throughout the community. For those who primarily need to find affordable housing but don’t require intensive ongoing social services, the limited supply of affordable housing units still creates a barrier to successful placement. Even with a Section 8 Housing Choice voucher in hand, many individuals and families are unable to find an appropriate affordable apartment or home. Partner agencies struggle to provide assistance with housing searches on top of other duties as part of the social work staff’s caseload. Faced with similar circumstances, an emerging model in other communities is demonstrating that real-estate-focused housing navigators are successfully helping people find a larger number of additional affordable housing units within the existing housing market. Work is already underway to determine how best to implement this best-practice model in Knoxville.

Incentivize the development of new affordable housing

The **City of Knoxville** created the *Affordable Rental Housing Development Fund* in 2017 and has committed \$8 million through the current year to this program designed to help fill funding gaps and to incentivize the development of new affordable rental housing units. These funds have resulted in over 980 new affordable housing units now in various stages of development.

The **YWCA** applied in 2019 for new HUD funding to provide 20 units of scattered-site rapid rehousing for domestic violence victims. **CAC** also applied for HUD funding to support 25 units of rapid rehousing for seniors, and **VMC** applied for 25 rapid rehousing units for single individuals. These resources will help provide support with social services and help people moving into a new permanent home, but the continued tight affordable housing market still creates significant challenges for finding available housing units in which to make these placements.

At *Samaritan Place*, **Catholic Charities** provides emergency shelter, transitional housing and permanent supportive housing for seniors, all at one location. In recent years, they doubled the PSH beds from eight to 16 apartments. As the baby boomer population ages, the need for more supportive housing for seniors continues to become more acute.

With support from the **City of Knoxville**, **Knox County**, **HUD** and others, **Helen**

Ross McNabb Center has, over the last several years, created 29 new Permanent Supportive Housing apartments at three locations to house military veterans who were chronically homeless. Homelessness is not an acceptable circumstance for anyone in our community, especially not for those who have served in uniform. These apartments are an important part of meeting the debt we owe those who have served this country.

For many affordable housing and Permanent Supportive Housing developments, **KCDC's Project Based Vouchers** have proven to be an invaluable tool for success. PBVs are permanently attached to housing units in the development, creating needed financial stability for the housing provider and assuring the availability of affordable housing units for those who are most in need of them.

Throughout the last eight years, KCDC has sought out and been awarded new HUD-VASH housing choice vouchers, bringing the current total in Knoxville to 150. For this program, homeless military veterans and their families can receive a housing choice voucher that is coupled with case management support from the **U.S. Department of Veterans Affairs**.

“Our experience here has consistently demonstrated that Permanent Supportive Housing not only serves its residents well, but it also becomes a positive asset for the neighborhoods where it is built.”

At the end of 2018, **KCDC** was awarded 55 housing choice vouchers through the *Family Unification Program*, or *FUP*. This program serves two populations affected by the foster care system. For some families with children who have been put into foster care, appropriate, decent affordable housing is the primary barrier to reuniting the children with their parents. These vouchers can be used to overcome that barrier. In other cases, children age out of the foster care system, and are ill equipped to afford their own place to live. The vouchers can subsidize appropriate housing for up to three years for young adults ages 18-24 who are homeless or at risk to be homeless. In addition to housing assistance, young adults can receive other support services during the transition, such as money management skills, job preparation, educational counseling, proper nutrition and meal preparation. **KCDC** has worked closely with the **Tennessee Department of Children's Services**, **CAC Homeward Bound**, the **Coordinated Entry System** and other partners to get the vouchers issued to families and young adults.

In early 2019, **Volunteer Ministry Center** approached the **City of Knoxville** with a proposal to develop new Permanent Supportive Housing on three adjoining lots along Fifth Avenue, next to **Positively Living's Parkridge Harbor Apartments (PHA)**. PHA is an existing Permanent Supportive Housing development, that, with support from the City's *Community Development Block Grant* program, added five new PSH units within its building's footprint three years ago, bringing the total units to 29. **The City of Knoxville** owns the three parcels next door and is currently working through the public process to transfer them to **VMC** for development into 24 new units of Permanent Supportive Housing.

Since 2015, we have been recording the housing “exit status” for individuals and families in **KnoxHMIS**. Overall, more than half of housing outcomes are for positive destinations, including: owning, renting, moving into permanent supportive housing

for formerly homeless, or staying with a family member or friend. The data shows that positive housing placements have improved by an average of 65% (52% in 2015; 77% in 2016; 68% in 2017; 64% in 2018).

As stated throughout this report, there is a significant need for the development of additional Permanent Supportive Housing in Knoxville. **VMC's Minvilla Manor, KLF's Flenniken Landing, Positively Living's Parkridge Harbor, Helen Ross McNabb Center's** new PSH for military veterans, as well as others, have all demonstrated that this type of housing works incredibly well, helping people who were previously chronically homeless to become stably housed, restore their lives, and become a healthy part of the neighborhoods and communities they call home.

Through the *CHAMP* process, we are creating a single wait list for people who qualify for PSH, which demonstrates that the need consistently outstrips currently available PSH units. This coordination of outreach efforts is further identifying more people among the unsheltered population who will likely qualify for PSH.

PSH houses people who had been chronically homeless on the streets of our community and consistently demonstrates better than 90% retention rates for residents a year after placement. This model is an effective Best Practice, proven over and over again here and across the country. It is nonetheless difficult to create the financing to develop this type of housing, and it can be a significant challenge to work through the processes necessary to create this type of housing in new locations. Our experience here has consistently demonstrated that PSH not only serves its residents well, but it also becomes a positive asset for the neighborhoods where it is built.

IV. INCREASE ECONOMIC OPPORTUNITIES

IV. Increase Economic Opportunities

Loss of income and other economic resources is a major contributing factor to homelessness. Depending on each individual or family's circumstances, it is this plan's goal to help them gain access to employment income or to other income benefits for which they may be eligible.

Targeted Job Training

KARM created its new *Berea* program, which is a nine-to-12-month program using a Work-Learn-Serve-Live model. Students commit to 200 hours of working, 200 hours of learning, 36 hours of community service and living in healthy community together. The *Berea* program graduated its first class of 26 in the Spring 2019, and is continuing to build on that success.

KARM also provides two additional in-house job training programs. *Abundant Life Kitchen* is a 20-week culinary training program providing guests with an opportunity to train for employment in the growing food service industry. *Clean Start* is a janitorial certification program that prepares students for employment in the janitorial industry.

Another means to increasing access to employment is to develop connections and opportunities with employers who are amenable to hiring people who are homeless or at risk of homelessness. Service providers coordinate job fairs, such as a *Youth Force Job and Resource Fair* and a *Veteran's Resource and Job Fair* during 2019.

Access to Mainstream Job Training

Individuals seeking employment can access the local American Job Center, provided by the **Tennessee Department of Labor and Workforce Development**. The Center offers resource rooms, which include computers, internet, telephones and fax machines. Also, job seekers can attend on-site recruiting events, workshops on resumé writing, interviewing skills and job search activities, or pursue more intensive training or certifications for occupations that are in demand. Service providers can

also assist with clothing and basic tools needed for employment.

CAC Homeward Bound recently added a staff position to focus on employability for the families and individuals coming through their outreach and rapid rehousing programs. Multiple service providers also refer clients to the **Knoxville Area Urban League**, which offers job readiness and employment programs so individuals can identify, prepare for, attain and maintain employment and self-sufficiency. Their programs are geared toward the unemployed and underemployed. They also work with employers to identify employment opportunities, as well as identify



and pre-screen employees. The Urban League also offers programming and activities like their RE-ENTRY job fair to help people who have past criminal records to find work, earn a living and reintegrate into the community.

KnoxWorx, part of the **Knoxville Leadership Foundation**, is a workforce development program to prepare teens and adults for their careers, provides encouragement, mentoring, job search strategies and networking opportunities that enable members of the Knoxville community to achieve their full potential. While not specifically a program created for individuals experiencing homelessness, *KnoxWorx* has nonetheless been a life-changing resource. This is particularly true for some youth and young adults who came to the program without a home and graduated with a chance at a much brighter future.

Connecting people experiencing homelessness with good jobs at living wages continues to be a significant challenge. The trope that the homeless just need to “get a job” largely represents a fundamental misunderstanding of the complexity of the problem. The same struggles with physical and mental health as well as addictions that cause homelessness are also significant barriers to the types of employment opportunities that will provide sufficient income to pay for housing. For some, those barriers can be overcome. For others, disabling conditions that caused homelessness in the first place become barriers to moving off the streets.

Access to transportation is also a significant challenge that can restrict employment options for people with extremely limited means. Public transportation is the most affordable way to get to work, but many potential employers for this population are in industrial and commercial areas that are not on or near a bus line.

Access to Mainstream Benefits

For those individuals and families who have significant physical and behavioral health-related disabilities, accessing benefits for which they are eligible is critical to being able to maintain stability in a permanent housing placement.

The Helen Ross McNabb Center is Knoxville’s key provider of the *Social Security Income/Social Security Disability Income Outreach, Access, and Recovery*, or *SOAR*, program. *SOAR* is designed to aid homeless clients with severe and persistent mental illnesses in applying for and receiving *SSI/SSDI* utilizing the *SOAR* process. The *SOAR* process is a highly effective process of applying for disability that is designed to target the specific needs of the mentally ill population. The McNabb Center has staff who assist their own clients with the *SSI/SSDI* application process, can take some referrals from other agencies and can assist staff from other agencies to become trained in the process themselves. For example, McNabb has trained **CAC** staff so they can deliver this resource to **CAC**’s clients. Having trained staff who can provide this service requires a significant commitment on the part of the social service agency, but the high success rate in helping eligible clients receive *SSDI* can pay off significantly as a resource to support those clients in permanent housing placements.

V. IMPROVE HEALTH AND STABILITY

V. Improve Health & Stability

Integrate Primary and Behavioral Healthcare

Cherokee Health Systems' 5th Avenue Clinic provides direct, integrated primary care, preventive care, behavioral health care and case management services to people experiencing homelessness. At the 5th Avenue Clinic, patients can access a broad range of services within an integrated care delivery model. The primary/behavioral health care team consists of nursing staff, primary care providers, a behavioral health consultant, patient navigator, medical care manager, a behavioral therapist and case manager. Outreach is provided to patients and potential patients through collaboration with multiple partner agencies.

Advance health and housing stability for specific populations, and address needs of those who have frequent contact with hospitals and healthcare systems

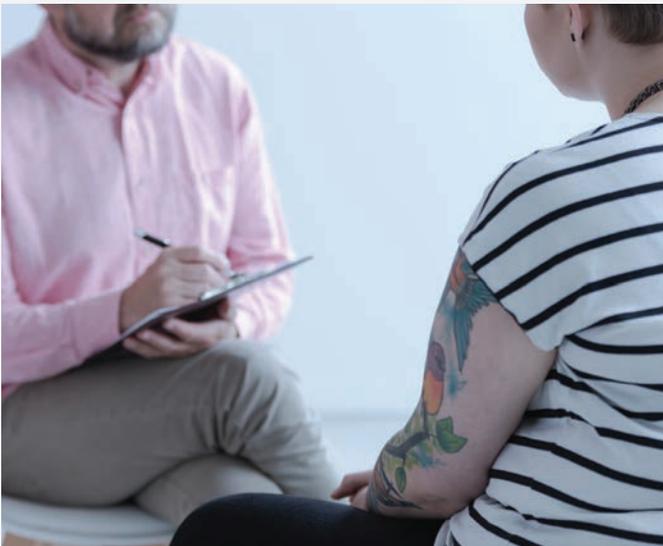
For patients who are homeless, discharge from an inpatient hospital setting creates a difficult challenge. Normally, patients who no longer need hospitalization are discharged to go home where they can continue to recuperate. Discharging someone directly to the streets or to overnight shelter from a hospitalization creates an unhealthy situation for the patient, and keeping a person longer for recuperation is an expensive prospect for the hospital.

In 2019, **KARM** established its *Respite Care* program in response to this difficult challenge. As the primary overnight shelter, **KARM** has often been the recipient of patients discharged from the hospital, but who were not well enough to stay in the shelter. To create a less expensive option with better outcomes for patients, **KARM** partnered with **Covenant HomeCare**. In this new setting, the program provides eight beds in a safe space at **KARM** for homeless individuals to continue healing after a hospital stay.

The Knox County Health Department, Positively Living, the Next Step

Initiative, the **KPD** and others are working together to provide outreach to offer screenings, vaccinations and needle exchanges to counter the transmission of hepatitis A, distribute naloxone opiate overdose "reversal" kits, and to provide related information and resources.

In 2018, **Helen Ross McNabb Center** opened the *Behavioral Health Urgent Care Center (BHUCC)* in partnership with the **State of Tennessee, Knox County** and the **City of Knoxville**. Its first year of operation yielded very positive results, including nearly 500 individuals with mental illness and substance use disorders being diverted from the *Knox County*



Detention Facility. Of those, 74% were uninsured, 59% were homeless, and 79% had a mental health diagnosis. The recidivism rate for re-offending was nearly half of the expected rate, and the connection to aftercare or ongoing treatment was 65%. In the second year of operation, the State's funding was eliminated, but the City and County increased their support to partly fill the gap. As a result, BHUCC is adapting its approach to assure continued effectiveness. Length of on-site stays for patients has been reduced to under 24 hours, but more community-based services are available to program participants through a new *Forensic Assertive Community Treatment (FACT) Program*. Criminal justice diversion continues through this program, with police drop-offs continuing at the same level. So far, around 50 people have engaged in the new *FACT* program, and they are also receiving the support of a dedicated **SOAR** case manager, who helps eligible uninsured clients successfully enroll in *SSI/SSDI* and *TennCare* benefits.

The McNabb Center was also recently awarded a grant from the State of Tennessee to provide mental health and addiction treatment services for military veterans. Through this program, McNabb will be able to serve veterans who cannot access VA services due to issues with their discharge status. This fills an important gap because in many cases the same behavioral health issues were the cause of their other-than-honorable discharge that disqualified them from accessing VA resources.

The community continues to face challenges meeting the healthcare needs of those in poverty. Providing healthcare for those who are uninsured remains a particular challenge, as the Tennessee remains a state that has elected not to increase *TennCare* coverage under the *Affordable Care Act's Medicaid expansion* option. The opiate addiction crisis, as discussed above, is a pressing challenge that exists at the nexus of physical health, behavioral health and homelessness.

CONCLUSION

“We know that solving homelessness requires having enough affordable housing. We know that permanent supportive housing works and that we must create more of it.”

Conclusion

As described in the preceding pages, a considerable amount has been achieved in our community’s collaborative effort to address one of society’s most difficult problems. It is important to realize that much is being accomplished, many people are receiving the help they need and many lives are being changed for the better because of the hard work that is done every day. Because the visible part of this problem is so distressing to see, it is easy not to realize what is being accomplished, even as we face continued challenges. We owe a debt of gratitude to the people who do this work every day, offering to people at a low point in their lives a ray of hope and a path to a better future.

We have learned here that making progress takes both leadership and a willingness to collaborate and be accountable in pursuit of shared goals. We know that solving homelessness involves not just meeting the immediate needs of people in crisis, but also quickly shifting our focus toward achieving the outcomes of permanent housing and reconnecting with a healthy community. We know that solving homelessness requires having enough affordable housing. We know permanent supportive housing works, and that we must create more of it. We know that for people to stay housed, they need to be able to work to the extent they are able and to access benefits for which their circumstances may make them eligible. We know that access to appropriate healthcare is a need for all of us, including those who struggle with physical challenges, mental illness and addictions.

Finally, we know that everything we do to address this issue returns us to the simple idea that *homelessness is not an acceptable circumstance for anyone in our community*. So much has been accomplished to achieve the goals laid out in this plan, but there remains a lot more to do.

Building on the accomplishments achieved so far, we are ready to take on the next challenges to move us toward our aspirational goal of preventing, reducing and ending homelessness in Knoxville.

“It is important to realize that much is being accomplished, many people are receiving the help they need and many lives are being changed for the better because of the hard work that is done every day.”

“The City of Knoxville has learned that making progress takes both leadership and a willingness to collaborate and be accountable in pursuit of shared goals.”



CITY OF KNOXVILLE
MADELINE ROGERO, MAYOR

Office on Homelessness
Michael Dunthorn, Homeless Programs Coordinator
Community Development Department
Phone 865-215-3103 • MDunthorn@knoxvilletn.gov

400 Main Street • Knoxville, TN 37902
knoxvilletn.gov