



# Unsheltered Homelessness Response Strategy

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## Executive Summary

Unsheltered homelessness in Raleigh and Wake County has doubled since 2020, and more than 80 encampments are currently identified across the city.<sup>1</sup> This trend has imposed growing costs on public systems without delivering lasting solutions. In response, Sagrado Strategies leveraged the expertise of the 53-member Steering Committee to develop the Unsheltered Homelessness Response Strategy, with the City of Raleigh supporting as a facilitation partner. This practical, data-informed framework lays the groundwork for a fiscally responsible and permanent solution to homelessness.

The strategy presented in this plan enables the community to move from costly, reactive encampment clearings and homelessness management practices toward proactive, results-driven efforts that create permanent solutions. It provides tools and protocols to coordinate partners, align resources, and speed up housing placements at the site level, complementing and strengthening existing plans and initiatives across organizations and jurisdictions.

Developed with the goal of aligning efforts across the City of Raleigh, Wake County, and the Continuum of Care (CoC), this strategy promotes a shared framework and unifies the region's response to unsheltered homelessness. By design, it strengthens the capacity of the CoC to lead implementation across systems, ensuring sustainability and long-term accountability.

Key components of the strategy include:

- A **Resource Gap Analysis** showing the timeline and per person cost (~\$27,000 per year) needed to reach and sustain functional zero (a benchmark indicating that homelessness is rare, brief, and one-time). This is significantly less than the up to ~\$96,000 per person per year cost of inaction.
- A **Site Assessment Tool** and **Encampment Prioritization Tool** to guide transparent decision-making and allocate resources effectively.
- A **Housing Surge Approach** to decommission encampments by moving all residents into housing within a six- to eight-week timeframe.
- Integrated use of **Housing-Focused Intensive Case Management** and **Continuous Quality Improvement (CQI)** to ensure long-term outcomes and system accountability.

The strategy also addresses visible homelessness in downtown Raleigh and other high-traffic areas that do not present as traditional encampments. Drawing from successful models such as Dallas's *Street to Home* initiative, this approach pairs dedicated outreach with accelerated housing placements for individuals experiencing chronic homelessness in downtown spaces such as sidewalks, bus stops, and business corridors.<sup>2</sup> The goal is to reduce homelessness through housing—not displacement—while restoring shared spaces with dignity and evidence-based care.

While current resources are insufficient to reach functional zero, this plan identifies the additional investments required and recommends how existing assets can be realigned to achieve greater impact. It presents a roadmap to maximize community resources, improve outcomes, and reduce reliance on

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<sup>1</sup> The number of people experiencing unsheltered homelessness is estimated each year through the Point-in-Time (PIT) count. It is important to note that this count is widely considered to be an undercount. There have been methodology shifts in recent years in the community that have aimed to create a more accurate count, but it is still an imperfect measure.

<sup>2</sup> Candace Sweat (2025). Dallas homeless reduction plan continues to show progress. NBC 5 Dallas-Fort Worth. Available at <https://www.nbcdfw.com/news/local/dallas-homeless-reduction-plan/3847426/>.



emergency responses, offering a more effective and fiscally responsible alternative to encampment sweeps. The Unsheltered Homelessness Response pilot has already shown this approach works in practice.

In developing this plan, Sagrado Strategies convened partners, providers, and collaborators, mobilized expertise, leveraged resources, and coordinated strategies across jurisdictions. Designed to align with the City and County's Affordable Housing Plans, the County's Unsheltered Facility Study, and the CoC's forthcoming Strategic Plan, this framework strengthens the foundation for a unified, community-wide response to homelessness.

For the strategy to succeed, implementation will be led by the CoC and supported by strong coordination, sustained funding, and consistent leadership.

**The path forward is clear: through shared ownership and smarter investments, our community can reduce unsheltered homelessness and improve housing stability for all.**



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## Introduction

In 2024, Sagrado Strategies undertook this initiative to design a strategic response to rising unsheltered homelessness. To develop this strategy, Sagrado leveraged the expertise of a 53-member Steering Committee, with the City of Raleigh serving as a facilitation partner. The goal was to develop a results-oriented plan that replaces ineffective and costly encampment clearings with an approach that delivers permanent housing solutions, and to identify the resources needed to enact that plan. This strategy is grounded in fiscal responsibility, systems alignment, and measurable impact. It was developed in close coordination with multiple public agencies, outreach providers, and individuals with lived experience. Rather than duplicating existing efforts, it consolidates resources and introduces consistent tools and protocols to improve operational performance community-wide.

The Background section of the report details the general need for this strategy, as well as the specific conditions in Raleigh and Wake County that must be understood to successfully respond to unsheltered homelessness. It details the importance of this work, how members of the community are involved, the nature of unsheltered homelessness in Raleigh, strengths and challenges of the current homelessness response system, and the costs associated with addressing existing gaps. These findings informed the development of a robust and actionable response strategy.

The Plan section details the partnerships and coordination on which implementation will depend. It outlines the foundational work that must be done before decommissioning an encampment, followed by a methodology, timeline, and additional resources needed for successful implementation. The foundational work is the ongoing resource cultivation and dedication that will make each encampment decommissioning successful. Before selecting an encampment to be decommissioned using the Housing Surge Approach, necessary resources must be brought to the table including outreach supplies, dedicated staff for housing navigation and case management, low-barrier housing units, and flexible financial resources to facilitate housing access (e.g., “flex funds” to pay for application fees, security deposits, etc.). The process to select an encampment for decommissioning relies on the tools outlined in this section and attached in the appendix.

The Implementation Process section outlines the operational strategy and further details the importance of and opportunities for embedding people with lived experience of homelessness into the process to maximize success. Also included are a series of success measures and an overview of how Continuous Quality Improvement (CQI) should be employed to ensure the plan evolves and responds to changing efforts and conditions.

Attached as appendices are an action plan for the first year of implementation, information on the planning process, the Site Assessment Tool, the Encampment Prioritization Tool, the Continuous Quality Improvement Framework, the Housing Needs Assessment Triage Tool, and a glossary of key terms.



## Background

Unsheltered homelessness in Raleigh has reached a critical point. Since 2020, the number of people living outside has more than doubled, with over 80 encampments documented across the city. Many of these encampments are located on public land and in hazardous conditions. While these trends mirror national patterns, they also point to the need for a coordinated local response strategy focused on housing-centered solutions.

The causes and solutions to homelessness are known. At its core, homelessness is a housing problem. As researchers Gregg Colburn and Clayton Page Aldern show, the most significant driver of homelessness is not individual behavior, but structural market failures—specifically, lack of affordable housing.<sup>3</sup> National data from the U.S. Government Accountability Office show that every \$100 increase in median rent is associated with a 9% rise in homelessness.<sup>4</sup> Raleigh is no exception. Like many high-cost cities, we suffer from limited housing supply and rising rents. These factors drive people into homelessness, regardless of personal circumstance.

Despite this, many responses focus on temporary, reactive, and more costly measures, such as sanctioned encampments, shelters, and encampment clearings. These efforts do not solve homelessness, and they come at a high public cost. Nationally, cities spend \$3.5 million to \$8.5 million annually on removing encampments, without actually reducing homelessness.<sup>5</sup> Locally, Raleigh's Parks, Recreation and Cultural Resources Department and the North Carolina Department of Transportation each spent more than \$200,000 in a single year on encampment clean-up.<sup>6</sup> These expenses do not end homelessness for the people living in encampments and often result in repeated displacement, worsening individual and system-wide instability.

The human toll is compounded by economic inefficiency. A 2024 report from Dallas found that local taxpayers spent nearly \$194 million annually on homelessness-related costs including hospitalizations, emergency room visits, mental health services, shelter operations, and incarceration.<sup>7</sup> Similarly, Houston has estimated the annual cost of homelessness at \$96,000 per person.<sup>8</sup> In contrast, the cost of ending someone's homelessness by providing housing and professional case management typically ranges from \$24,000 to \$36,000 annually.

Without stable housing, people struggle to maintain employment, manage health conditions, and access basic sanitation and safety. According to national estimates, roughly 40-60% of people experiencing homelessness are employed at some point during the year, and many work in low-wage or part-time jobs.<sup>9</sup> But holding a job while homeless—without access to reliable transportation, a safe place to sleep, or a place

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<sup>3</sup> Gregg Colburn and Clayton Page Aldern (2022). *Homelessness is a Housing Problem: How Structural Factors Explain U.S. Patterns*. University Of California Press.

<sup>4</sup> U.S. Government Accountability Office (2020). Better HUD Oversight of Data Collection Could Improve Estimates of Homeless Population. Available at <https://www.gao.gov/assets/710/708133.pdf>. Available at <https://www.huduser.gov/portal/sites/default/files/pdf/Exploring-Homelessness-Among-People.pdf>.

<sup>5</sup> U.S. Department of Housing and Urban Development (2020). Exploring Homelessness Among People Living in Encampments and the Associated Cost: City Approaches to Encampments and What They Cost.

<sup>6</sup> Data provided by City of Raleigh Parks, Recreation and Cultural Resources Department (covering the period between August 2022 and August 2023) and North Carolina Department of Transportation (covering the period between January 2023 and approx. March 2024).

<sup>7</sup> Ali Dadpay and Philip Huang (2024). The Cost of Homelessness in Dallas & Collin Counties. Dallas County Health and Human Services. Available at <https://www.dallascounty.org/Assets/uploads/docs/hhs/data-reports/The-Cost-of-Homelessness-in-Dallas-and-Collin-Cos.pdf>.

<sup>8</sup> Coalition for the Homeless of Houston/Harris County (2024). Presentation to the Raleigh/Wake Continuum of Care.

<sup>9</sup> U.S. Interagency Council on Homelessness (n.d.). Data and Trends. Available at <https://www.usich.gov/guidance-reports-data/data-trends>.

to shower or store belongings—creates enormous barriers to sustaining work. Investing in housing not only supports individual dignity and well-being but enables economic participation and reduces reliance on emergency systems.

Raleigh stands at a crossroads. The choice is not between spending or not spending; there is no zero cost option. The choice is between spending on temporary crisis response or investing in solutions that end homelessness. This strategy provides a path forward that prioritizes permanent housing outcomes, reduces unnecessary public expenditures, and improves health and safety for everyone. By aligning partners around a unified approach, the City can redirect its resources to what works.



## Landscape Analysis

To inform strategy design, Sagrado Strategies conducted more than 20 interviews and five focus groups, including three with individuals living in or recently exited from encampments. This engagement was paired with a review of local outreach operations and resource availability. The goal was not just to understand experiences but to generate system-level insights that could improve coordination, increase housing outcomes, and reduce inefficiencies.

### Key Findings

- **Desire for Housing Solutions:** Nearly all residents expressed a clear interest in housing, reinforcing what research consistently shows: homelessness is fundamentally a housing problem. Residents expressed desire not for temporary housing or shelter, but a pathway into permanent housing that is affordable and accessible. However, lack of housing resources in the community, eligibility restrictions, lack of documentation, and mistrust of service systems often block access.
- **Repeated Displacement is Costly:** Residents cited multiple forced relocations with no rehousing plan, confirming that current practices cycle people through encampments without resolution.
- **System Inefficiencies:** Street Outreach workers reported affordable housing as the number one resource needed to end homelessness. They also noted challenges such as limited supplies, siloed data systems, and no standardized method for encampment prioritization. These gaps lead to duplicative efforts and delays in housing placements.
- **Medical Needs and Employment Goals:** Many residents described untreated chronic health conditions and a desire for employment over long-term assistance, indicating opportunities for targeted interventions.

These insights underscore the importance of structured, efficient, and outcomes-focused interventions. Engaging individuals early in the process builds trust, reduces public burden, and accelerates the housing pathway. This makes better use of available resources and produces more stable results.

A detailed overview of the landscape analysis process and findings can be found in [Appendix B](#).

## Gaps Analysis

This section outlines the key resource, service, and infrastructure gaps that hinder the effective resolution of unsheltered homelessness in Raleigh and Wake County. The analysis shows that success will not be possible without additional, evidence-based investments that are more cost-effective than continued efforts to manage homelessness. The findings are informed by provider interviews, system-level data, and financial modeling.

### *Housing Supply Constraints*

- There is an insufficient stock of affordable housing units and flexible rent assistance. For approximately 60-70% of people experiencing homelessness, Rapid Re-housing (RRH) is the most effective resource.
- Some Permanent Supportive Housing (PSH) units or vouchers remain out of reach for high barrier households because of stringent eligibility criteria and lengthy waitlists.
- Limited availability and inflexibility of some existing programs and funding create barriers to meeting the unique needs of diverse households. For example, some programs cannot be accessed by residents with lack of income documentation, eviction history, poor credit, or other barriers.

**Impact:** Decommissioning efforts will stall without a pipeline of ready units and flexible rental assistance resources.

### *Funding Limitations*

- Most current subsidies are time-limited and inflexible, and demand for these subsidies outweighs available funding.
- Emergency funding (for deposits, medical costs, etc.) is scarce.

**Impact:** Local, flexible funds are needed to serve excluded populations and respond to urgent needs in real time.

### *Outreach and Case Management Gaps*

- Outreach teams lack consistent supplies (e.g., food, wound care, hygiene materials).
- On-site medical and behavioral health support is minimal. Housing-focused street medicine resources are needed.
- Case managers are overloaded, limiting capacity for intensive, housing-focused engagement.

**Impact:** Without scalable, multidisciplinary outreach and case management, Housing Surge efforts will be undermined.

### *Shelter System Shortfalls*

- Shelter capacity does not meet demand. Low-barrier space is at capacity most nights, limiting system flow. People cannot secure shelter as an interim step even when matched to permanent housing, and rapid exits to housing are needed to free up beds.
- Some shelters have entry barriers (e.g., curfews, rigid schedules, lack of privacy, family separation, no pets) or are not seen as safe or viable.

**Impact:** Flexible interim housing (e.g., hotel stays, bridge housing) supports encampment decommissioning, while rapid shelter-to-housing exits keep the system flowing.

### *System Coordination Challenges*

- A new encampment reporting tool in the CoC's Homeless Management Information System (HMIS) was launched in 2024 but still requires broad adoption.
- Outreach data is fragmented across incompatible systems (e.g., HMIS, medical systems, law enforcement systems) and there is no shared language or tracking protocol for encampment data.<sup>10</sup>
- Decision-making timelines across agencies do not align with operational needs.

**Impact:** System-wide data integration, shared definitions, and centralized coordination are required for efficient implementation.

### *Staffing and Operational Capacity*

- Outreach and housing teams are understaffed and at risk of burnout.
- There are no formal protocols for encampment selection, engagement, or debriefing.
- Role clarity across City, County, nonprofit, and law enforcement partners is inconsistent.

**Impact:** Dedicated staffing, structured workflows, and a defined governance structure are needed to manage implementation.

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<sup>10</sup> Furthermore, the community is currently in the midst of a shift in the CoC Lead Agency to a dedicated office within the Wake County Manager's Office, which is taking on direct oversight and administration of HMIS.

## Estimated Financial Need

A financial model was developed to estimate the investment required to rehouse and stabilize individuals currently experiencing homelessness in our community.

### *Methodology*

Estimated costs to rehouse people experiencing homelessness are based on the following analysis for participant length of time for support, the cost of rental subsidy, and the ability to support participants with one-time costs to ensure stability in rehousing.

**Participants:** In keeping with local trends, the model assumes that most participants (70%) need assistance for no more than two years, while 30% are assumed to need assistance for longer than two years.



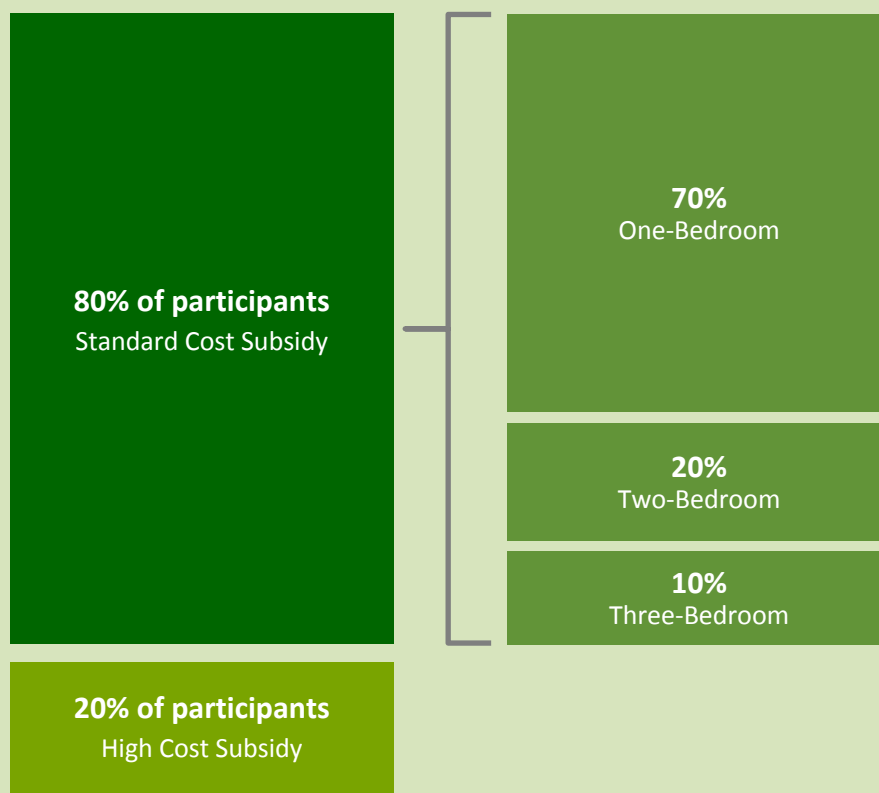


**Subsidy:** Standard Cost is a blend of one-, two-, and three-bedroom Fair Market Rents based on the percentage of households who require each bedroom size.

According to local data, 70% of households need a one-bedroom (\$1,555 per month), 20% need a two-bedroom (\$1,615), and 10% need a three-bedroom apartment (\$1,785). It also includes \$3,900 for a year of case management (at the ratio of a 20-person case load) and a \$3,000 one-time emergency (“flex”) fund per household.

High Cost assumes rental assistance needs of \$3,100 per month (conservative estimate well above Fair Market Rent to allow access to additional vacant units), as well as the \$3,900 estimated cost for a year of case management.

The model assumes that 80% of participants will need a Standard Cost subsidy, and 20% will need the High Cost subsidy.



**Flex Fund:** Included in support for individuals in their first year is a \$3,000 flex fund payment.

## *Findings*

The estimated cost per person is approximately \$27,000 per year. This estimate is consistent with costs in other communities using coordinated, solutions-focused approaches to address unsheltered homelessness—and significantly lower than the estimated (up to) \$96,000 per person that taxpayers pay each year in emergency services, law enforcement, and other costs if no action is taken.<sup>11</sup>

Other community estimates for comparison:

- Oklahoma City: ~\$25,000 per person
- Dallas: ~\$26,000 per person
- Cleveland: ~\$13,500 per person

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<sup>11</sup> Estimate of \$96,000 per person per year cost of homelessness cited during a presentation by the Coalition for the Homeless of Houston/Harris County to the Raleigh/Wake Continuum of Care on April 17, 2024.

## Recommendations

This strategy provides Raleigh and Wake County with a clear, actionable pathway to functionally end unsheltered homelessness through proven, housing-focused interventions. The analysis confirms that current approaches, such as reactive encampment clearings, are expensive and ineffective. In contrast, this model emphasizes systems alignment, measurable outcomes, and fiscal responsibility.

While the cost of ending homelessness is not insignificant, it represents a more effective and fiscally responsible investment than ongoing cycles of displacement. Permanent housing solutions reduce strain on emergency services, law enforcement, healthcare systems, and public infrastructure, leading to more impactful and sustainable use of public funds.

To operationalize this strategy, the following key actions are recommended:

### *Expand Housing Options*

- **Close the resource gap** that currently limits our community's ability to implement proven, fiscally responsible strategies at the scale necessary to effectively end unsheltered homelessness, instead of just managing it.
- **Increase access to housing** that aligns with a solutions-focused approach to ending homelessness. Ensure units and resources are available for individuals with higher barriers to entry and unique needs.
- **Invest in low barrier, customizable resources ("flex funds")** to serve individuals ineligible for traditional subsidies, such as those with prior evictions or poor credit.
- **Increase landlord incentives** to encourage broader property owner participation and reduce leasing barriers.
- **Scale flexible local rental assistance programs** to fill critical eligibility gaps.
- **Ensure all outreach and engagement efforts are housing-focused** with a clear pathway to placement, not just service connection.

### *Strengthen System Coordination and Data Integration*

- **Standardize and streamline the use of HMIS** and other data tools to create shared visibility into encampment locations, service utilization, and housing progress.
- **Establish consistent case conferencing protocols** to support collaborative problem-solving across agencies.
- **Implement universal consent and data-sharing agreements** to reduce delays and improve continuity of care.
- **Use real-time data** to drive decision-making, track outcomes, and manage resource deployment.

### *Improve Public Messaging and Private Sector Engagement*

- **Launch targeted public campaigns** to increase awareness and engage private landlords, businesses, and funders.
- **Provide clear pathways for partnership**, particularly for those interested in contributing housing units, services, or flexible funding.
- **Align messaging and definitions** across agencies and partners to ensure consistency in communication and planning (e.g., definitions of “encampment,” “outreach,” “surge”).

### *Enhance Outreach and Case Management Capacity*

- **Expand multidisciplinary teams** with sufficient supplies and mobile support to meet immediate health, safety, and service needs in encampments.
- **Integrate behavioral health, medical services, and eligibility workers** into outreach operations to reach people with critical health needs. Prioritize immediate housing pathways for seniors and individuals with serious health conditions whose lives are at risk if homelessness continues
- **Ensure outreach is directly tied to housing outcomes**, not just engagement metrics.

### *Establish a Coordinated Strategic Response*

- **Apply the Encampment Prioritization Tool** ([Appendix D](#)) consistently to allocate resources where they will have the greatest impact based on urgency and safety.
- **Define roles and timelines** for encampment decommissioning efforts to increase accountability and reduce inefficiency.
- **Centralize operational leadership** for surge planning, execution, and performance monitoring.



*Build and Sustain a Qualified Workforce*

- **Invest in training, supervision, and workforce wellness** to improve performance and prevent burnout in outreach and housing roles.
- **Offer competitive compensation and retention strategies** to support continuity and quality.
- **Recognize and share success stories** to reinforce momentum and highlight effective use of public resources.

By implementing these recommendations, Raleigh can reduce long-term system costs, improve housing outcomes, and align public investments with proven, effective strategies. This is a fiscally responsible model that prioritizes results, improves quality of life for residents, and positions the City for measurable success in ending unsheltered homelessness.

## Plan to Address Unsheltered Homelessness

Effectively decommissioning encampments requires a coordinated and thoughtful approach that balances urgency with strategy. The Unsheltered Homelessness Response Strategy calls for collective action across public and private partners, including law enforcement, dedication of existing and new resources, and a clear operational structure. The plan is grounded in the understanding that addressing unsheltered homelessness is a regional challenge that demands unified systems, shared accountability, and flexible solutions tailored to the reality of unique, human circumstances.

What distinguishes this strategy from previous local homelessness planning efforts is its emphasis on (1) structured partner coordination and (2) a replicable decommissioning process that channels housing-focused resources through shared protocols: a Site Assessment Tool ([Appendix C](#)), Encampment Prioritization Tool ([Appendix D](#)), and Housing Surge Approach (detailed in this section).

This strategy presents a pathway to reach “functional zero” for unsheltered homelessness in Raleigh and Wake County by aligning local efforts under a common framework and clearly assigning responsibility for core functions. This plan’s development coincides with the transition of the community’s Continuum of Care (CoC) Lead Agency to a newly established department within Wake County Government. This presents an opportunity to align the strategies outlined in the plan with the development of the CoC’s new strategic plan, and to bring the plan to CoC membership for adoption and advancement.

### Steering Committee

The core entity providing direction for this plan is the Unsheltered Homelessness Response Strategy Steering Committee. Each member of the Steering Committee has played a critical role in the development and approval of the plan by:

- **Providing Strategic Input:** Offering thought partnership and expertise based on personal experience and organizational knowledge to help shape the plan. Sharing professional perspectives on best practices, potential barriers, and innovative solutions for addressing unsheltered homelessness. When decisions are made, using consensus models to guide the group toward a decision that everyone can agree on, ensuring that all voices are heard and considered.
- **Identifying Gaps and Opportunities:** Highlighting key areas where additional strategies, policies, or resources may be needed to make the plan more comprehensive and effective.
- **Reviewing and Approving the Plan:** Collaboratively assess the plan’s overall direction, goals, and alignment with local needs and best practice in homelessness strategies. Ensure the plan aligns with both City and community expectations and obligations. Participate in formal approval processes to give the plan a mandate to move forward.
- **Endorsing the Plan:** Formally and publicly endorse the plan to demonstrate commitment to its goals and actions. Promote the plan's guiding principles and strategic objectives within respective organizations, communities, and networks.

As the work shifts from plan development toward implementation, a shift in the Steering Committee is proposed to focus on three distinct functions: (1) the Advisory Executive Function, (2) the Implementation

Leadership Function, and (3) the Decommissioning Operations Function. Each of these functions is structured to transition from a City-led initiative to a regionally sustained model housed within the CoC.

### Advisory Executive Function

The Advisory Executive function provides strategic leadership to support the overall direction of the Unsheltered Homelessness Response Strategy. Composed of senior executives, government leaders, and philanthropic champions, this group provides high-level system alignment, resource advocacy, and political support. Key responsibilities include:

- **Provide Political and Institutional Cover:** Ensure the plan remains a priority across agencies and sectors by removing institutional barriers and fostering a supportive environment for implementation.
- **Advocate for Funding and Resources:** Champion the strategy in funding conversations and help secure local, state, and philanthropic investment to close resource gaps and scale impact.
- **Align with Broader Goals:** Promote alignment between this plan and other City, County, and CoC initiatives to support fidelity to national homelessness reduction strategies and principles that follow evidence-based best practices, reduce duplication, and ensure coordinated investment.
- **Signal Commitment:** Use their platform to reinforce the importance of housing-focused and person-centered strategies, helping to shift culture and messaging across systems
- **Support Long-Term Sustainability:** Lay the groundwork for a durable cross-sector governance structure to guide strategy refinement and implementation over time. Work to create long-term solutions, including policy advocacy, community education, and continuous funding strategies.

### Implementation Leadership Function

The Implementation Leadership function leads operational coordination of the strategy and ensuring that day-to-day actions align with strategic goals. This function relies on leaders from operational agencies and service provider organizations directly engaged in implementation. Key responsibilities include:

- **Translate Strategy into Action:** Operationalize the plan by setting timelines, refining tools, and ensuring that implementation protocols are consistently applied. Ensure that the plan is executed in a way that is both efficient and sustainable, monitoring progress and adjusting strategies as needed.
- **Manage Feedback Loops:** Use input from outreach teams, community partners, and people with lived experience to continuously refine tools such as the Site Assessment Tool and Housing Surge protocols.
- **Oversee CQI and Learning Rhythms:** Monitor outcomes, surface lessons learned and adapt implementation approaches using the Continuous Quality Improvement (CQI) framework outlined in the plan. Offer feedback on the plan's execution, ensuring it remains aligned with evolving community needs, and help to refine and improve it as necessary.
- **Coordinate Across Sectors:** Convene housing providers, health services, and outreach teams to ensure that service delivery is integrated and responsive to encampment dynamics and resident needs.

- **Problem-Solve in Real Time:** Address emergent operational challenges such as service bottlenecks, coordination issues, or resource constraints through collaborative, action-oriented decision-making.
- **Mobilize and Monitor Resources:** Actively identify resources, including funding, staffing, and infrastructure, that are necessary for the successful implementation of the plan. Ensure that resources are being utilized efficiently and effectively towards the goals of the plan.

## Decommissioning Operations Function

The Decommissioning Operations function leads execution of Housing Surges and guides the transition of encampment residents into housing, ensuring alignment with strategic priorities and operational readiness. This function is composed of select Steering Committee members and key implementation partners directly involved in encampment decommissioning. Key responsibilities include:

- **Lead Housing Surge Planning and Execution:** Oversee the planning and implementation of Housing Surges at priority encampments, coordinating resources and partners to ensure residents are supported throughout the rehousing process.
- **Conduct Site Assessments:** Manage the site assessment process to evaluate encampment conditions, gather data, and inform prioritization decisions using the Encampment Prioritization Tool.
- **Coordinate Resource Allocation:** Guide the targeted deployment of services, housing resources, and operational supports to ensure that each Housing Surge is adequately staffed and resourced.
- **Facilitate Cross-Agency Collaboration:** Convene partners from housing, outreach, health, and public safety to align operations and address site-specific challenges in real time.
- **Ensure Strategic Alignment:** Provide strategic input to the Steering Committee to ensure encampment selection and Housing Surge implementation advance the broader goals of the Unsheltered Homelessness Response Strategy.

## Decommissioning Process

The decommissioning process provides a structured approach for closing encampments while ensuring residents have clear, supported pathways to housing.

### Housing Surge Pre-Work

Effective ongoing resource dedication is critical to the success of a Housing Surge and the overall strategy to address unsheltered homelessness. To be effective, it is essential that housing resources and supportive services are set aside and coordinated prior to the launch of a Housing Surge. This proactive approach ensures that the Steering Committee, Decommissioning Operations Team, and partner organizations are equipped to offer immediate support to unsheltered encampment residents with housing (interim and permanent) and holistic, wrap-around services and immediate care.

### *Pre-Work Element 1: Resource Dedication and Coordination*

By ensuring housing resources and services are fully dedicated and flexible before the Surge, the Operations Team and partners will be better equipped to respond swiftly and effectively, resulting in a successful Housing Surge.

1. **Resource Identification and Allocation:** Identifying and allocating available housing resources (e.g., rental assistance, permanent supportive housing, temporary housing, etc.) and supportive services (e.g., mental health care, substance use disorder treatment, employment support, etc.). Ensuring that sufficient housing units, financial support, and case management services are available and committed ahead of time. This may involve securing rental assistance, prioritizing housing placements, and coordinating with property owners to ensure swift access to units.<sup>12</sup>

**Staff and Partner Coordination:** Preparing all involved teams (including outreach workers, case managers, and supportive service providers) by ensuring they are trained, aligned, and ready to move on a Housing Surge. Coordination with service providers (such as health services, mental health services, and job training) is crucial to offer holistic support. Establishing effective communication protocols between all partners allows for quick decision-making and the smooth flow of information, which will help in addressing any challenges promptly and aligning actions across different teams.

2. **Flexibility in Service Delivery:** Housing Surges may have unexpected challenges, and the ability to adapt services—such as offering immediate temporary housing, mental health support, or addiction services—will enhance the likelihood of successful placements and long-term housing stability. Many different providers must be part of the Housing Surge process, even if not directly involved in the Surge itself. The Surge will impact the rest of the homeless response system’s service offerings because of its concentrated nature, and the system should prepare to accommodate that shift.

### *Pre-Work Element 2: Site Assessment Tool*

The Site Assessment Tool ([Appendix C](#)) provides a structured and coordinated approach for evaluating encampments. It is essential to establish a comprehensive understanding of conditions within encampments to inform effective responses. This will be used in tandem with the Encampment Prioritization Tool.

#### **Site Assessment Tool Highlights:**

- The assessment looks at components of the encampment such as physical location and ownership, structure, safety and public health, and encampment population and perceived needs.
- The tool will continue to be reviewed and refined by local groups such as the CoC Street Outreach Committee, including coordination with teams who have established relationships with site residents and are familiar with their housing plans and service needs.

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<sup>12</sup> More broadly, there is a need in the Raleigh/Wake CoC to improve resource identification and allocation for all populations of people experiencing homelessness through a more robust Coordinated Entry system.



### ***Pre-Work Element 3: Encampment Prioritization***

The Encampment Prioritization Tool ([Appendix D](#)) establishes a transparent process for how encampments are prioritized for decommissioning, recognizing that resources are limited. Prioritization helps meet the needs of all impacted parties, including encampment residents, neighbors, businesses, law enforcement, and the broader community. This will be used in tandem with the Site Assessment Tool.

#### **Encampment Prioritization Tool Highlights:**

- Four key domains: 1) Encampment Population, 2) Encampment Safety and Public Health, 3) Community Safety and Structural Concerns, and 4) Solid Waste.
- Each domain consists of elements generated from the Site Assessment Tool that are then plugged into the Encampment Prioritization Tool.
- The sum of each section is weighted, and a final Encampment Score is generated from the sum of the section subtotals.
- This tool generates a score that is meant to aid decision-making about the order in which encampments are resolved. However, it is not meant to be the sole factor. For example, an encampment scoring lower could still be prioritized if it were located on private property and the property owner requests that it be cleared immediately.
- The tool will continue to be reviewed and refined by local groups such as the CoC Street Outreach Committee.

## **Housing Surge Approach**

The Housing Surge Approach is a structured framework for encampment decommissioning that involves aligning partners, securing resources, and overcoming barriers to housing for encampment residents. Once an encampment is selected for decommissioning, the approach guides the transition with tailored strategies, adapting to whether the land is publicly or privately owned. For public land, collaboration with City or County agencies is key, while private land requires different partners and timelines. This strategy is not designed for encampments on private land, as landowners have the right to determine how they address encampments on their land. However, if private landowners are interested in aligning with the Housing Surge Approach, the tools in this section can be applied with some small tweaks. The process emphasizes clear communication, coordination with enforcement, and a seamless transition to housing for individuals affected by the decommissioning efforts.

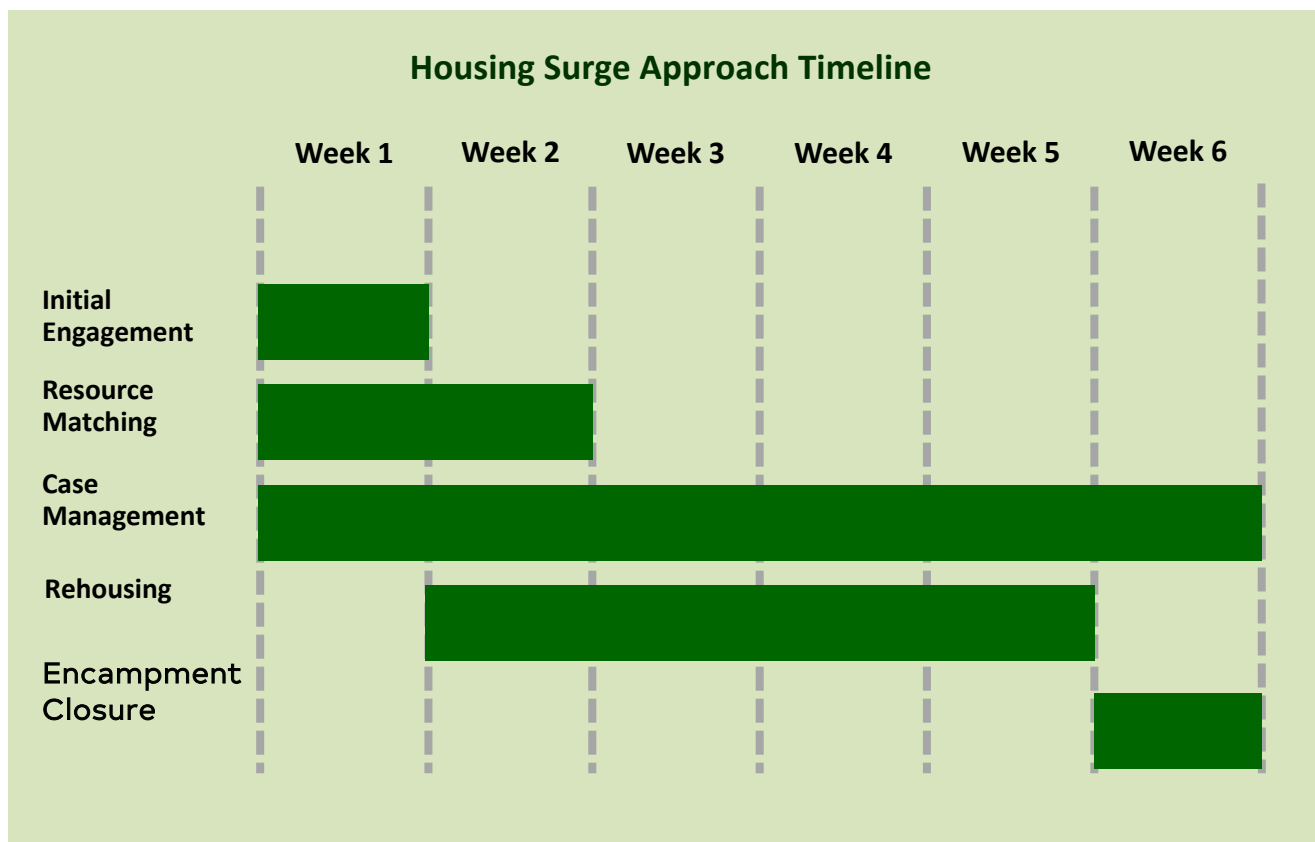
The Housing Surge Approach is designed to support the successful transition of individuals living unsheltered from encampments to permanent housing. The process is anticipated to take six to eight weeks depending on the number of residents and the complexity of their housing needs. The goal is to identify individual pathways to housing in an efficient manner appropriate to urgent needs, while maintaining a person-focused approach and closing encampments in a way that ensures safety, support, and coordinated enforcement.

This process is tailored to accommodate two distinct categories of encampment residents: (1) those already engaged with outreach teams (i.e., individuals with prior contact with social services, case managers, or outreach workers) and (2) those new to outreach teams (i.e., individuals not yet known to services and outreach workers when the Housing Surge is initiated).

The Housing Surge process has five phases:

1. Initial Engagement and Update Site Assessment
2. Resource Matching
3. Engagement and Housing-Focused Intensive Case Management
4. Rehousing Process (Interim and Permanent)
5. Encampment Closure and Ongoing Enforcement

The timing of each phase is a guideline and may shift depending on the needs of the specific encampment.



### 1. Initial Engagement and Updated Site Assessment

**Timeline:** Week 1 of Housing Surge

**Goal:** Meet the encampment residents. Understand who is living in the encampment and their housing and resources needs for triage and planning.

**Activities:**

- Designate lead/coordinator for outreach at encampment during Housing Surge.
- Coordinate outreach/engagement supplies.
- Coordinate on-site medical, behavioral health, and resource connection.
- Provide engagement supplies.

- Use the Housing Needs Assessment and Triage Tool ([Appendix E](#)).
- To the maximum extent possible, provide immediate interim housing and resource connections.<sup>13</sup>
- Compile encampment census (by-name list of all residents).<sup>14</sup>
- Compile inventory of housing needs/preferences and related support needs.
- Facilitate storage for encampment resident personal belongings.
- Engage substance use disorder providers and provide supplies on site to minimize harm for people with substance use challenges.
- Coordinate with appropriate law enforcement to post notice of upcoming encampment closure, which should include the date of closing and contact information for local providers.

## **2. Resource Matching**

**Timeline:** Weeks 1-2 of Housing Surge

**Goal:** Outline necessary housing and support resources to support all encampment residents with rehousing and plan post-surge site resolution and clean-up. Determine the resources needed by each individual and match those individuals with the resources that were identified and set aside during the Housing Surge Pre-Work stage.

**Activities:**

- Create a dedicated housing inventory.
- Notify Wake County Landlord Engagement Unit of rehousing needs.
- Coordinate on-site medical support.
- Provide medically enhanced interim housing and long-term care.
- Facilitate support for pets.
- Administer rental subsidies and services funding.
- Establish encampment lead and partner teams.
- Start weekly case conferencing.
- Create an Encampment Housing Plan to triage encampment residents into eligible housing.
- Update the Rehousing Budget Model with dedicated resources to be applied to specific encampment decommissioning planning.

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<sup>13</sup> This may include shelter, bridge housing, medical respite, or any other identified interim housing placement deemed appropriate. Given the community's current shelter constraints, implementing this step effectively would likely require an additional layer of set-aside in addition to the permanent housing resource dedication process.

<sup>14</sup> It is recommended that a set period (at least three weeks) be established during which the census is compiled and refined to ensure that all residents of a camp are accounted for, including those who may not be present and would be missed if the census were conducted over too short a period.

### ***3. Engagement and Housing-Focused Intensive Case Management***

**Timeline:** Weeks 1-6 of Housing Surge

**Goal:** Continuously engage encampment residents. Focus on immediate connections to housing and connections/reconnections to support resources.

**Activities:**

- Make medical and behavioral health connections.
- Triage to eligible housing resources.
- Gather housing documents and applications with encampment residents.
- Provide transportation support.
- Provide on-site benefits advocacy and income support.
- Host daily outreach debriefs.
- Use the Housing Needs Assessment and Triage Tool ([Appendix F](#)) or similar tool(s) to create individual rehousing plans for all encampment residents.<sup>15</sup>
- Provide on-site medical and behavioral health connections to establish care.
- Provide on-site rehousing and services (e.g., benefits, Veterans Affairs, Public Housing Authorities, veterinary care).

### ***4. Rehousing Process (Interim and Permanent)***

**Timeline:** Weeks 2-5 of Housing Surge

**Goal:** Complete rehousing plans for all encampment residents.

**Activities:**

- Deploy dedicated housing resources.
- Implement flexible housing subsidies as needed.
- Provide medically enhanced interim and permanent housing.
- Administer ongoing rental subsidies.
- Deliver rehousing case management for 6, 12, and 18 months.
- Provide immediate interim housing if needed.
- Triage residents to eligible housing opportunities.
- Provide transportation and relocation assistance.
- Provide Steering Committee meeting updates.

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<sup>15</sup> Many of the questions in the Housing Needs Assessment and Triage Tool overlap with the VI-SPDAT and other HMIS enrollment data. Combining or streamlining these tools to reduce duplication of efforts for clients and staff is recommended.

## **5. Encampment Closure**

**Timeline:** Week 6 of Housing Surge

**Goal:** Ensure all encampment residents have a positive encampment exit and a rehousing plan.

**Activities:**

- Coordinate with law enforcement and service providers to ensure all residents have been safely exited from the encampment to a positive destination by the date that the encampment is decommissioned.
- Update final measures of success.
- Update data dashboard to track outcomes and success.
- Create communication plan to communicate success.
- Create the encampment census close-out report for Steering Committee and partners that includes encampment exit destinations for all residents, gaps in support or need, and process improvement recap.

### *Decommissioning Encampments and Downtown-Focused Response*

The Housing Surge and encampment decommissioning approach outlined in this strategy is designed to transition entire encampments into housing within a six- to eight-week window. This process includes outreach and engagement, housing navigation, case management, and resource deployment coordinated across multiple partners. While this model is often associated with larger encampment sites, it can be applied to areas where unsheltered homelessness is more dispersed but still highly visible, such as downtown corridors.

In these areas, individuals may not be part of a traditional encampment but are consistently present in parks, transit stations, and business districts. Building on models like Dallas's Street-to-Home initiative, this same coordinated housing surge and outreach framework can be used to respond to downtown homelessness.<sup>16</sup> A focused, place-based approach centered on permanent housing and flexible resources can reduce visible homelessness while supporting individuals with dignity and urgency. This work will involve close coordination with the Raleigh Police Department, ACORNS, Raleigh CARES, the Wake County Continuum of Care Street Outreach Committee, Wake County, Downtown Raleigh Alliance, and other key stakeholders to ensure an aligned, compassionate, and effective response.

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<sup>16</sup> Candace Sweat (2024). Dallas homeless reduction plan continues to show progress. NBC 5 Dallas-Fort Worth. Available at <https://www.nbcdfw.com/news/local/dallas-homeless-reduction-plan/3847426/>.



## Implementation Process

Successfully implementing this plan will require a coordinated effort among key collaborators, robust infrastructure for service delivery, and a strong commitment to sustained collaboration and funding. The availability of adequate housing resources is central to its success. Without sufficient, affordable housing options and flexible, customizable resources, efforts to improve placement and stability will remain limited.

Meaningful impact requires investing in expanding housing options and flexible, accessible resources, simplifying access to existing supports, and providing services that help individuals and families obtain and maintain stable housing. Without these essential resources, even the best plans will struggle to succeed.

Strengthening housing capacity is not just a component of implementation; it is the foundation upon which long-term success depends.

### *Expand Housing Availability and Funding Sources*

- Invest in creating and improving accessibility of flexible housing options (hotels, short term rentals) to meet the urgent needs of encampment residents and align with the principles of a housing-focused approach.
- Identify and address challenges with current rent assistance resources and referral processes, acknowledging that barriers to effective use of federal vouchers are part of a broader national issue.
- Explore opportunities to improve accessibility and efficiency for people experiencing homelessness within this complex system.<sup>17</sup>
- Identify and secure flexible, sustainable funding streams to support residents who face eligibility challenges with existing housing programs and vouchers, including those with criminal or medical complexities.
- Build on the learnings from and scale the Unsheltered Homelessness Response pilot to provide low-barrier, immediate forms of support to encampment residents.<sup>18</sup>
- Successful encampment decommissioning will all be dependent on successful implementation of Housing-Focused Intensive Case Management.

### *Strengthen Decision-Making and Governance*

- Develop a Decommissioning Operations Team to act as a small decision-making body to oversee decommissioning operations and iterative strategic planning.
- Clearly define the roles and responsibilities of the Decommissioning Operations Lead and Decommissioning Operations Team, ensuring accountability and efficiency.

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<sup>17</sup> U.S. Department of Housing and Urban Development (2023). Guidance on housing individuals and families experiencing homelessness through the Public Housing and Housing Choice Voucher Programs (Notice PIH 2023-13, CPD 2023-05). Available at <https://www.hud.gov/sites/dfiles/OCHCO/documents/2023-05cpdn.pdf>.

<sup>18</sup> City of Raleigh (2025). Unsheltered Homelessness Response Pilot: Six Month Report. Available by request.

- Establish a formal decommissioning decision-making structure to streamline processes and clarify authority.
- Designate appropriate future roles and responsibilities for the full Steering Committee, with defined rhythms for meeting and action.

#### *Establish Feedback Protocols*

- Create a standardized process to gather input after interventions, using it to improve practices, strengthen accountability, and ensure consistent enforcement.
- Provide appropriate stipends to encourage participation and ensure representative input.

#### *Allocate Additional Resources*

- Increase funding for housing-focused outreach efforts, medical and engagement supplies, and other critical resources that directly support encampment residents.
- Develop a framework for flexible funding (“flex funds”) that leverages private investment and other non-public sources to address immediate and unique resident needs, reducing reliance on traditional public resources alone and expanding the overall pool of available support. Encourage partnerships with private entities and nonprofits to expand available resources beyond those provided by the City and Wake County.

#### *Share Pilot Learnings*

- Demonstrate the benefits of quick, flexible, and low-barrier alternatives to traditional aid, including the potential to address immediate needs and overcome the challenges associated with vouchers.

## Success Measures

Defining and tracking success measures is a critical component of the strategy, as they provide the framework for assessing progress, driving accountability, and ensuring alignment with the intended outcomes of the plan. By establishing clear success measures, the team responsible for plan implementation can make data-driven decisions, adapt strategies in response to challenges, and communicate the value of their work to funders, partners, and communities. The measures below were suggested by the Steering Committee to track progress moving forward.

### Overall Strategy Success Measures

Objective	Metric
Decrease unsheltered homelessness	Annual PIT unsheltered count (#)
	Percent of individuals engaged by providers who were unsheltered (%)
	CoC By-Name List (#)
Increase efficiency and positive experience of engagement and housing processes	Average length of time to engage people living unsheltered (# of days)
	Average length of time from engagement to housing move-in (# of days)
	Overall feedback and satisfaction from individuals engaged (qualitative)
Increase positive housing outcomes	Successful housing outcomes (#, %)
	Housing retention for 6 months, 12 months, and 24 months (#, %)
	Returns to homelessness (recidivism) (#, %)
Increase individuals' income	Income changes (employment or non-employment income) after housing (\$)
Increase cost savings to community	Cost per household (pre- and post-housing) (\$)

### Housing Surge Success Measures

Objective	Metric
Increase efficiency and positive experience of engagement and housing process	Encampment residents engaged (#)
	Average length of time from engagement to housing move-in (# of days)
	Satisfaction from encampment residents (qualitative)
Increase positive housing outcomes	Encampment residents present at start of Housing Surge vs. at decommissioning (#)
	Permanent housing outcomes (i.e., lease signed) at encampment closure (#, %)
Increase positive service connections	Connections to healthcare and behavioral health services (#, %)

## Housing-Focused Intensive Case Management

Housing-Focused Intensive Case Management (HF-ICM) is grounded in the belief that stable housing is not just a stepping stone, but a fundamental need and the foundation for well-being. Central to this model are the principles of housing focus, strengths-based support, and collaborative care. These values guide the service and care of case management in the Unsheltered Homelessness Response Strategy. This approach ensures that services are respectful and empowering for those seeking housing stability.

### *Participant Engagement and Accountability*

HF-ICM recognizes the diverse circumstances and challenges faced by individuals and emphasizes case management that is supportive and adaptable. Case managers work to build trust and provide an environment where participants feel engaged and supported in their housing journey.

The model avoids a one-size-fits-all approach. Instead, it tailors services to individual goals and strengths, encouraging active participation in setting priorities and determining next steps toward housing stability. Case managers apply proven tools such as motivational interviewing to help participants address barriers and sustain long-term housing success.

### *Leveraging Strengths for Stability*

HF-ICM emphasizes building on individual capabilities, skills, and available resources rather than focusing on deficits. Case managers partner with participants to identify these assets and use them as a foundation for planning and problem-solving. This approach supports confidence, accountability, and sustained engagement in the process.

Housing remains the central priority of HF-ICM. Stable housing is the platform from which other challenges—such as health, recovery, or employment—can be more effectively managed. Participants are connected with supports that promote long-term stability and success.

### *Promoting Health and Safety*

HF-ICM recognizes that individuals are at different points in their journey, including recovery and behavioral health challenges, and that meaningful change takes time. The focus is on practical strategies that reduce risks, strengthen stability, and improve overall well-being. Case managers provide support in a collaborative way, helping participants build health, safety, and self-sufficiency over time. Research consistently shows that health-focused, client-centered models lead to better and faster improvements in housing stability, health outcomes, and overall well-being.<sup>19</sup>

## Framework for Involving People with Lived Experience and Expertise (PLEE)

Involving people with lived experience and expertise (PLEE) with homelessness in the implementation and evaluation of an unsheltered homelessness response strategy is critical for creating effective and sustainable

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<sup>19</sup> GA Marlatt (1996). Harm reduction: Come as you are. *Addictive Behaviors*, 21(6), 779-788. [https://doi.org/10.1016/0306-4603\(96\)00042-1](https://doi.org/10.1016/0306-4603(96)00042-1).

solutions. Their firsthand knowledge provides unique insights into the barriers, challenges, and opportunities within the current system that may not be visible to policymakers or service providers. By integrating their expertise, strategies can be better tailored to meet the actual needs of individuals experiencing homelessness, increasing their likelihood of success.

During implementation, PLEE bring credibility and relatability to outreach, service delivery, and peer support roles. Their involvement fosters trust and engagement among individuals still experiencing homelessness, creating pathways to services that might otherwise be inaccessible. Additionally, their participation ensures that the design and execution of decommissioning efforts are grounded in the realities of those living in encampments, avoiding unintended consequences or gaps in service.

Opportunities for involvement include:

- **Community Monitoring Teams:** Engage PLEE to assist with monitoring the implementation of decommissioning efforts.
- **Employment and Leadership Opportunities:** Offer roles such as peer navigators, outreach workers, or community ambassadors.
- **Capacity Building:** Provide training in advocacy, facilitation, or systems navigation to empower participants to take on leadership roles.

Ample opportunities exist for involving PLEE in evaluation efforts, since lived experience is essential for assessing the real-world impact of strategies. Standard metrics often fail to capture nuanced outcomes such as shifts in trust, engagement, or community integration, which are vital for long-term success. Participants with lived experience can help define what success looks like, identify overlooked outcomes, and offer actionable recommendations for improvement. This not only enhances the responsiveness and accountability of the strategy but also empowers individuals with lived experience by positioning them as leaders in shaping systemic change.

Potential opportunities for involvement include:

- **Participatory Evaluation:** Include PLEE in defining and refining success metrics and conducting evaluations of the strategy.
- **Feedback Loops:** Gather ongoing input via focus groups, surveys, or community forums to refine approaches.
- **Storytelling and Advocacy:** Use storytelling to amplify the perspectives of PLEE in public communication about the strategy's impact.

Research shows that including people with lived expertise enhances program relevance, improves participant engagement, and leads to better housing and health outcomes.<sup>20</sup> Ultimately, involving PLEE is more than best practice. It reflects a deep commitment to a person-centered approach, and an interest in ensuring that efforts are successful. Their leadership shifts the response from a top-down intervention to a collaborative effort, fostering engagement, trust, and effective solutions that are responsive to real needs.<sup>21</sup>

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<sup>20</sup> Sam Tsemberis, Leyla Gulcur, and Maria Nakae (2004). Consumer choice and harm reduction for homeless individuals with dual diagnosis. *American Journal of Public Health*, 94(4), 651-656. <https://doi.org/10.2105/AJPH.94.4.651>

<sup>21</sup> Larry Davidson, Chyrell Bellamy, Kimberly Guy, and Rebecca Miller (2012). Peer support among persons with severe mental illnesses: a review of evidence and experience. *World Psychiatry*, 11(2), 123-128. <https://doi.org/10.1016/j.wpsyc.2012.05.009>

## Conclusion

The Unsheltered Homelessness Response Strategy is a critical step forward in addressing unsheltered homelessness in Raleigh and Wake County. Grounded in data-driven decision-making, national best practices, and a practical, cost-effective approach, this strategy lays out a clear path to address a growing public challenge by prioritizing permanent housing over repeated displacement and aligning public investment with measurable outcomes.

The plan's analysis confirms that unsheltered homelessness is a systemic issue, not an individual failing. Temporary encampment clearings and fragmented responses are not only ineffective but fiscally inefficient. By contrast, this strategy coordinates partners, standardizes decommissioning protocols, and accelerates housing placements, offering a better return on public spending and improving long-term outcomes for residents and systems alike.

Sagrado Strategies set this plan in motion, leveraging the expertise of the 53-member Steering Committee to build out this strategy. The City of Raleigh served as a facilitation partner. Sagrado and the Steering Committee intentionally designed this strategy to transition into the hands of the Continuum of Care (CoC) for long-term ownership, implementation, and refinement. This handoff marks a critical shift from a municipally led initiative to a regional, system-owned strategy, anchored within the CoC's governance structure.

The strategy is also structured to complement and strengthen existing regional efforts, including Wake County's Unsheltered Facility Study and the CoC's forthcoming Strategic Plan. By aligning goals, sharing data, and coordinating resources across these initiatives, our community can build a unified, cross-jurisdictional approach that maximizes impact and sustains progress over time.

Sustained leadership, funding alignment, and focused implementation will be key to success. Deploying available resources strategically, filling gaps with flexible investments, and maintaining a focus on outcomes such as housing retention and cost reduction will drive measurable progress.

This strategy represents a shift from reactive, crisis-focused efforts to a coordinated, cost-effective, outcomes-driven model. It lays the foundation for a durable system that can scale with need and adapt over time. With the right investment and execution, Raleigh can end unsheltered homelessness—and do so in a way that reflects responsible stewardship of public resources and a commitment to effective decommissioning.

## Appendices

### Appendix A: Year One Action Plan

The first year of plan implementation will focus on building a foundation to support long-term goals. Key actions in the Year One Action Plan are focused on three Priority Areas, each with a selected list of suggested action items.

Year one of the Unsheltered Homelessness Response Strategy is a crucial starting point for establishing a solid infrastructure, continuing vital operations, and expanding resources. By focusing on CQI, decommissioning encampments, and ensuring resource allocation, this plan sets the stage for a sustainable and impactful long-term effort that not only supports reintegration but strengthens communities as a whole.

Priority Area: Establish and Implement Continuous Quality Improvement (CQI) Infrastructure		
<i>Build an action-oriented sub-team of the Steering Committee to set goals, track progress, surface learnings, and communicate progress.</i>		
Action Items	Description	Timeline
Determine team to serve in the Advisory Executive Function	Establish a small group of Steering Committee members and/or members of the CoC Governance Board to serve in the Advisory Executive function for decision-making and implementation.	3 months
Establish clear goals and objectives	Advisory Executive team commits to goal(s) for Year One of implementation and refines work plan for Year One with prioritized actions and ownership.	3 months
Develop dashboard	Steering Committee with City, County and CoC partners develops a dashboard by 1) tracking determined success measures, 2) coordinating necessary data sharing agreements, and 3) determining public facing dashboard elements.	6 months
Establish and implement learning rhythms	Schedule and facilitate After-Action Reviews for future encampment decommissioning to surface lessons learned and necessary adaptations to processes and tools moving forward.	1 month
Establish visibility, awareness, and communication plan	Advisory Executive team, in partnership with City, County and CoC, establishes communication strategy for the plan, successes, and lessons learned.	3 months

### Priority Area: Continue Encampment Decommissioning

*Incorporating the decommissioning work done in Dix Park, a Decommissioning Team will continue the work of assessing encampments and implementing future decommissioning.*

Action Items	Description	Timeline
Determine team to serve in the Decommissioning Operations Function	Establish a small group of Steering Committee members and/or members of the CoC Street Outreach working group to oversee decommissioning operations, assess remaining encampments, and submit first recommendation of subsequent encampment prioritization.	3 months
Define roles and responsibilities of Decommissioning Operations Team	Clearly define the roles and responsibilities of the Decommissioning Operations team to ensure accountability and efficiency.	3 months
Select/hire Decommissioning Operations lead	Select/hire a Decommissioning Operations lead to support and monitor the Plan Implementation and Decommissioning Operations team.	2 months
Assess remaining encampments	Using the Site Assessment Tool, Decommissioning Operations team assesses all encampments in Raleigh/Wake County.	4 months, ongoing
Prioritize encampments for future decommissioning	Review findings of encampment site assessments and use Encampment Prioritization Tool to determine potential order for future encampment decommissioning to share with Steering Committee and CoC.	Ongoing

### Priority Area: Resource Allocation and Expansion

*Continue to expand the resource base (housing, person power, and monetary resources) for decommissioning encampments within Raleigh/Wake County*

Action Items	Description	Timeline
Provide low-barrier immediate support	Building on the success of the Unsheltered Homelessness Response pilot, secure resources to continue providing low-barrier housing assistance swiftly during encampment decommissioning.	12 months
Invest in low-barrier housing options	Improve accessibility of existing low-barrier options and invest in creating additional low-barrier housing options to meet urgent needs of encampment residents.	Ongoing



## *Unsheltered Homelessness Response Strategy*

Address challenges to housing voucher utilization	Identify and address existing challenges to utilizing housing vouchers.	6 months
Invest in necessary staffing	Hire, train, and support staff members to provide Housing-Focused Intensive Case Management for encampment decommissioning.	6 months

## Appendix B: The Planning Process

Unsheltered homelessness cannot be resolved by any one entity; collaboration and cross-sector partnerships are necessary. Cooperative relationships among Wake County, the City of Raleigh, and a multitude of community partners and providers created an opportunity to develop a robust and holistic planning process. The process was shaped by national best practices and a commitment to community strengths. Sagrado Strategies worked with local partners to adapt and customize tools, protocols, and timelines into a coordinated plan to address the needs of people living in encampments. This co-created approach ensured that the plan is effective and responsive to the unique challenges faced by people experiencing unsheltered homelessness in Raleigh.

Early in the planning process, it became clear that this effort was far more complex than a typical plan. It will require sustained effort and collaboration to bring the vision and goals of this strategy to life. This work is shaped by many voices and relies on their continued engagement to succeed.

### *Guiding Principles for Planning Process*

**Individualized and Supportive:** Implement a responsive system that focuses on the unique needs of each person, honoring their connections and path toward stability.

**Lived-Expertise Voice:** Create partnerships that value the leadership, experience, and contributions of people with lived expertise in addressing homelessness.

**Best Practices:** Apply evidence-based practices and innovative strategies to make homelessness rare, brief, and non-recurring.

**Housing Focused:** Promote housing-focused and evidence-based policies and practices that incorporate immediate and ongoing supportive service needs (i.e., mental health, behavioral health, housing retention).

**Ensuring Success for All:** Identify and remove barriers so that everyone has access to sustainable housing.

**Data Driven:** Collect and use quality data to inform decisions and continuous improvement for program prioritization, policy development, and resource allocation. Ensure transparency.

**Collaboration:** Facilitate collaborative planning and decision-making.

**Radical Respect and Empathy:** Ensure people feel welcome and respected and actively break down barriers that prevent people from participating, while maintaining dignity.

**Collective Understanding:** Develop a shared understanding of homelessness and housing instability among agencies, elected officials, and the public.

### *Community Participation and Engagement Process*

Sagrado Strategies engaged a wide range of community collaborators over the course of more than 20 interviews and five focus groups, three of which were with people who were current or former residents of encampments. When working with communities impacted by encampment displacement, the strategy emphasizes the importance of going beyond data collection, and aims to fully comprehend the lived experiences, challenges, and strengths that people have developed over time.

A holistic understanding of the context was developed by bringing together a range of voices, including government agencies, nonprofits, people with lived experience and expertise (PLEE) of homelessness, and current and former encampment residents. These conversations helped uncover both people’s immediate needs and the deeper systemic issues at play. Sagrado Strategies also captured strengths and emerging ideas from the community. Communities often have unique insights about their own circumstances and ways in which they have adapted to their situations. These insights can lead to more sustainable, locally rooted solutions. The objective of this engagement was to foster transparent and supportive conversations that go beyond quantitative data alone.

Engaging community partners and providers in the review, approval, and co-creation of tools and protocols ensures they are relevant, effective, and sustainable. This iterative process, rooted in Continuous Quality Improvement (CQI), fosters responsiveness to real-time conditions. By treating each review as an opportunity for refinement, the system remains dynamic and aligned with community needs. This collaborative approach also strengthens ownership and buy-in, enhancing the long-term impact of the solutions.

### *Engaging Encampment Residents in the Planning Process*

In January 2024, Sagrado Strategies conducted a focus group with eight residents from an encampment located on Dix Park property across from Healing Transitions Men’s Campus. This site was chosen for the focus group and for decommissioning through the pilot due to elevated health and safety issues. The aim was to better understand the needs and inform planning and design of an unsheltered homelessness response strategy.

In September 2024, Sagrado Strategies conducted a series of “walking interviews” with an additional ten residents living in the Dix Park encampment.<sup>22</sup> The interviews asked participants about their current living conditions in the encampment, hopes for the future, and barriers to housing, employment, healthcare, or other necessary services.

Because people are experts on their own experiences, valuable insights into what people need and how to resolve their homelessness can be gathered from talking to people experiencing homelessness. This helps produce ground-truthed information on what resources and tools are needed to most effectively end homelessness for people in our community. Participants, who were compensated for their participation, answered questions about their experiences, challenges, and needs.

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<sup>22</sup> “Walking interviews” are a qualitative research practice that attempts to remove hierarchical research power dynamics and allows the interviewer to walk with the interviewee while asking the participant to share information about their environment.

**Key Findings:**

- **Desire for housing solutions:** Many interviewees emphasized a strong desire to find housing and move out of the encampment as quickly as possible. Their responses clearly reflected that what they needed most was access to safe, stable housing—not just temporary relief. One group of encampment residents described the frustration of having nowhere to go, citing repeated displacements as different encampments without any meaningful plan or support to help them transition into housing. These interviewees' experiences reinforce what research consistently shows: homelessness is fundamentally a housing problem. Those experiencing it know this better than anyone. What they seek is not shelter alone, but a pathway into housing that is affordable, accessible, and permanent.
- **Triggering events:** Almost 60% of participants cited major life events—such as the loss of a child, job, disabling injury, or incarceration—as triggering factors leading them to experience homelessness.
- **Barriers to support:** Five out of eight participants in the original focus group had sought services but were discouraged due to family makeup (older children, partners, caretakers for older adults) or criminal history. Some noted that a felony conviction prevented them from even attempting to access housing support.
- **High medical needs:** Many participants need medical care for ongoing chronic and disabling conditions. Participants either explicitly cited acute medical needs and/or the need for acute medical care was observed in the interviews.
- **Reluctance toward housing offers:** Many participants expressed skepticism about accepting housing, even when told it would come with no preconditions, fearing hidden expectations for behavior change requirements. They perceived housing programs as restrictive or controlling, not offering true independence. The idea of being offered something similar to this was hard for the group to imagine.
- **Desire for employment:** All but one participant expressed a strong desire for employment, preferring to work and self-sustain rather than rely on housing programs. One participant emphasized, "I don't want handouts. I want a job."
- **Supportive needs for housing stability:** Participants identified key needs for staying housed, including jobs, a safe space to make mistakes without losing housing, community, friendship, and reasonable expectations. Most agreed that access to employment would help them regain independence and stability.

Overall, the focus group and walking interviews highlighted a desire for autonomy, employment opportunities, and supportive yet flexible housing arrangements that respect their individual needs and aspirations.

### *Engaging Street Outreach Teams*

Street Outreach is a proactive approach within homelessness response that involves trained professionals engaging directly with people experiencing homelessness in public spaces. The primary objective is to build trust, assess immediate needs, and connect individuals to housing and supportive services. Street Outreach teams are a critical component of a community's homeless response system, serving as rapid responders, care coordinators, and front-line workers. They provide informal, mobile access points for those experiencing homelessness, often working directly within encampments. These teams are highly effective due to their expertise and established relationships with encampment residents.

Integrating housing-focused solutions into Street Outreach is crucial for long-term success. Research shows that people who are directly housed from the streets experience significantly better outcomes. Nationwide, approximately 25% of people who engage with Street Outreach programs exit to temporary or permanent housing; in our community, it is nearly 50%.<sup>23</sup> Furthermore, housing-focused programs that provide permanent housing without preconditions have shown that 70–90% of participants remain stably housed two to three years after receiving services. In contrast, traditional “housing ready” or “treatment first” programs have retention rates of 30–50%.<sup>24</sup>

The CoC Street Outreach Workgroup is a workgroup of organizations who are leading outreach efforts in the community. This group was an essential partner for reviewing and co-creating tools and protocols. Their involvement includes providing feedback on the tools that were developed as part of the Housing Surge Approach. This group ensured the tools are practical, user-friendly, and aligned with the work they will be doing, such as consent, informing, and testing. The goal is to nurture their ideas and provide resources they can effectively use in their work.

In August 2024, CoC Street Outreach teams successfully gathered data on encampment locations and sizes, marking a significant milestone, as comprehensive data on encampments had not previously existed. However, Street Outreach workers shared lingering challenges.

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<sup>23</sup> U.S. Department of Housing and Urban Development (2025). HUD CoC System Performance Measures. Available at <https://public.tableau.com/app/profile/system.performance.measures.hud.public.data/viz/HUDCoCSystemPerformanceMeasures/M1LengthofStay>.

<sup>24</sup> New York City Comptroller (2023). Housing First: A Proven Approach to Dramatically Reduce Street Homelessness. Available at <https://comptroller.nyc.gov/reports/housing-first/>.

**Key Findings:**

- **Limited housing access and housing barriers:** The top need cited by Street Outreach workers was for housing options available for people coming directly from Street Outreach engagement. Lack of available permanent housing, lack of financial assistance to maintain housing, and barriers to accessing quick housing options make rehousing people experiencing unsheltered homelessness very challenging.
- **Lack of shared definition of encampments:** While many groups and individuals conduct street outreach, there is no shared understanding of what constitutes a camp. Without shared language and expectations, a comprehensive understanding of the landscape of encampments and needs is impossible to achieve.
- **Lack of shared understanding of Street Outreach:** Street Outreach should include and be considered a component of housing-focused case management. There is a need to attach outreach efforts to housing and ensure that outreach in encampments is leading to housing outcomes for the unhoused encampment residents.<sup>25</sup>
- **Lack of communication between data systems:** Multiple data systems are used to track outreach touchpoints, and data collected through outreach is recorded in separate systems. Staff entering the data into those platforms, such as HMIS and Raleigh Police Department data systems, are not able to see across multiple data platforms. Some providers who work with people experiencing unsheltered homelessness use separate databases. There is also a lack of standardized reliable outreach data collection in HMIS and insufficient capacity to track encampment-specific information.
- **Limited shelter access and shelter barriers:** The number of shelter beds in the community is severely limited. Even when shelter beds are available, congregate shelters often pose barriers due to issues like accommodating people with pets or possessions, and partners not being considered “family” or “spouses”.
- **Reluctance to engage:** Outreach teams and encampment residents alike may be hesitant to connect to services due to limitations or fears of unmet promises.

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<sup>25</sup> National Alliance to End Homelessness. (2024). The Role of Outreach in an Effective Homeless Response. Available at <https://endhomelessness.org/wp-content/uploads/2024/01/1.18.23-The-Role-of-Outreach-in-an-Effective-Homeless-Response.pdf>.

### ***Steering Committee Role***

The Steering Committee began to take shape in early August 2024. Sagrado Strategies and the City of Raleigh facilitated the development of cross-sector partnerships among government departments, nonprofits, philanthropic organizations, and people with lived experience and expertise. The recruitment effort resulted in a 53-person Steering Committee. By harnessing the community's expertise and experience, this Steering Committee is essential to building momentum and ensuring the success of the Unsheltered Homelessness Response Strategy. To date, the Steering Committee has worked through three phases with the goal of supporting unsheltered neighbors to move into housing with follow-along services.

#### **Phase 1: Orchestration of Resources and Support (September–October 2024)**

- Oriented the group to the Unsheltered Homelessness Response Strategy and project timeline.
- Oriented the group to the Steering Committee, group agreements, and consensus decision-making.
- Developed guiding principles and aligned messaging and language use.
- Engaged in collaborative resource and mapping exercise.
- Supported the plan with resource identification, coordination, and ongoing gaps analysis in the implementation phase.

#### **Phase 2: Development of Comprehensive Strategy (October–November 2024)**

- Ensured fidelity to guiding principles.
- Developed a review, feedback, and co-creation loop for strategy.
- Began review and revision of Site Assessment Tool, Encampment Prioritization Tool, Housing Surge Approach, and Year One Action Plan.

#### **Phase 3: Implementation of Comprehensive Strategy (January–May 2025)**

- Supported rollout of Encampment Prioritization Tool and Housing Surge Approach.
- Supported process improvement during the implementation of the strategy. Surfaced “lessons learned” from implementation of the micro-surge and the Unsheltered Homelessness Response pilot.
- Determined steps to sustain initiative beyond work with Sagrado Strategies.
- Identified resources needed to successfully implement the strategy.

#### **Next Steps (September 2025–June 2026):**

- Orient the Steering Committee to the CoC (including Governing Board and Street Outreach Committee).
- Connect the Unsheltered Homelessness Response Strategy and ongoing work in the CoC to develop a strategic plan, review and update system policies and procedures for HMIS, Coordinated Entry, and Written Standards.

## Appendix C: Site Assessment Tool

### Introduction

The purpose of the Site Assessment Tool is to provide a structured and coordinated approach for evaluating camps in Raleigh/Wake County. It is essential to establish a comprehensive understanding of conditions within camps to inform effective responses. This assessment serves as a tool to gather vital data on the location, size, composition, needs, and hazards associated with each encampment. With the Encampment Prioritization Tool, it aims to support decision-makers, service providers, and community partners in their efforts to create human-centered, equitable, and sustainable solutions for individuals experiencing unsheltered homelessness.

### Assessment Protocol

By conducting regular and thorough assessments, we ensure that interventions are responsive to the unique needs of each encampment, while promoting the safety, health, and well-being of all residents and surrounding communities. This tool will guide teams through the process of collecting critical information to prioritize service delivery, coordinate outreach, and facilitate long-term housing solutions.

#### *Encampment Dates*

- Date of assessment: \_\_\_\_\_
- Last date encampment info was updated: \_\_\_\_\_
- Date encampment formed, if known: \_\_\_\_\_
- **Date for closure, if known:** \_\_\_\_\_
- Encampment closure is currently:
  - ☐ Desired by: \_\_\_\_\_
  - ☐ Required by owner
  - ☐ Estimated (date): \_\_\_\_\_
  - ☐ Unknown

#### *Physical Location and Ownership*

Zip code(s): \_\_\_\_\_

Street intersections: \_\_\_\_\_

Property owner: \_\_\_\_\_

#### *Encampment Population and Needs*

- Estimated number of residents:
- Perceived elderly (65+ years old):
  - ☐ Have not heard / Zero activity seen onsite
  - ☐ Have heard / Less than 25% of the site
  - ☐ Perceived activity / 50% of the site
  - ☐ Witnessed / Throughout the site



## *Unsheltered Homelessness Response Strategy*

- Perceived minor children (<18 years old):
  - ☐ Have not heard / Zero activity seen onsite
  - ☐ Have heard / Less than 25% of the site
  - ☐ Perceived activity / 50% of the site
  - ☐ Witnessed / Throughout the site
- Perceived mental/behavioral health impacting physical health/safety:
  - ☐ Have not heard / Zero activity seen onsite
  - ☐ Have heard / Less than 25% of the site
  - ☐ Perceived activity / 50% of the site
  - ☐ Witnessed / Throughout the site
- Perceived Substance Use Disorder:
  - ☐ Have not heard / Zero activity seen onsite
  - ☐ Have heard / Less than 25% of the site
  - ☐ Perceived activity / 50% of the site
  - ☐ Witnessed / Throughout the site
- Perceived significant physical disabilities or acute health needs:
  - ☐ Have not heard / Zero activity seen onsite
  - ☐ Have heard / Less than 25% of the site
  - ☐ Perceived activity / 50% of the site
  - ☐ Witnessed / Throughout the site
- Perceived open wounds/sores that need medical care:
  - ☐ Have not heard / Zero activity seen onsite
  - ☐ Have heard / Less than 25% of the site
  - ☐ Perceived activity / 50% of the site
  - ☐ Witnessed / Throughout the site
- # of Pets: \_\_\_\_
  - ☐ Types: \_\_\_\_\_
  - ☐ # of Service Animals: \_\_\_\_\_

### *Community Safety/Structural Concerns*

Number of structures in encampment: \_\_\_\_\_

Structure types within encampment: \_\_\_\_\_

Existing restroom/bathing facility(ies):

- ☐ Yes (describe): \_\_\_\_\_
- ☐ No

Existing trash receptacles:

- ☐ Yes (describe): \_\_\_\_\_
- ☐ No

Additional key characteristics (e.g., access, impediments)

- Encampment in public park:
  - ☐ Yes
  - ☐ No
- Encampment on sidewalk(s):
  - ☐ Yes
  - ☐ No
- Within 50ft of a bridge/highway ramp/guardrail:
  - ☐ Yes
  - ☐ No
- Within 50ft of heavy traffic:
  - ☐ Yes
  - ☐ No
- Within 50ft of an area that floods:
  - ☐ Yes
  - ☐ No
- Within a block of homes/apartments:
  - ☐ Yes
  - ☐ No
- Within abandoned building:
  - ☐ Yes
  - ☐ No
- Near industrial zone:
  - ☐ Yes
  - ☐ No
- Near facilities for children (e.g., school, daycare):
  - ☐ Yes (describe): \_\_\_\_\_
  - ☐ No

*Encampment Safety and Public Health*

- Challenges to public/private use as property is intended:
  - ☐ Yes (describe): \_\_\_\_\_
  - ☐ No
- Flood risk:
  - ☐ Yes
  - ☐ No
- Sex work or human trafficking on site:
  - ☐ Have not heard

- ☐ Have heard
- ☐ Perceived activity
- ☐ Witnessed
- Number of EMS/Police calls in past 6 months:
  - ☐ 0
  - ☐ 1-5
  - ☐ 6-9
  - ☐ 10+
- Physical violence (between members or visitors):
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Visible weapons at encampment:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Drugs purchased/sold on site:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Punitive or controlling rules in the encampment:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Neglected/abused animals:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Known health issues/concerns (e.g., overdoses, communicable disease):
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed

- Infestation of rats/mice:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Hazardous Materials (e.g., car batteries, kerosene, broken glass, barbed wire, etc.)
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Biowaste (e.g., blood, used condoms, feces, urine, vomit):
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Food Waste (e.g., spoiled food):
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Open fires:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Loose sharps (e.g., used needles):
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed
- Standing water:
  - ☐ Have not heard
  - ☐ Have heard
  - ☐ Perceived activity
  - ☐ Witnessed

*Solid Waste*

- Disorganized Garbage (e.g., trash throughout the area)
  - ☐ Zero activity seen onsite
  - ☐ Less than 25% of the site
  - ☐ 50% of the site
  - ☐ Throughout the site
- Bagged Garbage
  - ☐ Zero activity seen onsite
  - ☐ Less than 25% of the site
  - ☐ 50% of the site
  - ☐ Throughout the site
- Bulky Items Garbage (e.g., sofa, treadmill)
  - ☐ Zero activity seen onsite
  - ☐ Less than 25% of the site
  - ☐ 50% of the site
  - ☐ Throughout the site

## Appendix D: Encampment Prioritization Tool

### Introduction

Communities nationwide face challenges in addressing encampments, often balancing competing priorities: the urgent need to respond to homelessness, the shortage of housing and shelter resources, and the health and safety concerns encampments pose. To move forward in a meaningful way, Sagrado Strategies and the Steering Committee developed an encampment resolution strategy that prioritizes housing and shelter placements over displacement actions that can address these complexities in connection with broader system reforms.

This tool aims to establish a transparent process for prioritizing encampments for resolution. Given limited resources, prioritization is essential to equitably and sustainably meet the needs of all impacted parties, including encampment residents, neighbors, businesses, and the broader community. This tool generates a score that is meant to aid the decision-making team about the order in which camps should be resolved. It is not meant to be the sole factor in determining the order.

However, without sufficient investment in housing, no homelessness system can adequately meet the needs of unsheltered individuals. While this approach can resolve encampments and increase housing and shelter placements, it cannot overcome a fundamental lack of resources. To achieve long-term, sustainable outcomes, policymakers and system administrators must commit to investing in housing.

The Prioritization Tool that looks at elements of an encampment across four different domains: 1) Encampment Population, 2) Camp Safety and Public Health, 3) Community Safety and Structural Concerns and 4) Solid Waste. Each domain consists of a series of elements for which the reviewers give a score. The sum of each section is weighted and then a final Encampment Score is generated from the sum of the Section sums.

The elements included in each of the domains should align with those elements collected in the Site Assessment or Triage Tool. What is included and the weights in the tool should be determined by the Steering Committee as a representative body.

## Encampment Prioritization Tool

Encampment Population [weight of 4]	Score
Perceived elderly (65+ years old)	0
Perceived minor children (<18 years old)	0
Perceived mental/behavioral health impacting physical health/safety	0
Perceived Substance Use Disorder	0
Perceived significant physical disabilities or acute health needs	0
Perceived open wounds/sores that need medical care	0
<b>Population Total</b>	<b>0</b>

### How to Score this Section

0 - Have not heard / Zero activity seen onsite      2 - Perceived activity / 50% of the site  
 1 - Have heard / Less than 25% of the site    3 - Witnessed / Throughout the site

Community Safety and Structural Concerns [weight of 3]	Score
Encampment in public park	0
Encampment on sidewalk(s)	0
Within 50ft of a bridge/highway ramp/guardrail	0
Within 50ft of heavy traffic	0
Within 50ft of an area that floods	0
Within a block of homes/apartments	0
Within abandoned building	0
Near industrial zone	0
Near facilities for children (e.g., school, daycare)	0
Frequent subject of calls or community outreach	0
<b>Community Safety and Structural Total</b>	<b>0</b>

### How to Score this Section

0 - No / Unsure  
 1 - Yes

Camp Safety and Public Health [weight of 4]	Score
Sex work or human trafficking on site	0
EMS/Police called out frequently	0
Physical violence (between members or visitors)	0
Visible weapons at camp	0
Drugs purchased/sold on site	0
Punitive or controlling rules in the camp	0
Neglected/abused animals	0
Known health issues/concerns (e.g., overdoses, communicable disease)	0
Infestation of rats/mice	0
Hazardous Materials (e.g., car batteries, kerosene, broken glass, barbed wire)	0
Biowaste (e.g., blood, used condoms, feces, urine, vomit)	0
Food Waste (e.g., spoiled food)	0
Open fires	0
Loose sharps (e.g., used needles)	0
Standing water	0
<b>Camp Safety/Public Health Total</b>	<b>0</b>

**How to Score this Section**

0 - Have not heard / Zero activity seen onsite      2 - Perceived activity / 50% of the site

1 - Have heard / Less than 25% of the site    3 - Witnessed / Throughout the site

Solid Waste [weight of 2]	Score
Disorganized Garbage (ex. trash throughout the area)	0
Bagged Garbage	0
Bulky Items Garbage (ex. sofa, treadmill)	0
<b>Solid Waste Total</b>	<b>0</b>

**How to Score this Section**

0 - Have not heard / Zero activity seen onsite      2 - Perceived activity / 50% of the site

1 - Have heard / Less than 25% of the site    3 - Witnessed / Throughout the site



*Unsheltered Homelessness Response Strategy*

Weighted Population	0
Weighted Community Safety/Structural	0
Weighted Camp Safety and Public Health	0
Weighted Solid Waste	0
<b>Total Score</b>	<b>0</b>

## Appendix E: Continuous Quality Improvement Framework

Continuous Quality Improvement (CQI) supports the implementation and ongoing refinement of the Unsheltered Homelessness Response Strategy. This framework ensures that the strategy remains data-driven, person-centered, and responsive to the needs of individuals and families experiencing unsheltered homelessness as well as adaptive to the work and learnings from prior decommissioning efforts.

### Establish Clear Goals and Objectives

Define Specific, Measurable, Attainable, Relevant, Time-bound (SMART) goals to guide the response strategy.

- **Example:** Reduce unsheltered homelessness by decreasing the number of individuals experiencing unsheltered homelessness by 25% within 12 months.

### Determine Success Measures

Select success measures to track progress toward goals. Examples are included above in the “Success Measures” section and also below:

- Number of individuals moved from specific encampment into permanent housing
- Number of individuals from specific encampment remaining unhoused at point of encampment closure
- Number of individuals experiencing homelessness in Raleigh/Wake County

### Establish a Collaborative Data Infrastructure

Establish a system to collect, manage, and analyze data effectively.

- Use HMIS for consistent data entry and reporting.
  - If, at time of implementation, HMIS is not ready to house decommissioning data, use simpler data infrastructure for capturing and housing needed data on encampment decommissioning, such as
    - # of individuals/families living in encampment at start
    - # of individuals/families placed into permanent housing
    - # of individuals/families placed into emergency shelter or temporary housing
- Incorporate real-time data from outreach teams, ACORNS, and other involved community partners.
- Develop dashboards to share progress with key collaborators.

### Implement the Plan-Do-Study-Act (PDSA) Cycle

Adopt the PDSA cycle to test and refine interventions:

- **Plan:** Identify an issue (e.g., barriers to housing navigation), develop a hypothesis, and design a testable solution
- **Do:** Pilot the solution on a small scale
- **Study:** Analyze the results using qualitative and quantitative data
- **Act:** Scale successful interventions or adjust the approach as needed

### **Monitor and Analyze Data Regularly**

Establish regular review cycles to assess performance:

- Monthly: Analyze success measures and progress toward goals.
- Quarterly: Conduct deeper dives into data trends, disparities, and systemic challenges.
- Annually: Evaluate the overall effectiveness of the strategy.

### **Foster Continuous Feedback Loops**

Encourage real-time feedback and adjustments:

- Regularly debrief outreach teams to understand field challenges.
- Conduct listening sessions with individuals experiencing homelessness.
- Review learnings with the Steering Committee during regularly scheduled meetings.

### **Scale Best Practices**

Identify and replicate successful interventions across the community:

- Expand housing-focused approaches.
- Share outreach strategies that build trust and engagement.

### **Report Progress Transparently**

Provide regular updates to collaborators and general public:

- Publish quarterly progress reports and annual evaluations.
- Share success stories and lessons learned with the general public.
- Use public dashboards to visualize data and progress.

## Appendix F: Housing Needs Assessment Triage Tool

ASSESSMENT DETAILS	
Date:	Assessor Name:
Assessor Org/Agency:	Assessor Contact Information:

This assessment is meant to give a snapshot of what needs and requests you/your household may have. If you give us permission, we want to try and get you some options for housing, services, and/or resources. An example of how we might share your information is providers meeting to work together to find solutions that you want to be connected to. Most times, we don't mention your name. Some of these questions might feel a little personal. These questions are what create difficulties to getting housing. We are not going to use this information to report you or get you in trouble.

I give permission to use this information to connect me to options for housing, services, and/or resources.

Signature      Date

PARTICIPANT AND HOUSEHOLD INFORMATION	
Name:	Nickname:
Camp Location:	Contact Information:
How many people are in your household?	Are you or anyone in your household under 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would you be considered the head or your household? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have pets or animals in your household? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you already talking to someone about services or housing (outreach worker, case manager)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, can we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No Contact Information:

Are you pregnant? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you or anyone in your household over 60? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a veteran who served in the active military, naval, or air service? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Was discharged or released under conditions other than dishonorable? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If comfortable with answering: What is your race?	If comfortable with answering: What is your gender?
If comfortable with answering: Do you identify as LGBTQIA+? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Additional Household Members	
Name: Age:	Nickname:
Contact Information:	
Name: Age:	Nickname:
Contact Information:	
Name: Age:	Nickname:
Contact Information:	

HEALTH AND WELLBEING	
<p>Do you or anyone in your household have a disabling condition or chronic condition?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Have you or anyone in your household gone to the hospital or taken an ambulance in the last 90 days?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How many times?</p>
<p>Has your mental health impacted your behavior and made it difficult to find or stay in housing?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Do you or anyone in your household have limitations taking care of your needs based on a disabling or chronic condition?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Do you or anyone in your household have a history of substance use that leads to difficulty maintaining housing or living with others?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If yes, does the condition make it difficult to find or maintain housing?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Have you or anyone in your household experienced violence in the last 90 days?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

HOMELESSNESS AND HOUSING HISTORY	
<p>Have you experienced homelessness longer than a year?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Have you ever had a lease in your name?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Do you have a legal eviction in your housing history?</p> <p><input type="checkbox"/> Market Rate Housing</p> <p><input type="checkbox"/> Public Housing</p> <p><input type="checkbox"/> No</p> <p>If yes, was the eviction court ordered? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

HISTORY WITH CARCERAL SYSTEM	
Have you or a member of your household been discharged from jail or prison in the last 6 months? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you or a member of your household had to register as a sex offender? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you or a member of your household have a criminal record that can create some difficulty in accessing housing? <input type="checkbox"/> Arson <input type="checkbox"/> Drug distribution/manufacturing <input type="checkbox"/> Offense against a person or property <input type="checkbox"/> Juvenile Justice Involvement with the past 7 years	

HOUSEHOLD INCOME
What best describes your current income?
Are you currently receiving any benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which benefits:

HOUSING PREFERENCES
Would you prefer to live alone or share housing with people you know and are comfortable with?  <input type="checkbox"/> Alone <input type="checkbox"/> Share Housing - How many rooms? _____

## Appendix G: Key Terms

**Chronic Homelessness:** A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who; Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and; has been homeless and living as described for at least 12 months or on at least four separate occasions in the last three years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least seven consecutive nights of not living as described. An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility; or a family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless. A “break” in homelessness is considered to be seven or more nights. An individual residing in an institutional care facility does not constitute a break in homelessness.<sup>26</sup>

**Continuum of Care (CoC):** A coalition of stakeholders (such as service providers, local business and philanthropic entities, local governments, etc.) and a community plan to organize and deliver housing and services to meet the needs of people experiencing homelessness that includes action steps to end homelessness and prevent a return to homelessness.<sup>27</sup>

**Coordinated Entry (CE):** A process that standardizes the way individuals and families at risk of homelessness or experiencing homelessness access are assessed for and referred to the housing and services that they need for housing stability.<sup>28</sup>

**Case Consultation:** Coordinated and consistent meetings convened by case managers to discuss encampment residents and their needs, risks, vulnerabilities, and housing barriers. Case managers discuss and share potential resources to ensure that residents are connected to services and housing with actionable next steps.

**Encampment:** This term is used to describe a group of people living for a sustained period, in tents or other structures, in a location not intended for human habitation (publicly or privately owned land not intended for habitation). Typically, encampments provide social support or a sense of community for residents.<sup>29</sup>

**Encampment Clearing, Clean-up, Sweeps:** The forced removal of people experiencing homelessness and their belongings from an encampment, with or without trying to assist them in obtaining housing or services. People who do not leave could be fined, arrested, and have their personal items seized.

**Encampment Consultation:** A meeting during which coordinated decommissioning partners develop a strategic plan to ensure that the decommissioning of the encampment does not interfere or disrupt encampment residents’ processes to getting care and housing. Planning includes ensuring that the site is

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<sup>26</sup> HUD Exchange (n.d.). Definition of Chronic Homelessness. Available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-homeless-eligibility/definition-of-chronic-homelessness/>

<sup>27</sup> National Alliance to End Homelessness (2010). What is a Continuum of Care? Available at <https://endhomelessness.org/resources/policy-information/what-is-a-continuum-of-care/>.

<sup>28</sup> HUD Exchange (n.d.). Coordinated Entry. Available at <https://www.hudexchange.info/homelessness-assistance/coordinated-entry/#coordinated-entry-notice>

<sup>29</sup> U.S. Department of Housing and Urban Development (2021). Unsheltered Homelessness and Homeless Encampments in 2019. Available at <https://www.huduser.gov/portal/sites/default/files/pdf/Unsheltered-Homelessness-and-Homeless-Encampments.pdf>.



prepared for the decommissioning, moving supplies, moving dates, transportation, week of coordination, encampment resident to case manager matching, encampment closure communication, sign posting, and clean-up.

**Functional Zero:** Indicates that a community has measurably solved homelessness for a population by making homelessness rare and brief for that population.<sup>30</sup>

**Homeless Management Information System (HMIS):** HMIS is a local information technology system used to collect client-level data and data on the provision of housing and services to individuals and families at risk of and experiencing homelessness. Each CoC is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.<sup>31</sup>

**Partners and Providers:** Sagrado Strategies uses the terms "partners and providers" and "collaborators" to reference participating entities in lieu of "stakeholders".

**Permanent Supportive Housing (PSH):** PSH is a homelessness intervention defined by HUD as permanent housing in which housing assistance (e.g., long-term leasing or rental assistance) and supportive services are provided to assist households with at least one member (adult or child) with a disability in achieving housing stability.<sup>32</sup>

**Point-in-Time (PIT):** The PIT Count is a count of sheltered and unsheltered people experiencing homelessness on a single night in January. The U.S. Department of Housing and Urban Development (HUD) requires that CoCs conduct an annual count of people experiencing homelessness who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. CoCs also must conduct a count of unsheltered people experiencing homelessness every other year (odd numbered years). Each count is planned, coordinated, and carried out locally.

**Pop-up Resource Days:** A collaborative engagement that is strategically planned. Meeting encampment residents close to their encampments to provide a spectrum of services that are housing focused including access to medical care with little to no barriers. Coordinated community providers set up in a designated area, ensuring it creates safety and privacy.

**Rapid Re-Housing (RRH):** RRH is a homelessness intervention defined by HUD as permanent housing that provides short-term (up to three months) and medium-term (four to 24 months) tenant-based rental assistance and supportive services to households experiencing homelessness.<sup>33</sup>

**Street Outreach:** Raleigh and Wake County have a robust network of providers giving care and resources to people experiencing homelessness. In this plan, the term "street outreach" means housing-focused services and care to people experiencing unsheltered homelessness. Housing-focused Street Outreach is an engagement strategy that prioritizes connecting people experiencing unsheltered homelessness to lifesaving, person-centered, and culturally responsive services and resources while actively working towards securing stable and permanent housing solutions.

**Supportive Housing:** Supportive housing is an innovative and proven solution that helps people facing complex barriers to housing thrive and break the cycle of homelessness. Supportive housing combines

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<sup>30</sup> Built for Zero (n.d.). Functional Zero. Available at <https://community.solutions/built-for-zero/functional-zero/>

<sup>31</sup> HUD Exchange (n.d.). HMIS: Homeless Management Information System. Available at <https://www.hudexchange.info/programs/hmis/>.

<sup>32</sup> HUD Exchange (n.d.). Permanent Supportive Housing. Available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-program-components/permanent-housing/permanent-supportive-housing/>

<sup>33</sup> HUD Exchange (n.d.). Rapid Re-housing (RRH). Available at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-program-components/permanent-housing/rapid-re-housing/>.

affordable housing with support services (provided either on-site or in the community) that help people who face the most complex challenges to live with stability, autonomy, and independence.<sup>34</sup>

**Unsheltered Homelessness:** Unsheltered homelessness refers to people whose primary nighttime location is a public or private place not designated for, or ordinarily used as, a regular sleeping accommodation (for example, the streets, vehicles, or parks).<sup>35</sup>

**Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT):** One of several tools that was developed in response to HUD's urge for communities to assess which consumers are most in need of services in Coordinated Entry. The VI-SPDAT has been implemented across the country, although it is now being phased out to be replaced by future tools.<sup>36</sup>

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<sup>34</sup> Corporation for Supportive Housing (2024). Corporation for Supportive Housing - Supportive Housing 101. Available at <https://www.csh.org/supportive-housing-101/>.

<sup>35</sup> HUD Exchange (n.d.) Unsheltered Homelessness. Available at <https://www.hudexchange.info/homelessness-assistance/unsheltered-homelessness/>.

<sup>36</sup> Joy Moses and Ann Oliva (2022). Looking Back at the VI-SPDAT Before Moving Forward. Available at [https://endhomelessness.org/wp-content/uploads/2022/08/NextGenTools\\_VISPDATBrief\\_08-30-22.pdf](https://endhomelessness.org/wp-content/uploads/2022/08/NextGenTools_VISPDATBrief_08-30-22.pdf).



