Dane Forward

A Five-Year Plan to Prevent and End Homelessness

(2024 - 2029)

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Introduction

In 2016, this community came together to create a framework to prevent and end homelessness in Dane County, Wisconsin. Titled "Safe & Sound", the plan sought to resolve homelessness quickly for those experiencing it and decrease or end new entries into homelessness, through four goals: preventing homelessness in Dane County; supporting persons experiencing homelessness; ending homelessness; and, advocating and collaborating with local, state and national partners.

The 2016 plan brought about major strides to address and end homelessness in the County by achieving many of the steps they outlined:

Expanded capacity and lowered barriers to shelter for women and families, and men; including the opening of The Beacon day resource center in 2017

Developed and formalized the Lived Experience Council and Youth Action Board.

Obtained $2,447,820 in funding to house homeless youth

For a full list of achievements see Appendix B.

Unfortunately, the economic impacts of the COVID-19 pandemic, a significant rise in local housing costs, and a shortage in the number of available units have increased the magnitude of the homelessness crisis. The looming reduction in Federal emergency funds to combat the impact of COVID-19 adds urgency to the situation. The need is not just for additional housing resources and supports, but also to maintain those created through emergency funding, and which have proven to slow down new entries into homelessness and decrease the amount of time households spend without stable housing.

Executive Summary

The purpose of this plan is to create a comprehensive roadmap to prevent and end homelessness over the next five years. It is intended to provide transparency to the general public, government officials, and nonprofit and business partners about funding, programs, and priorities to meet this objective.

This plan acknowledges historical and current racism, and the need to address systemic racism, ensure fair and inclusive access, and promote the voices of people of color within the homeless system of care.

This plan integrates housing and supportive services into the broader homeless services network. Since 2016, Dane County has made significant new investments to upgrading our shelter system, not only by improving shelters for men, single women, and families with children, including the opening of The Beacon day resource center in 2017, but also by designing and developing an expanded shelter system that will be person-centered, purpose-built, and trauma-informed.

This presents a unique opportunity for collaboration and connection, as these facilities provide space and access to serve as hubs where people experiencing homelessness can connect to service providers of all kinds. We must have a coordinated system which emphasizes diverting people from shelter, and, when that is not possible, reconnecting them to housing as quickly as possible. We include the needs of families and individuals who are couch-surfing or living with family members as well and recognize that they are also experiencing homelessness.

This plan requires the community to unite in bold and innovative ways, both to ensure that we have enough housing for all of our neighbors, and to eradicate the root causes of homelessness. We must collaborate across the homeless, housing, public health, education, criminal legal system and beyond. We will look to our partners in business and politics to help move the needle. And we will rely on our neighbors and community, to move Dane forward, together.

The 5 Year Plan

To prevent and end homelessness in the next 5 years, we've developed the following goals:

1 Educate and empower the community while evaluating and addressing racial disparities in our homeless system of care.

2 Increase housing programs and solutions for residents experiencing homelessness.

3 Coordinate and strengthen the homeless response system.

4 Increase and diversify funding to expand available resources.

5 Expand regional coordination.

These goals and their strategies are grounded in evidence-based practices and based on feedback we received from robust conversations and input from hundreds of community members including individuals with lived experience of homelessness, key stakeholders, cross-sector partners, subject matter experts, and people in the community.

This plan is action oriented; implementing the strategies and achieving the goals outlined here will prevent and end homelessness for many in our community. It provides an aggressive but practical approach to prevent and end homelessness in Dane County

Strategic Plan Vision Statement

Create a solutions-based response that deconstructs and disrupts housing inequities so everyone unhoused has a safe and stable place to thrive.

Guiding Principles:

- **Lived experience should be valued in every-level of decision-making, including through direct investment by the CoC in people with lived experience as decision-makers.**
- **Our system should work to recognize and reduce disparities for groups of people who have been systematically and historically oppressed.**
- **Our work should be trauma-informed at every level.**

Racial Equity Commitment Statement

While this Plan includes specific strategies to improve equity, we, The Community Plan Committee, also want to confirm an overall commitment to equity in all our work.

This Plan's partners commit to equity and anti-racism throughout the local homeless system of care and in all partnership engagement, at all points of service delivery, making this a priority for all people who experience homelessness in our community.

We commit to doing things differently than we have done before. We acknowledge the past pains and root causes of inequity in our community. What we do, how we do it, who's at the table—that needs to change so that we can prevent and end homelessness efficiently, effectively, and equitably.

We commit to:

- **Develop community leaders and homeless service providers who use an anti-racist framework.**
- **Ensure community leaders and homeless providers will receive training and support to be trauma-informed and anti-racist.**
- **Uplift and learn from diverse voices and their authentic experiences.**
- **Be held accountable, internally, and externally.**
- **Understand that intent is not always the same as impact.**
- **Acknowledge the power and control dynamics of our community and will dismantle them using a collective empowerment approach.**
- **Ensure power is shared equitably.**
- **Integrate plans to deconstruct structural racism and racial disparities where they exist within our homeless service system.**
- **Focus our resources on bridging the gaps in multiple systems of care, such as criminal legal systems, education, and health care, to reduce racial disparities in homelessness.**
- **Continuously growing to respond to the system as it changes.**

How this plan was developed:

The plan is the result of a year of work by stakeholders and partners from throughout the County and the Homeless Services Consortium, in partnership with Homebase. This plan is the latest iteration of our community's ongoing planning process to address homelessness throughout Dane County. It builds on the 2016 "Safe and Sound: A Community Plan to Prevent and End Homelessness in Dane County, WI."

Since 2016, stakeholders and partners have gained more knowledge and experience to build off the already existing goals and move forward with better strategies that can make a difference for the people who are served by our homeless system of care.

Timeline of the Process

Jan 2023
Community Plan Committee Formed

Mar 2023
Review of existing plans, data and policies and procedures

June 2023
CPC Planning Retreat and started Qualitative Research

Sept-Oct 2023
Focus Groups, Interviews, and community survey released

Dec -Jan 2024
Work Groups Convened

Feb 2024
Stakeholder review and input on plan draft

Mar 2024
Plan adopted by Board

The Community Planning Committee

The development of this plan was led by the Community Planning Committee of the HSC, a diverse group of stakeholders including people with lived experience of homelessness in Dane County, city and county government, and, faith-based, non-profit, community leaders.

The Community Survey

Disseminated and advertised broadly in the community and was completed by 266 people who live and/or work in Dane County.

Qualitative Data Collection

This plan is informed by the wants, needs, and demands of the people of Dane County. Input was sought from experts throughout the field, people who have themselves experienced homelessness in Dane County, and the public at large. This information was collected in a variety of ways, including:

Focus Groups:

- Over 120 people with Lived Experience of Homelessness
- The Youth Advisory Board
- Doubled Up Providers
- Mainstream Services Providers
- The Lived Experience Committee

Working Groups Focus:

- Racial Equity
- Cross-Sector Parterships
- Housing & Landlord Engagement

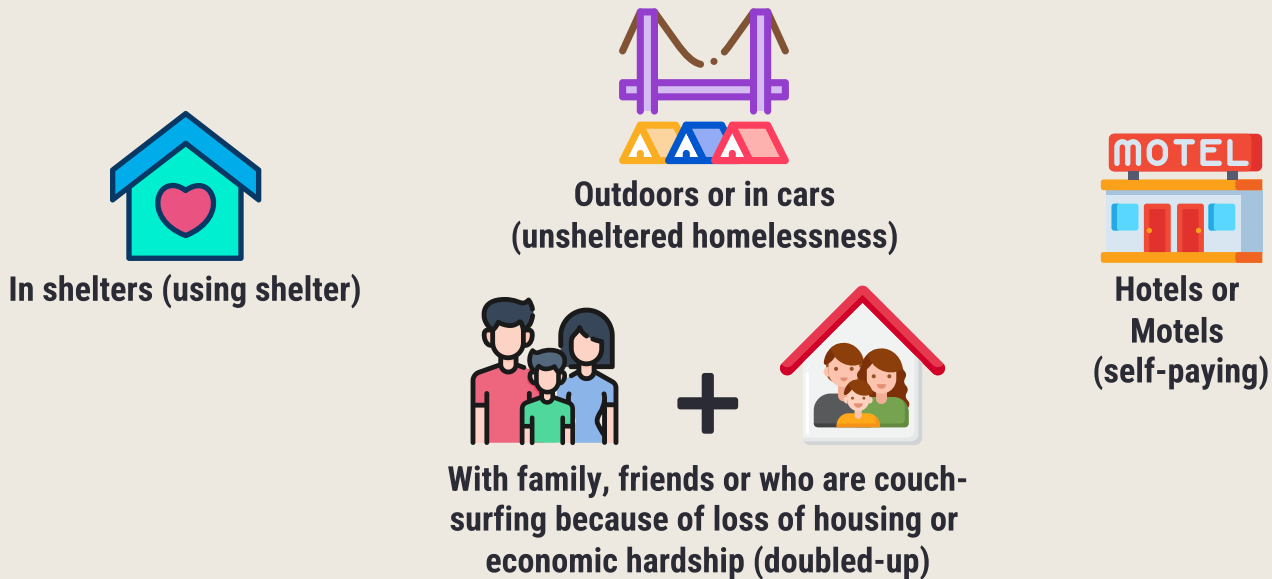## Interviews with...

Dane County Department of Human Services
Mount Zion Church
Madison Municipal Court
Mayor of Madison
Madison Public Library
Madison College
Dane County Supervisors
City of Madison Common Council Alders
Dane County Behavioral Health
NAACP of Dane County
Dane County Housing Authority
Centro Hispano
Dane County Executive
Local Businessess
Sun Prairie Schools

The Language Of This Plan

Describing and discussing the issue of homelessness is challenging and delicate. The language used to talk about this subject carries great emotional weight, but it can also quickly devolve into technical terminology divorced from the people experiencing it. Our goal in creating this plan was to center those who have lived experience of homelessness. At every step of development, planning and drafting we have sought their expertise because fundamentally, that is who this plan is for.

When we talk about homelessness in this plan, our definition is broad and informed by people who themselves have experienced it. It includes people living:

In shelters (using shelter)

Outdoors or in cars (unsheltered homelessness)

With family, friends or who are couch-surfing because of loss of housing or economic hardship (doubled-up)

Hotels or Motels (self-paying)

Our Definition of Homelessness

When an individual, family or community lacks stable, safe, permanent or appropriate housing.

The definition of homelessness used in this plan, as well as the way the condition of being homeless is described are both based on careful consideration and input from individuals who themselves have experience being homeless in Dane County.

The responses we received from people with lived experience of homelessness defined homelessness in a multitude of ways, but for the purposes of this document we adopted the most popular language and definition.

"People Experiencing Homelessness"

The language and terms used in this plan were chosen based on feedback from individuals with experience of homelessness, and seeks to center equity and the dignity of those who are or have experienced homelessness.

This plan uses the following language:

- **People experiencing homelessness:** those who currently meet the definition of homelessness.
- **People at risk of experiencing homelessness:** people who are at risk of losing their housing.
- **People with lived experience of homelessness:** those who are presently or have previously experienced homelessness, including those who are now stably housed.

WHO IS EXPERIENCING HOMELESSNESS IN DANE COUNTY?

The data on this page and throughout the plan come from a variety of different data sources, each with their own unique data cycle. Though the date ranges may vary from source to source, the data consolidates from a singular moment in time: March of 2022. For more information about a particular data source, please see the Appendix A.

701

People Experience Homelessness

on a given day [1]

24%

Chronic Homelessness [1]
Increased Since 2015

12%

Unsheltered Homelessness [1]

36%

Households with Children [2]

21%
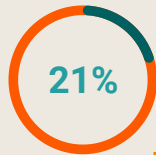
Homeless 12+ months
In the Past 3 Years [2]

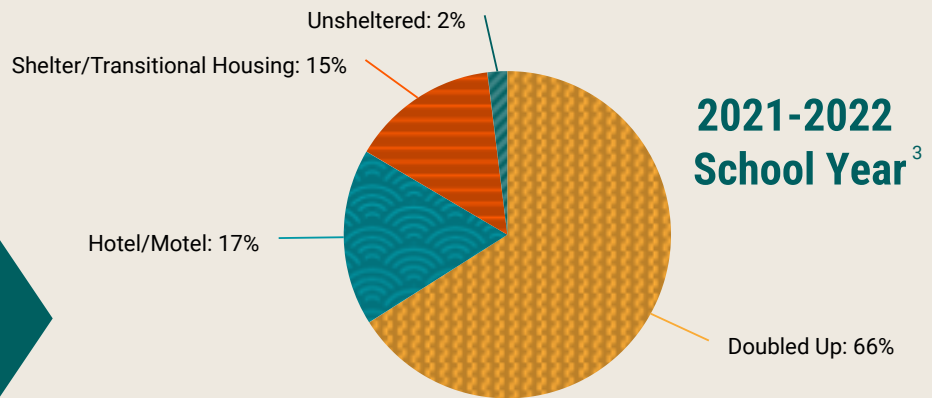**Households with a Disabling Condition** [2]

55%

[1] data source: 2022 Point in Time (PIT) Count. This does not include households experiencing doubled up homelessness.
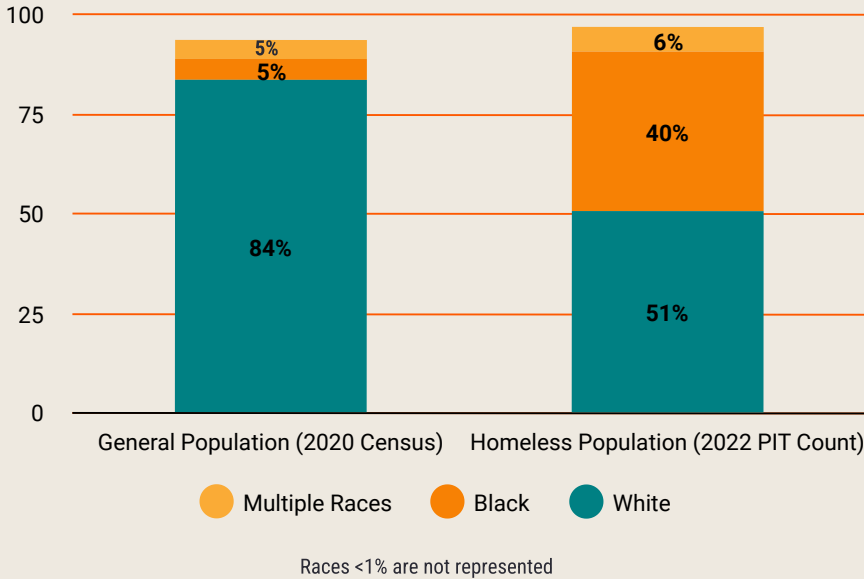[2] data source: 2022 HMIS

1,507
K-12 Students Experienced Homelessness [3]

Unsheltered: 2%
Shelter/Transitional Housing: 15%
Hotel/Motel: 17%
Doubled Up: 66%

2021-2022 School Year [3]

Doubled Up · Hotel/Motel · Shelter/Transitional Housing · Unsheltered

[3] data source: 2021-2022 Dept. of Public Instruction

HOW THE HOMELESS POPULATION COMPARES TO THE GENERAL POPULATION

General Population (2020 Census)
- 5% (Multiple Races)
- 5% (Black)
- 84% (White)

Homeless Population (2022 PIT Count)
- 6% (Multiple Races)
- 40% (Black)
- 51% (White)

Legend:
- Multiple Races
- Black
- White

Races <1% are not represented

**Black people are 8x overrepresented in the population relative to their share of the total Dane County general population.**

	Black	White
Total in HMIS	50%	48%
PSH	42%	55%
RRH	56%	44%

Legend: Black / White
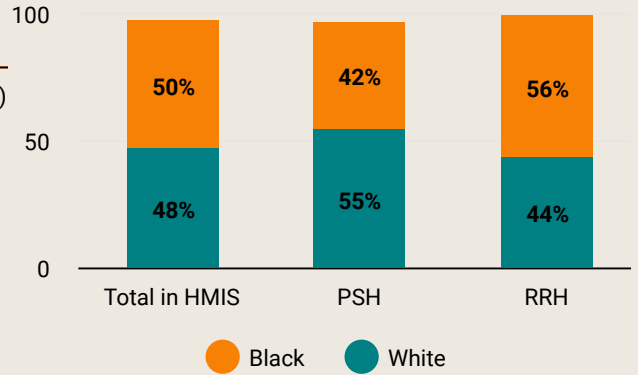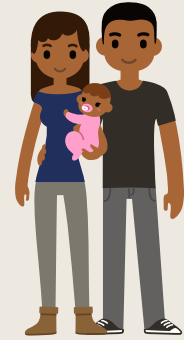
Black households access permanent supportive housing at lower rates relative to their share of the households accessing the homeless system
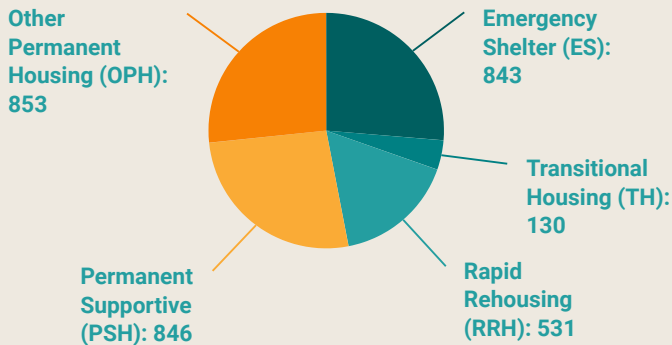
UNMET NEED IN THE HOMELESS SYSTEM OF CARE

data source: 2022 HMIS

1,461 Households Enrolled in a Year

1,340 Households Exited in a Year
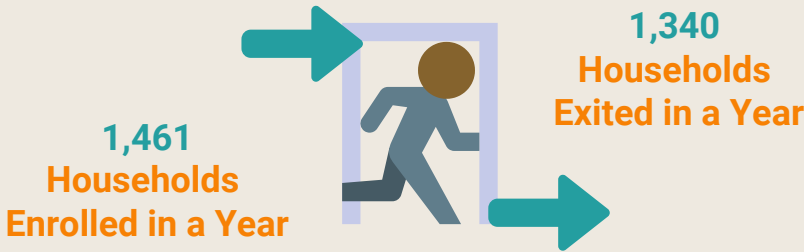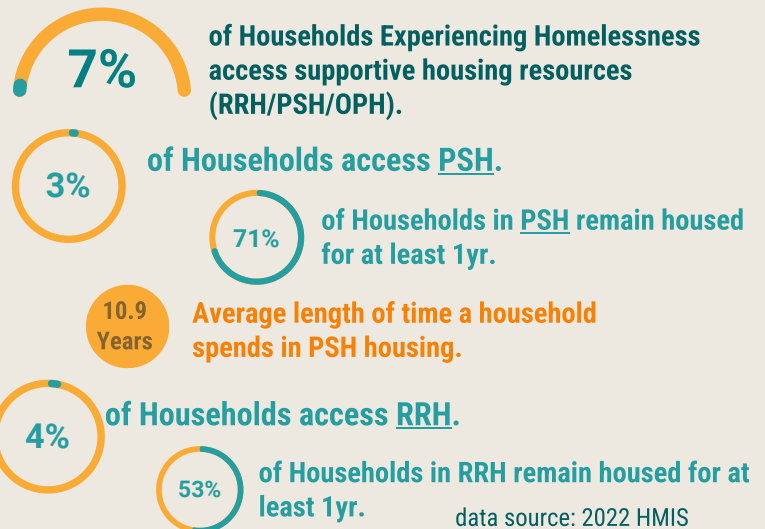
Unmet Need ** 121 Households

** The difference between enrollments into the system and exits from the system- Increased sharply in 2022

CRISIS RESPONSE AND SUPPORTIVE HOUSING INVENTORY (2022)

Other Permanent Housing (OPH): 853

Emergency Shelter (ES): 843

Transitional Housing (TH): 130

Permanent Supportive (PSH): 846

Rapid Rehousing (RRH): 531

data source: 2022 Housing Inventory Count
** Emergency Shelter, other Permanent Housing, and Rapid Rehousing beds have increased since 2020 due to COVID funding.
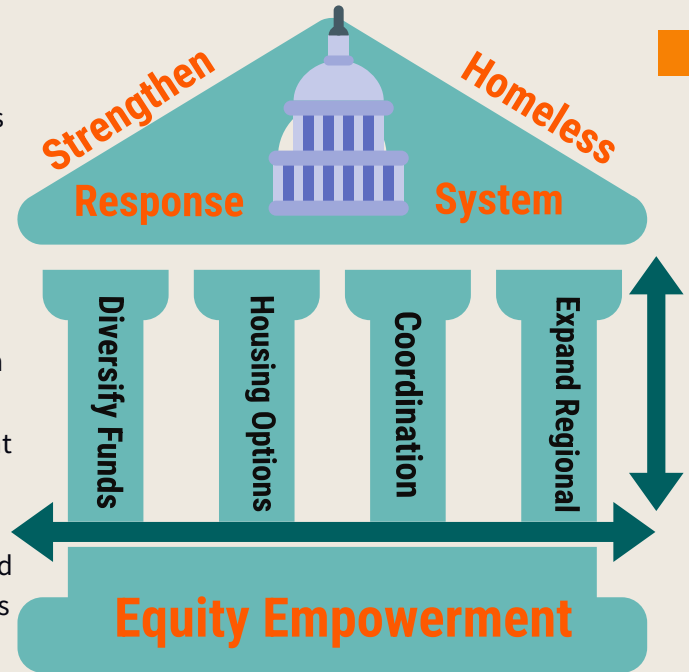
7% of Households Experiencing Homelessness access supportive housing resources (RRH/PSH/OPH).

3% of Households access PSH.

71% of Households in PSH remain housed for at least 1yr.

10.9 Years Average length of time a household spends in PSH housing.

4% of Households access RRH.

53% of Households in RRH remain housed for at least 1yr.

data source: 2022 HMIS

Ending Homelessness in Dane Co.

Dane County is at a critical moment. As the cost of living and the market rate of housing continues to escalate, there is less and less housing stock for individuals to choose from. Moreover, while the COVID pandemic brought great challenges, it also brought an increase in funding to address housing and homelessness. Some of these funds are now sunsetting, and if the CoC is unable to maintain some or all of them the crisis will become even more dire.

The goal of this plan is ultimately to prevent and end homelessness in Dane County. This will require enormous effort and bold strategies from traditional providers, new partners, and the entire community. Over the next five years, this plan seeks to meaningfully address racial inequities of the past and begin to remedy them, while ensuring that future actions are grounded in equity and center the voices of those with lived experience. The plan proposes the creation of new housing for people experiencing homelessness, while maintaining the current housing stock. It will improve regional coordination and streamline the homeless system of care while increasing and diversifying its funding, and meaningfully address and remedy racial inequities in the system. Each of these goals must work in tandem with one another.

Strengthen Response **Homeless** System

Diversify Funds

Housing Options

Coordination

Expand Regional

Equity Empowerment

Current System Performance

1,165
Households Currently Enrolled in the Homeless System of Care Who are Underserved*

+

121
Households Each Year Who Enroll in the System and Don't Get Served

Giving people shelter or long stays in shelter only prolongs their homeless experience and increases costs to the community. **Permanent Housing is the solution to addressing and ending homelessness.**

In addition to this plan, Dane County recently launched a Regional Housing Strategy (RHS) to assess housing needs, examine barriers to housing, and inform the implementation of regional housing. Many of the strategies and action items in this plan align with housing priorities already identified during the RHS planning process. For more information about the RHS see Appendix C.

*This number represents people who have enrolled in the homeless system of care (CES) who have not exited it for permanent housing. Because this number only includes people who have enrolled in the homeless system of care, it likely under represents the actual number of people experiencing homelessness in Dane County.
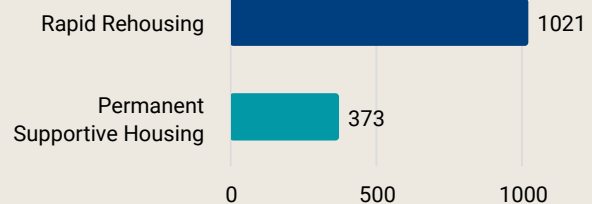
How Much Housing is Needed?

Temporary funding for 431 permanent housing units may end → **This would create 276 additional unserved households each year**

Additional Permanent Housing Units Needed If Temporary Funding Ends:

Rapid Rehousing	1021
Permanent Supportive Housing	373

0   500   1000

For more information on the projection model used to estimate these housing needs see Appendix D.

GOALS & STRATEGIES

1   **Educate and empower the community while evaluating and addressing racial disparities in our homeless system of care.**

Strategy 1: Create a permanent / standing racial equity committee to lead racial equity in the Homeless Services Consortium.

Action Steps & Metrics

1. Establish a racial equity committee that reflects the racial makeup of the homeless population.
2. Ensure the racial equity committee is a permanent part of the Homeless Services Consortium charter and the charter includes a legitimate power-sharing structure for the racial equity committee.
3. Develop annual goals, action plan and outcomes for Racial Equity committee.
4. Develop annual goals and priorities for the Homeless Services Consortium.
5. Integrate racial equity principles and policies into the Homeless Services Consortium charter, policies and procedures, and governance, and across all HSC committees.

Strategy 2: Develop and implement a racial equity training program to develop anti-racist leadership and service delivery.

Action Steps & Metrics

1. Create community / HSC definitions on racial equity terms and concepts.
2. Develop and expand on existing resources to conduct racial equity action labs to include:
    - Education, historical context and current information on racism and segregation in the community;
    - Community conversations and problem-solving sessions with allies and other leaders to develop strategies to address racial disparities;
    - Develop skills to evaluate racial disparities in the community and apply learnings from the action labs.
3. 100% of HSC action lab participants will develop personal, actionable plans and goals around anti-racist leadership and service delivery.
    - Provide technical assistance and training to HSC member organizations to deepen their capacity to advance equity.
4. At least 75% of HSC member organizations have an actionable plan to increase their organizational capacity to advance equity.

GOALS & STRATEGIES

1 Educate and empower the community while evaluating and addressing racial disparities in our homeless system of care.

Strategy 3: Develop a process to monitor racial disparities and evaluate progress on eliminating them.

Action Steps & Metrics

1. Conduct a racial equity analysis:
    ○ Create a framework for annual updates to analysis, with mid-year reviews of the report;
    ○ Obtain funds to hire an outside entity that specializes in racial equity to conduct the analysis.
2. Annually review and determine areas of greatest racial disparities and create action plan.
    ○ Determine entity to monitor and evaluate progress.
3. Connect to the coordinated entry system assessment and data monitoring processes to ensure equitable outcomes.

GOALS & STRATEGIES

2

Increase housing programs & solutions for residents experiencing homelessness.

Strategy 1: Add 1394 units of supportive housing for people experiencing homelessness.

Action Steps & Metrics

1. Create 300 housing opportunities in Dane County outside of the City of Madison.
2. Add 404 units of PSH for chronically homeless single households.
3. Add 600 units of supportive housing for special populations (youth, unsheltered, doubled-up, criminal legal involved, etc.)
4. Develop and implement a housing incubator program to develop new housing and partnerships between developers and homeless service providers.
   - Increase the number of nonprofit developers and provide on-demand technical assistance to new nonprofit developers.

Strategy 2: Diversify and implement innovative solutions to housing and service delivery to address various housing needs and pathways.

Action Steps & Metrics

1. Evaluate past and current innovative housing programs and bring at least three initiatives to scale.
2. Pilot and evaluate at last least three innovative housing and service models especially ones focusing on special populations. Bring at least two successful pilots to scale.
   - Examples: Medicaid for supportive services (1915i); changes to Public Housing Authority (PHA) regarding vouchers and occupancy; shared housing, tiny homes.
3. Partner with public and private funders to support innovative housing options.
4. Incorporate lived experience input into project development and funding priorities to address unmet needs and gaps in housing and service delivery.

What is Supportive Housing?

Supportive housing combines financial assistance for rent with services to ensure housing stability.

Supportive housing utilizes subsidized or affordable housing options within the community.

Financial assistance can be time-limited or on-going.

Services can include tenancy support, case management, access to health care and behavioral health and connections to support networks.

Many organizations can create and operate supportive housing programs which focus on the homeless population.

GOALS & STRATEGIES

2

Increase housing programs & solutions for residents experiencing homelessness.

Strategy 3: Create a county-wide centralized landlord engagement and unit acquisition program.

Action Steps & Metrics

1. Develop, fund, and issue a request for proposals/qualifications to implement and pilot centralized landlord engagement and unit acquisition.
2. Secure $500,000 to fund centralized landlord engagement and unit acquisition.
3. Secure $1.8 million of additional annual funding for security deposits for people who meet all types of homelessness (i.e., literally homeless, doubled-up and housing insecure).
4. Secure $1 million in yearly funds to maintain and expand doubled-up pilot program.
5. Cultivate a community-wide commitment to centralization.
   - Pilot centralized unit acquisition with at least five housing providers.
6. Create and fund a $200,000 landlord mitigation and incentives fund.
7. Recruit 250 landlords to landlord engagement program.
8. Reduce length of time between program enrollment and move in date.
9. Ensure ongoing funding of 2.5 million for eviction prevention and diversion for people experiencing homelessness and expand services for special populations such as Spanish speakers, criminal legal involved, families with children under five years of age, and others.

2   **Increase housing programs & solutions for residents experiencing homelessness.**

Strategy 4: Increase the number and percentage of PHA vouchers and housing units allocated to people experiencing homelessness

Action Steps & Metrics

1. Partner with the PHAs to set targets for housing people experiencing homelessness
2. Partner with PHAs to pursue 500 special purpose vouchers targeted towards the homeless population.
3. Ensure annual funding for security deposits and housing navigator positions connected to Madison Community Development Authority (CDA) and Dane County Housing Authority (DCHA).
4. Develop tangible connections to a centralized landlord engagement program, landlord mitigation fund and security deposit assistance.
5. Review and update tenant selection plans particularly for buildings with project-based vouchers and/or those funded by the Affordable Housing Development fund to be more
6. Increase PSH voucher utilization increases to at least 90%.
7. Work with CDA and DCHA to prioritize people experiencing homelessness for public housing units.

> **Public Housing Authorities in our community**
>
> Dane County Housing Authority serves low income families throughout Dane County.
>
> The Community Development Authority Housing Operations Division serves low income families in the City of Madison.

GOALS & STRATEGIES

3   Coordinate & strengthen the homeless response.

Strategy 1: Increase equitable access to shelter, housing and other services.

Action Steps & Metrics

1. Finalize and implement a new, equitable Coordinated Entry System (CES) assessment.
2. Monitor CES data quarterly and evaluate assessment and prioritization at least annually to ensure equity.
3. Achieve a 50% Increase in black households without children accessing permanent supportive housing.
4. Ensure that housing demographics match the homeless population demographics.
5. Decrease the average length of time people are homeless.
6. Create a housing quality improvement process for EHH and CoC- funded projects to include at least quarterly feedback sessions with tenants and program participants. Include compensations for feedback session participants.
7. Replicate and expand successful community-based resources hubs (similar to Sunshine Place and Dane County's Joining Forces for Families (JFF)) to expand access to services throughout the community. Expand to have at least 10 expanded resource hubs, including two at each of the forthcoming purpose-built shelters.
8. Ensure a sustainable county-wide housing navigation program and funding of $1.25 million.
9. Review and update case management system to align with best practices and written standards, and to include creative peer support leadership opportunities.

   Please see the next page for models to expand access.

3 Coordinate & strengthen the homeless response.

Strategy 1: Increase equitable access to shelter, housing and other services.

Models to Expand Access: Dane County's Joining Forces for Families & Sunshine Place

How can we expand access to services when our community is both urban and rural?
How do we ensure equitable access to services and resources

Many communities resolve these questions by createing one centralized access point and resource hub, although Dane County has seen great success in creating access to services and resources at multiple locations. To better serve the homeless population throughout the City of Madison and Dane County these models should be replicated.

1 Dane County Joining Forces for Families (JFF) has 17 neighborhood- and community-based offices throughout Madison & Dane County. JFF is "a broader community focused initiative that engages local partners to create decentralized, collaborative, and community-informed service platforms."(from the JFF webpage).

2 Sunshine Place, located in Sun Prairie, "provides comprehensive services that support essential needs through community engagement and partnerships." (from Sunshine Place webpage). They enhance their ability to provide resources to their neighbors by co-locating and partnering with 6 organizations, who provide on-site services.

Why this model works and should be expanded for the homeless population:

1. Individuals and families can access services & resources in the neighborhoods and communities where they live. This reduces the need for transportation to a central location likely in Madison.
2. Individuals and families have someone working with them on their individual needs and connects them to the resources the individual or families identify they need.
3. Individuals and families are connected to other services and resources faster because other services are co-located in the same office.
4. Organizations collaborate to assist individuals and families and have a deeper understanding of the needs in their community. Services can evolve based on those needs.
5. Co-located organizations share space, which enhances communication between organizations and reduces costs.

3 Coordinate & strengthen the homeless response.

Strategy 2: Continue improvements and redesign of the shelter system to be more housing focused.

Action Steps & Metrics

1. Review and revise shelter written standards to:
   a. Ensure that they are low barrier, person-centered and housing-focused;
   b. Ensure that all shelter policies and procedures align with written standards;
   c. Establish standards for shelter "caseloads" and staff to guest ratios and service provisions.
2. Improve shelter facilities and services by:
   a. Developing a shelter review process and providing technical assistance for improvement;
   b. Evaluating the family shelter system and capacity, and right-sizing to meet the actual need;
   c. Ensuring sufficient funding of shelter operations for adequate staffing and case management, including creative peer led case-management solutions;
   d. Exploring options for individuals frequently suspended from traditional shelters and motels, especially on extreme weather nights.
3. Build purpose-built shelters for men, and women and families, and ensure that the facilities serve as access hubs to a variety of services and supports.
4. Create a continued service and process improvement plan which includes at least quarterly focus groups with shelter guests. Include compensation for feedback session participants.
5. Create written standards, policies, and processes to address vehicular homelessness.
6. Create 500 new interim housing solutions such as motels, respite, behavioral health housing and other interim housing options.
7. Strengthen shelter connections to local agencies that support children including schools, childcare centers, health services.
8. Develop a centralized system to coordinate street outreach groups and unsheltered homeless programs.

3

Coordinate & strengthen the homeless response.

Strategy 3: Improve cross-sector partnerships, access and communications.

Action Steps & Metrics

1. Create coordinated plans with jails, treatment programs, foster care programs and group homes, and hospitals to reduce discharges to homelessness.
2. Execute at least two data sharing partnerships to better understand the homeless population across systems, including data sharing with education about new families with children under 5.
3. Create cross-sector education and training with health care, criminal legal, education, workforce development, etc. to improve cross-sector access, identify better opportunities for collaboration, and understand the homeless and cross-sector systems better.
4. Form cross-sector groups for homeless system of care providers to meet regularly with representatives from healthcare, education, and criminal legal systems to streamline goals, workflows and communication.

Strategy 4: Create culturally appropriate housing and service programs.

Action Steps & Metrics

1. Increase the number of staff that reflect the people they are serving.
2. At least 50% of all HSC agencies increase the number/percentage of BIPOC (Black, Indigenous, People of Color) staff hired and retained annually.
3. Make accessing shelter, housing and services feel comfortable for non-native English speakers and those who English is their second language.
4. Annual increase in reported comfort and satisfaction with shelter, housing and services.
5. Implement trauma-informed practices across 100% of HSC agencies providing housing and services.
6. Annual decrease in program participants self-report in trauma and frustration in accessing shelter, housing and services.

GOALS & STRATEGIES

<table>
<tr><td>**4**</td><td>**Increase and diversify funding to expand available resources**</td></tr>
</table>

Strategy 1: Raise $7.2 million for people experiencing homelessness.

Action Steps & Metrics

1. Partner with the City of Madison, Dane County and other municipalities to align funding for the strategic plan. Determine gaps and realignment as needed.
2. Create at least three new partnerships with health care to fund housing and services for people experiencing homelessness.
3. Create at least two new partnerships to provide housing and services for the criminal legal system involved population.
4. Create at least two new partnerships to provide housing and services for people living in doubled-up conditions.
5. Coordinate with the education sector to determine ongoing needs and goals for doubled-up families.
6. Advocacy at state and local level for additional funding for housing and services.
7. Explore if city and county tax levies can be directed towards housing and services for people experiencing homelessness..

    E.g. Work with City of Madison Room Tax Commission to annually utilize part of the Transition Occupancy Taxes (TOT) to fund housing and services to address homelessness.

Strategy 2: Diversify funding housing and services.

Action Steps & Metrics

1. Create a Funders Collaborative to Address Homelessness to include private funders and philanthropy.
    a. Develop membership of at least 10 funders;
    b. Align the goals and funding priorities of the Funders Collaborative to align with the strategic plan.
2. Create at least 2 new partnerships annually with the business sector.
3. Develop private sector fund to address homelessness.
4. Evaluate and expand funding for BIPOC-led agencies including BIPOC led and those that focus on marginalized populations.
5. Evaluate and expand funding for agencies and communities outside of the City of Madison to invest in local housing and services and services.

GOALS & STRATEGIES

5   Expand regional coordination

Strategy 1: Provide regular updates to the community on Strategic Plan progress.

Action Steps & Metrics

1. Create a communication plan to provide updates on the strategies and goals identified and distribute at least quarterly to the community including to homeless service providers, political leaders, business sector and others.
2. Provide annual presentations to the City Council and County Board on plan implementation. Publicize the event to media sources.
3. Develop an online community education program about housing and homeless to include insights from people of lived experience.

Strategy 2: Share decision-making power with those with lived experience.

Action Steps & Metrics

1. Ensure annual funding to sustain participation in the HSC's lived experience subcommittees, including the Dane County Youth Action Board (YAB) and Lived Experience Council (LEC), including $180,000 annual stipends.
2. Explore options to better utilize partnerships with people with lived experience in funding decisions and RFP development, program development, policy review, continuous quality improvement and performance evaluation activities.
3. Create and maintain a protocol that values feedback from those impacted by homelessness.
4. Uplift training opportunities by lived experience subcommittees of the CoC and use as recommended or required trainings in the community when appropriate.
5. Commit to engaging and inviting lived experience groups as resources and partners to our community.
6. Peer support training and funding to utilize lived experience of homelessness in creative ways around case management and housing navigation.

5

Expand regional coordination

Strategy 3: Maintain, strengthen, expand, and ensure ongoing capacity and infrastructure essential to operate the Dane County Continuum of Care, implement the Community Plan, and ensure other meaningful systems changes.

Action Steps & Metrics

1. Evaluate ongoing capacity needed to implement the community plan, coordinate it's completion, and report out on action steps and progress.
2. Evaluate the minimum supports needed to maintain the current and future needs of the CoC.
3. Advocate for sufficient funding of staff to coordinate the activities of the CoC in general.
4. Develop a process to engage the Homeless Services Consortium with policy makers to align funding decisions and allocations to the Community Plan and the needs of the CoC.

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Who worked in partnership with Homebase Team Members
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Appendix A: Glossary

Affordable Housing: Housing for the occupant(s) pay no more than 30 percent of their income for housing costs, including utilities.

Chronic Homelessness: People who have experienced homelessness for at least a year — or repeatedly — while struggling with a disabling condition such as a serious mental illness, substance use disorder, or physical disability.

Continuum of Care (CoC): A network of stakeholders that coordinates efforts to end homelessness locally and applies for HUD CoC funding through a consolidated application.

Coordinated Entry System (CES): A process that ensures that all people experiencing a housing crisis in a defined geographic area have fair and equal access, and are quickly identified, assessed for, referred and connected to housing and homeless assistance based on their needs and strengths, no matter where or when they first present for services.

Criminal Legal System: Intentionally replaces the term criminal justice system to describe policing, courts, and corrections in the United States.

Crisis Housing: Housing that provides a safe and adequate nighttime residence for homeless individuals and families during their transition to permanent housing. Shelter and bridge housing are types of crisis housing.

Diversion: A strategy for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

Doubled Up: A term used to describe individuals and families who are temporarily and unstably sharing the housing of other persons due to loss of housing or economic hardship. This includes those that are self-paying in hotels/motels or other daily rate housing without a lease.

Functional Zero: The point when a community's homeless system of care can prevent homelessness whenever possible and ensure that when homelessness does occur, it is rare, brief, and one-time.

Homeless Management Information System (HMIS): The data tracking system for client-level data on homelessness.

Homelessness: The state of people who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, exiting an institution where they temporarily resided, couch-surfing or living with friends or family. People who will lose their housing within 14 days or are fleeing from domestic violence, don't have a place to go, and don't have the resources to find a place to go are also considered homeless. This is the definition used in the strategic plan and to track data.

Homeless Services Consortium (HSC): The name of the Continuum of Care for Dane County made up of agencies, funders, advocates and people with lived experience of homelessness committed to preventing and ending homelessness.

Homeless System of Care: Another way of describing the Continuum of Care (CoC) and the broader network of partners who come together to support people experiencing homelessness or at risk of homelessness.

Housing First: A well-accepted, national, evidenced-based best practice that eliminates barriers to housing, ensuring individuals and families can exit homelessness as quickly as possible. Housing First is an approach to quickly and successfully connect households experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements.

Housing Locator: Assists families experiencing homelessness to identify and transition into a full range of permanent housing opportunities. Housing locators actively work to recruit and build relationships with private landlords to access available housing for families.

Housing Navigator: Assists people experiencing homelessness with knowledge of housing options, locations and availability, as well as the services available including health, mental health, benefits, employment, and transportation.

HUD: The U. S. Department of Housing and Urban Development, primary federal funder of homeless resources.

Interim Housing: Shorter-term crisis options for temporary accommodation to help unhoused people stabilize on the way to permanent housing. Interim housing can include emergency shelters, navigation centers, and transitional housing, among other housing types.

Landlord Incentive Programs: Programs that provide education and incentives to landlords to make it more likely they will rent to people experiencing homelessness and people with criminal records. They can provide funding to support risk mitigation (compensating landlords if tenants harm their premises) and financial incentives that make landlords more likely to rent to people transitioning out of homelessness and the criminal legal system.

Permanent Housing/Other Permanent Housing (OPH): Community-based housing without a designated length of stay where formerly homeless individuals and families live as independently as possible.

Permanent Supportive Housing (PSH): Programs providing permanent housing with supportive services (e.g., case management, health services, financial services), usually for chronically homeless people.

Point-In-Time Count (PIT): Annual sheltered and unsheltered count in January of all homeless persons in the area. It does not include households experiencing doubled up homelessness.

Public Housing Authority (PHA): A governmental body authorized to assist in the development and operation of housing for low-income housing. In Dane County there are three housing authorities: The Dane County Housing Authority (DCHA) provides affordable housing to low-income families in Dane County, the City of Madison Community Development Authority Housing Operations Division (CDA) provides housing for low-income families in Madison, and the DeForest Community Development Authority (CDA) for the village of DeForest.

Rapid Re-Housing (RRH): Provides rental housing subsidies and tailored supportive services for up to 24-months, with the goal of helping people to transition during that time period to more permanent housing.

Reentry: Refers to the process of a person returning to the community after incarceration in a jail or prison. Common considerations in ensuring successful reentry include connections to community and access to housing, healthcare, employment and income.

Stella: Household-level Homeless Management Information System (HMIS) data is processed through HUD's Homelessness Data Exchange (HDX) 2.0 system called Stella to measure and track system functionality. System performance can be tracked using a feature called Stella P, and system modeling can be performed using a feature called Stella M.

Subsidy (or Housing Subsidy): Subsidized housing is government sponsored economic assistance aimed at alleviating housing costs and expenses for individuals and families with low to moderate incomes.

Supportive Services: Includes assistance applying for benefits, mental health and substance use services, outpatient health services, information and referral services, child care, education, life skills training, employment assistance and job training, housing search and counseling services, legal services, outreach services, transportation, food assistance, risk assessment and safety planning (particularly for individuals and families experiencing domestic violence), and case management services such as counseling, finding and coordinating services, and monitoring and evaluating progress in a program.

Transitional Housing (TH): Provides temporary housing accommodations and supportive services. While many households benefit most from direct connections to permanent housing programs such as RRH or PSH (which are often more cost-effective over the long term), transitional housing can also be an effective support in the intermediary. Certain subpopulations, such as people fleeing domestic violence and transition age youth, can meaningfully benefit from a transitional housing environment.

Trauma-Informed Services: Services that recognize that most people have a history of trauma, are attuned to symptoms of trauma, and acknowledge the role that trauma may play in an individual's life.

Unaccompanied Youth: Youth (17 and under) experiencing homelessness while not in the physical custody of a parent or legal guardian, including runaway youth.

Underserved Households: The total number of households enrolled in the homeless system of care minus those who have exited the system or entered permanent housing. This does not include households experiencing homelessness who are not enrolled in the homeless system of care.

Unsheltered Homelessness: The state of people who spend most nights in places not meant to be used as a regular sleeping place for human beings, such as the streets, makeshift shelters (tents, boxes) or vehicles.

VI-SPDAT: A pre-screening or triage tool that is designed to be used by all providers in a community to quickly and uniformly assess the health and social needs of people experiencing homelessness and match them with the most appropriate support and housing interventions that are available.

Voucher (or Housing Voucher): A voucher or housing voucher that can be spent on rented housing, such as Section 8 public housing in the United States, to help low-income individuals and families secure housing.

Appendix B: 2022 Community Plan Accomplishments

Safe & Sound: A Community Plan to Prevent and End Homelessness in Dane County, WI Accomplishments

Background

Communities across the country develop plans to prevent and end homelessness. Development of these plans include the voice of service providers, funders, elected officials, advocates, people with lived experience and community members. These plans must be updated regularly as goals are met and community conditions change.

In 2022, our community embarked on the process to develop a new Community Plan to Prevent and End Homelessness. This document serves as a summary of accomplishments from the current Community Plan.

Accomplishments

The Community Plan to Prevent and End Homelessness is focused on four goals:
- Prevent Homelessness in Dane County
- Support Persons and Families Experiencing Homelessness
- End Homelessness in Dane County
- Advocate and Collaborate with Local, State, and National Partners

Each of these goals contain several objectives and strategies. Our community has made significant progress in meeting our goals to prevent and end homelessness. Many of the accomplishments overlap in the four goals above. Below they are divided into four overarching categories: Voice & Education, Program Improvements/Developments, Collaborations and Advocacy.

Voice and Education
- The Lived Experience Committee and Youth Action Board were both developed and formalized into the HSC Structure. These groups bring forward the voices of people with lived experience of homelessness.
- In 2017, Make Room for Youth hosted a forum for providers regarding the needs of unaccompanied youth.
- In 2018, the HSC hosted a Youth Summit where participants identified barriers and solutions to improve access to services.

- Trainings provided on: Fair Housing, Harm Reduction, Diversion, Housing First, Motivational Interviewing, HUD's Equal Access Law, Early Childhood & Homelessness.
- Affordable Housing Action Alliance (AHAA) provided information on Section 8 discrimination.
- Annually, review and present on System Performance Measures and Point in Time.
- Providers of public benefits give training to HSC Members. The Mainstream Resources Checklist was updated and a glossary was developed.
- Workforce Development Board presented on their services.
- In 2020, mapped the current services and resources provided by mainstream providers, faith-based and grassroots organizations.

Program Improvements/Developments
- Dane County requires eviction reports from funded-agencies to reflect on current practices and promote best practices.
- City of Madison and United Way worked to bring developers and service providers together to build relationships in order to better serve households.
- Housing Navigation services are funded and have seen increases in funding over the years, including a focus on serving youth ages 18-24.
- Emergency shelters evaluated and revised policies regarding suspensions. They developed policies to lower barriers to shelter entry.
- Agencies represented at Core Committee have language access plans in place.
- Healing House opened in 2019 to serve households with children experiencing homelessness who are discharged from the hospital and need space to recuperate.
- Diversion formally implemented at The Salvation Army single women and family shelter. Information on households served is entered into HMIS.
- In 2021, our community was selected for the Youth Homelessness Demonstration Program (YHDP) and was awarded $2,447,820 for two years.
- Two Rapid Rehousing programs for households with children focus on those headed by youth ages 18-24.
- Faith-based and grassroots organizations provide an increase in outreach services and connection to Coordinated Entry.
- The Road Home partnered with a congregation to start a new housing program, The Heart Room, to serve households who are doubled-up.
- Increase use of the Homeless Management Information System (HMIS).
- The Beacon opened in October 2017 to serve as a Day Resource Center.
- Development and expansion of Comprehensive Community Services (CCS) has allowed opportunities for housing case managers and behavioral health providers to work together to support clients.
- Agencies are hiring peer support specialists.
- Increased use of Coordinated Entry.
- Increased Rapid Rehousing slots
- Rethke Terrace developed, providing an additional 60 Permanent Supportive Housing units for single adults.
- Tree Lane Apartments developed, providing an additional 40 units of Permanent Supportive Housing for households with children.

- New housing developments have units set aside for households experiencing homelessness.
- Established quality by-name lists for Veterans, people experiencing chronic homelessness and households with children.
- Increased use of Tenant Based Rental Assistance (TBRA) for households experiencing homelessness.
- Affordable housing funds for both the City and the County have increased.
- Shelter and street outreach providers complete VI-SPDATs.
- Written Standards: Added or enhanced sections on Prevention, Diversion, and Street Outreach.

Collaborations

- Dane County Housing and Health Initiative (H2) worked to develop collaboration between the two sectors.
- CoC Coordinator attends meetings of Employment & Training Network to discuss ways to improve access and services for people experiencing homelessness.
- Relationships developed with Dane County Jail re-entry staff to assist people experiencing homelessness and incarcerated connect to resources. The Department of Corrections received introductory information on Coordinated Entry and reach out with questions about homeless services. JustDane developed a toll-free number and coordinates intake calls with jail staff.
- Developed strong relationships with Public Health and healthcare providers to connect people experiencing homelessness to Isolation & Quarantine facility during the COVID-19 pandemic.
- The Homeless Education Network (HEN) meets on a quarterly basis and invites members of the HSC to present and participate in discussions.
- Street outreach workers meet on a weekly basis to collaborate and problem solve.
- Dane County Emergency Management brings together stakeholders to discuss potential needs during periods of extreme weather.

Advocacy

- The HSC developed and formalized an Education & Advocacy Committee.
- The HSC consistently advocates for increased access to transportation options.
- Legislation passed to allow youth to work without obtaining a work permit and allow 17 year olds to access adult emergency shelter.
- Changes were made to FAFSA to make it easier for youth to apply for financial assistance.
- Advocated at State level for creation of Landlord Mitigation Fund.
- The HSC is a member of the Wisconsin Housing First Coalition and two HSC members serve on its Board of Directors.
- The CoC Coordinator holds a seat on the Wisconsin Interagency Council on Homelessness.

Other notable accomplishments

As the homelessness landscape changed over the years, the community responded in ways to meet the needs. These responses were not always strategies laid out in the Plan, and many, are responses to the COVID-19 pandemic.

- Distribution of large sums of Prevention funds as response to COVID-19.
- Vulnerable Population Hotels were set up to shelter older adults and those with specific medical conditions that made them vulnerable to serious illness due to COVID-19. Hotel sheltering was provided for just over two years and included meals, security and support services.
- A hotel was used for Isolation & Quarantine during the COVID-19 pandemic. Providers conducted symptom screening and referred people to the facility. This facility has remained in operation for over two years and decreased the spread of disease among people experiencing homelessness.
- An additional family shelter began operation in response to COVID-19.
- The City developed and funded an urban campground as a response to unsheltered homelessness (Dairy Drive). Funding allowed for robust supportive services.
- Political will and community buy-in to construct a purpose built men's shelter.
- Dane County created a new position to focus on the needs of households experiencing homelessness in doubled-up situations or self-paying in hotels.
- Madison/Dane CoC was selected by the Department of Housing and Urban Development for the Youth Homelessness Demonstration Program. The community was awarded just under $2.5 million to address homelessness among youth and young adults.
- Creation of the Youth Action Board and the Lived Experience Committee.
- The HSC Board of Directors created the Doubled-Up Work Group to focus on the needs of this population.
- Both the City and County increased staffing in homelessness and housing.
- Increased community partnerships and service coordination.
- JustDane opened Healing House in 2019 to provide medical respite shelter for households with children. The Road Home provides support services to connect people to housing.
- In affordable housing developments, the City & County require use of Coordinated Entry to fill some units and partnerships to provide support services to people experiencing homelessness.
- Increased collaboration with Community Development Authority (CDA) and Dane County Housing Authority (DCHA) through administration of the Mainstream Voucher and Emergency Housing Voucher programs.
- Completion of extensive Gaps Analysis.
- Transition of Homeless Management Information System (HMIS) to Clarity resulting in an improved experience for users.
- The Salvation Army Family Shelter moved to a new location creating a better experience for guests and staff.
- Hotels to Housing is a Rapid Rehousing program developed to assist households who are more vulnerable to COVID move into and maintain permanent housing.
- Increase in Rapid Rehousing and Street Outreach services.
- Increased staffing at the Men's Shelter.
- Dane County created the Housing Access & Affordability Departme.nt
- The Early Childhood Homeless Workgroup began bringing together childcare and homeless services providers to address the needs of families experiencing homelessness.

Appendix C: Information On The Dane County Regional Housing Strategy

The [Regional Housing Strategy](#) (RHS) was launched in 2022 with the purpose to address Dane County's extreme housing shortage by building on local and regional efforts, celebrating the unique character of our communities, assessing ongoing challenges, identifying and strengthening regional collaboration and partnerships, creating a vision for the future of housing in Dane County for the next 10-20 years, and opening doors for our Dane County workforce that is typically below 50% of the area median income–school teachers, entry-level professionals, public safety professionals, maintenance and service employees–as well as families with children, residents of color, seniors, and those with disabilities. To assess the housing needs within our region, the RHS has undertaken a study examining housing barriers in Dane County. This study is anticipated to be available in 2024 and will inform a regional implementation strategy for the forthcoming five years.

The RHS has gathered historical data in areas surrounding affordable housing issues. This analysis of housing affordability, racial disparities, housing stock, and market trends can give us a better understanding of why we are facing a housing crisis in our community. The current status of affordable housing is best defined by looking at the cost burden for those paying more than 30% of their income towards rent. As discussed at the Regional Housing Strategy meeting in August 2023, there is a rental housing supply gap in our community that puts a 'Big Squeeze' on unit availability for renters in all income brackets. There is a need to produce significant housing units to keep up with demand, including those for senior households.

Many of our strategic plan goals and action items align with housing priorities already identified by the Housing Advisory Committee during the RHS planning process. We believe that our two plans will be a compliment to one another and can work in conjunction towards building better solutions to the housing crisis in our community.

Appendix D: Dane County Housing Needs Estimates

To estimate Dane County's housing needs, a model was designed to quantify the number of units needed to serve all households entering the homeless system of care. In order to accommodate the current population experiencing homelessness, the annual unmet need, and the need not reflected in HMIS, the model shows that **an additional 1,394 permanent housing units are needed in Dane County**. The model uses 2023 Stella P data and 2022 Housing Inventory Count Data. It was created in Stella M and the CoC lead can access it for review or to change information.

METHODOLOGY

Definitions

This model uses the concept of "functional zero" to operationalize need. Functional zero calculations for this analysis were based on criteria that annual outflow (people housed) needs to be greater than or equal to annual inflow (people becoming homeless).

Permanent housing resources (or housing resources) in this recommendation can be created through new construction, rehabilitation or accessing existing housing stock.

Assumptions

The following assumptions were made when developing this model:

- Inflow will remain consistent over time.
- Households in non-HMIS covered agencies access the system in the same way as households in HMIS covered agencies. (The estimated units in this model include HMIS, non-HMIS, and VSP units in the community).
- For the purposes of creating a streamlined needs estimate, household types (Child Only, Adults with Children, and Adult Only households) were not analyzed separately and thus are assumed to have needs proportional to their participation in the system.
- If a household returns to homelessness or is active in the system for more than one reporting year, in an optimal system they will receive a higher level of care.
- Rapid rehousing will serve a household for up to two years, and permanent supportive housing will continue to serve a household for an average of 10.9 years.
- Temporary funding for 431 permanent housing units in the community may end, and this model assumes it will. This includes:
    - 208 Hotels to Housing units (classified as RRH)
    - 15 RRH units
    - 114 Emergency Housing Vouchers (classified as OPH)
    - 94 PSH units

Notes
- There will be an initial period of intense investment followed by a softening and sustaining period. No housing or shelter units can be decreased until previous targets have been met.
- The plan calls for new permanent supportive housing that will need to be maintained post-plan, but after the plan period, turnover in permanent supportive housing will serve all new people becoming homeless who need permanent supportive housing.
- By implementing diversion and ramping up prevention, potentially less units will be needed.

CURRENT SYSTEM PERFOMANCE

The first step in modeling housing needs is determining unmet need in the current system. Key features of current system performance are below (Table 1).

Total Underserved	1,165	This is the number of households currently underserved. This is calculated by counting the number of households enrolled in the homeless system of care and subtracting those that have exited or entered permanent housing. It does not include households who are not enrolled in the system.
Annual Inflow	1,461	This model assumes inflow will continue to remain the same. (Ideally, inflow will decrease as system improvements are made).
Total unserved population with unit loss and no additional changes made	1,340	To reach Functional Zero, this average number needs to match the inflow number.
Annual Unmet Need	121	Annual inflow minus annual outflow. With no action, this is the projected addition to the population each year.

Table 1: Current System Performance.

There are currently 1,165 underserved households in the system, meaning the system needs to grow enough to house **1,165 more households** than it normally does.

1,461 households enter the system every year, and 1,340 exit it. This leaves an annual unmet need of 121 households who will be added to the homeless population each year. To reach Functional Zero, in addition to housing the 1,165 currently unserved households, the system must house **121 more households each year.**

REACHING FUNCTIONAL ZERO BY 2028

The model uses baseline 2023 Stella P data to create a model for achieving Functional Zero five years later. The table and graph below show in blue the estimated population unserved by the system each year until achieving Functional Zero in 2028. Table 2 and Figure 1 below show in blue the estimated population unserved by the system each year until achieving Functional Zero in 2028

In contrast, if the system were to make no changes to operation or housing capacity, unmet need would grow. This is shown below in orange, where annual unmet need is added each year to the number of households currently unserved. This "do nothing more" model would result in 1,770 unserved households by 2028.

Based on the average length of time households in the system stay in RRH and PSH+OPH, loss of these 223 RRH units and 208 PSH+OPH units would result in **276 additional unserved households each year.** Shown below in green is how unmet need would increase if the system were to make no changes to operation or housing capacity if these units are lost in 2024. This "unit loss" model would result in 2,046 unserved households by 2028.

	2023	2024	2025	2026	2027	2028
Proposed 5-year model for reaching Functional Zero	1,165	642	376	237	167	0
Total unserved population with no additional changes made	1,165	1,286	1,407	1,528	1,649	1,770
Total unserved population with unit loss and no additional changes made	1,165	1,286	1,683	1,804	1,925	2,046

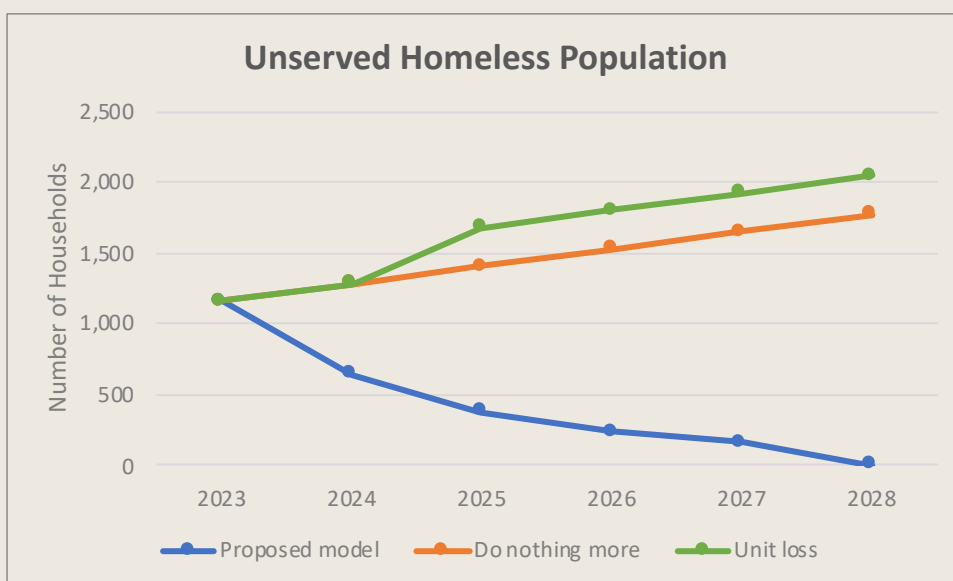Table 2: Models estimating unserved households from 2024-2028.

Figure 1: Models estimating unserved households from 2024-2028.

UNITS NEEDED

To achieve Functional Zero if these units are lost, significant changes to housing capacity would need to occur. The graph below shows the additional number of additional units of each type needed.

After loss of RRH units, the system will have 55 RRH units, and it will need a maximum of 1,076 units. This means **1,021 additional RRH units** will be needed (a 1,856% increase).

After loss of PSH+OPH units, the system will have 1,757 units, and it will need a maximum of 2,130 units. This means **373 additional PSH+OPH units** will be needed (a 21% increase). The number of additional RRH and PSH+OPH units needed are shown below in Figure 2.
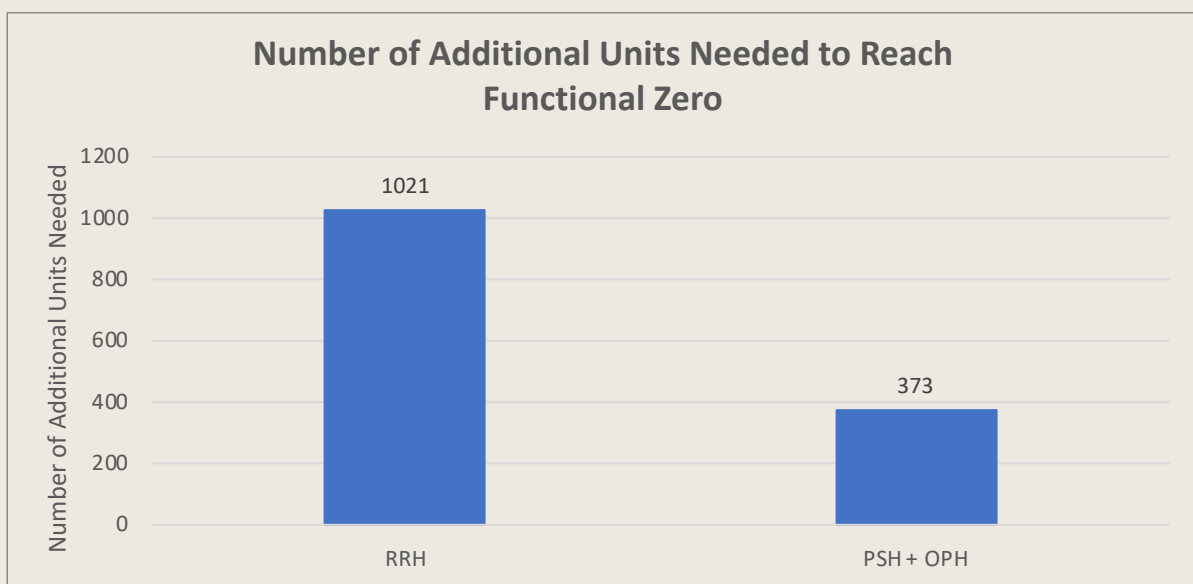

Figure 2: Number of additional housing units needed.

This model shows the impact that losing units has on the system: if 431 permanent housing units are lost, it isn't simply that 431 more units need to be added. Once units are lost, inflow into the system continues and the unserved population grows. This means that the additional units needed far surpasses the initial number of units lost. In this model, **an additional 1,394 permanent housing units will needed after the loss of these 431 units.** This illustrates the importance of maintaining current units and avoiding unit loss.