

## **I. Introduction**

- a. Background (Opened in 2015) 80 beds for men/ 20 beds for women- 7 family rooms
- b. Shelter information (Day shelter 8-5:30 pm and overnight from 6:30pm-7am)
- c. Resources provided: lunch, showers and restrooms, laundry facilities, computers and telephone access, case management.
- d. Resources provided by outside agencies: medical care provided by Sanford Nurse Practitioners, Avera ER Nurses and USD Coyote Clinic residents and doctors, addiction resources, veterans outreach services, mental health resources through Southeastern Behavioral Health, Medicaid and Medicare information, mentors and spiritual guidance.

## **II. First Question – Policy Recommendations that guides future city involvement with shelters to address capacity needs:**

- a. BDHH has been over capacity the entire year. Winter months 80%-90% (That's 80- 90 people sleeping on a mat on the floor during the winter months.)
- b. Staffing is challenging and extreme over capacity led us to request a Maximum Capacity declaration from the Fire Marshall, Dean Lanier. After a couple of visits it was determined that 155 individuals is our maximum capacity.
- c. We are requesting that the city come up with a guaranteed referral system before this winter, for people who arrive seeking shelter after we've met our maximum capacity of 155 guests. Where are we going to refer people who show up this winter when it's 10 above 10 below zero? There needs to be guaranteed placement for people needing shelter after hours.
- d. Staff who are told to turn people away will quit.
- e. I would like to see the City of Sioux Falls, Minnehaha County Human Services and the Helpline Center collaborate with the shelters to find a solution to refer people who cannot stay at a shelter because of health reasons, overcapacity and trespassing due to violence and/or mental health challenges when they are a danger to themselves and others.

## **III. Second question- Recommend a policy that guides strategies for how the city engages with homeless individuals on the street.**

- a. Housing First. Upwards of 80% of our guests at Bishop Dudley House fall into the following categories:
  - i. Chronically homeless
  - ii. Chronically addicted to alcohol or drugs or both
  - iii. People with moderate to severe mental health challenges
  - iv. Justice involved individuals, felons and sex offenders
- b. Having more efficiency apartments, providing the basic housing needs, for people who have little to no income to get them housed and off the streets.
- c. City ordinance and an educational campaign for citizens and out of town visitors to help prevent panhandling. Most panhandlers are not shelter guests.
- d. Giving law enforcement and shelter staff the tools to remove people who are loitering on neighboring or shelter property who refuse to come inside or leave the premises.

**IV. Third question- Review current strategies and identify opportunities for housing homeless families.**

- a. Bishop Dudley House has 7 family rooms which are currently full
- b. In the past 2 months, BDHH case managers have turned away more than 30 homeless families because our family rooms are full
- c. Utilization of the current Children's Inn facility that will be vacated when Children's Inn moves to the Empower Campus
- d. More larger housing units that are affordable for large families, 6-10 family members or loosen the city restrictions of 2 persons per bedroom.
- e. Incentivize daycare providers and daycare centers so families have access to affordable childcare so parents can work to support their families.

**V. Fourth question- Review current housing needs and recommend a strategy to expand low-income housing.**

- a. More housing modeled after the Safe Home that houses more than chronically addicted people.
- b. A Safe Home model for people who have mental health challenges who need daily case management.
- c. A Safe Home model that is placed in a part of the city that allows justice involved individuals such as felons and sex offenders.
- d. Work with property developers through financial and tax incentives to build income-based housing for low income, disabled and lower functioning individuals.
- e. The most vulnerable people in our community are the most likely to struggle with homelessness.