Public Feedback on Draft Task Force Recommendations

The two public input sessions were held on January 21, 2026 offered a candid snapshot of community hopes, concerns, and practical questions as the Task Force moves toward a final strategic vision. The conversations spanned updates on progress, reflections on history, assessments of capacity, and a shared curiosity about how best to coordinate partners, resources, and services to serve people experiencing homelessness.

Session purpose and tone

- The gatherings were framed as opportunities to share an update, recount the Task Force's history, outline recommendations, and solicit feedback. The overarching aim was to illuminate the path forward while inviting direct questions and practical input from attendees.
- The atmosphere reflected a mix of urgency and constructive curiosity: participants sought concrete answers about capacity, care, and collaboration, as well as ideas for innovation and better alignment among agencies, advocates, and residents.

Capacity, shelter, and housing needs

- There was a strong focus on bed capacity and how it maps to real needs. Questions centered on whether the current bed count—illustrated by discussions around a combined total of 165 beds—adequately serves the current population, as well as isolated individuals who require different levels of accommodation.
- Several lines of inquiry highlighted gaps between shelter capacity and people's lived realities. Anecdotes about sleeping in cars or camping near familiar places underscored the absence of stable, safe options for

immediate nights' shelter and long-term progression toward housing.

- The conversation touched on more flexible, smaller-scale housing models as complements to traditional shelters. Ideas included options akin to PadSplit or other affordable, modular approaches that could help bridge the gap between transient stays and stable housing while addressing safety and dignity.

Integrated care and services

- Integrated care emerged as a focal point for whether there is enough capacity to meet varying levels of need. Questions asked how the integrated care team is structured, who receives services, and how capacity will scale to serve all who require higher-level support.
- The coordination of medical and supportive services was discussed in the context of existing facilities and partnerships. In particular, the role of available beds for triage and respite was raised as a way to ensure that those with medical or complex needs receive timely attention without bottlenecks.
- The potential involvement of health systems and hospitals was a recurring theme. The value placed on cost and time savings—realized through integrated planning and coordinated care—was acknowledged as part of a sustainable path forward.

Partners, governance, and operations

- Attendees emphasized the importance of clearly defined partnerships and practical governance. Questions focused on who will operate the consolidated shelter and how to embed a robust, evidence-based approach into daily practice.
- The role of advisory structures—sounding boards and working groups—was seen as essential for maintaining accountability, capturing diverse perspectives, and ensuring that recommendations are translated into action with appropriate prioritization and funding.
- The broader ecosystem—downtown service access, transportation, and alignment with existing shelters and emergency services—was highlighted as a critical piece of the operational puzzle. Ensuring seamless client experience across sites and streams of care was identified as a priority.

Public safety, health, and funding mechanisms

- The interaction between public health, safety, and shelter funding drew attention. Questions about funding sources and governance models pointed to a need for clarity on whether funding should be embedded within county, city, or jointly administered structures.
- Education and advocacy for public leaders and staff surfaced as a practical lever. Participants underscored the necessity of educating local officials about development processes, zoning considerations, and the realities of service delivery to reduce stigma and build informed support.
- Philanthropy, business engagement, and community organizations were seen as valuable partners in expanding the resource base. There was interest in leveraging philanthropy and private-sector involvement to complement public funding and scale innovative approaches.

Communications, stigma, and community storytelling

- A recurring strand was the stigma surrounding homelessness and the opportunity to counter it through strategic communications. Participants stressed the importance of storytelling—sharing stories of impact, progress, and human outcomes to gain broad stakeholder agreement and public understanding.
- The idea of a practical communications toolkit for elected officials and public servants was proposed to support consistent messaging, education, and outreach. This toolkit would help translate complex plans into accessible, action-oriented information for communities and stakeholders.

Citizen engagement and ongoing collaboration

- The input underscored a desire for continuous, meaningful citizen involvement. Attendees asked what people can do next to advance the strategic directions, including showing up to meetings and advocating for integrated, solutions-oriented approaches rather than piecemeal steps.
- The notion of regional cooperation—extending collaboration beyond city boundaries into county and neighboring jurisdictions—was highlighted. There was a sense that homelessness is a regional challenge that benefits from shared planning, benchmarking against peer counties, and coordinated implementation.
- Joint planning and implementation were seen as essential ongoing processes rather than one-off efforts. Attendees urged that implementation teams, leadership oversight, and clear cadence for updates be established to sustain momentum and transparency.

Path forward: themes for action

- Capacity and service design: Revisit bed configuration by gender and status, explore gaps in current capacity, and validate whether 165 beds meet projected needs. Consider integrating flexible housing options to fill transitional gaps and increase housing stability.
- Integrated care implementation: Solidify how and where integrated care teams operate, confirm the share of the population they will serve, and formalize partnerships with health systems to optimize triage, respite, and ongoing care.
- Governance and accountability: A clear operational framework with defined operator roles has been established with an advisory council, working groups, and a transparent funding prioritization process. The recommendation funnel and a practical decision-making matrix with measurable milestones is a good start.
- Communications and public engagement: Develop a compelling, stigma-reducing communications plan, including stories of impact and a public-facing dashboard or periodic reports. Create a toolkit for elected officials to support informed policy and community engagement.
- Education and zoning: Equip local officials and public servants with the knowledge to navigate development, housing, and zoning processes. Promote regional collaboration and cross-jurisdiction training where appropriate.
- Transportation and access: Integrate transportation planning into shelter and service delivery to ensure accessible access to downtown services and partner facilities.
- Funding and partnerships: Expand funding avenues through philanthropy, private sector partnerships, and regional collaborations. Clarify funding roles within county and city structures to ensure stability and accountability.
- Metrics and accountability: Define concrete success metrics (e.g., housing placement within 30 days, housing retention, utilization of integrated care, transportation access, and reductions in unsheltered nights) and establish a transparent reporting mechanism.

In summary, the sessions reinforced a shared commitment to a proactive, collaborative, and humane approach to addressing homelessness. They illuminated critical decisions about capacity, care, governance, and community engagement, while stressing the need for clearer execution plans, strategic partnerships, and transparent communication. As the task force moves toward the final strategic vision, the emphasis will be on translating these insights into concrete, prioritized actions with accountable leadership, realistic timelines, and measurable outcomes that reflect the community's values and aspirations.