

Homeless Services Gaps Analysis

of

Key West and Monroe County

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Presentation of Findings and Recommendations

to the

City of Key West

by

Robert G. Marbut Jr., Ph.D.

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Written Final Report - - July 29, 2013
City Commission Presentation - - August 6, 2013

Prepared by Robert G. Marbut Jr., Ph.D.

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Executive Summary

The City of Key West tasked Marbut Consulting with developing recommendations for reducing street-level homelessness in the Keys by suggesting more effective methods for helping chronically homeless individuals and by suggesting ways to diminish the perception of the Keys as an ideal “homeless destination.”

In order to develop practical recommendations, Dr. Marbut inventoried and reviewed homeless services throughout Key West, examined Point-in-Time Count reports, analyzed statistics from local agencies, conducted interviews with homeless individuals, met with stakeholders and made street-level observations including “becoming homeless” in Key West. Dr. Marbut evaluated the current homeless operations within Key West using national best practices and the *Seven Guiding Principles of Homeless Transformation* as the key measuring tools. Marbut then conducted a needs assessment and gaps analysis between existing inventory and identified needs, including the types of services (qualitative) and capacity of services (quantitative) needed in Key West. Dr. Marbut started his research on May 1, 2013 and finalized his written report on July 29, 2013. He then made a presentation of his recommendations to the City Commission on August 6, 2013.

“Destination Homelessness” is the most unique and challenging feature of homelessness in Key West. No other community in the USA has more non-native homeless individuals than the Keys. Between 97.7% and 99.4% of the homeless are from outside of Monroe County. Interconnected with “destination homelessness” is the staggeringly high percent of chronic and super-chronic homeless individuals living in Key West. Key West has 54.0% homeless who have been actively homeless for 5 years or more and 25.7% have been actively homeless for 10 years or more. Additionally, Key West has the highest percent of unsheltered homeless individuals in the USA, conservatively calculated as 5.8%. Because of its weather and a culture of enablement, the issue of homelessness has become an urgent problem that must be proactively addressed.

Dr. Marbut recommends that the entire Key West community change from a “culture of enablement” to a “culture of engagement.” Providing “street-level” services and feeding, although well-intentioned and good-hearted, “enables” homeless individuals rather than “engages” homelessness. Providing services in the parks, at street corners, at beaches and behind restaurants/bars acts to exacerbate and promote homelessness, thus actually increasing the number of homeless individuals. The community must channel its good-intentions into an integrated system that engages homeless individuals into a rigorous and centralized case management system. Additionally, Dr. Marbut recommends the creation of a 24/7 mini homeless transformational center in order to dramatically improve the effectiveness and efficiency of service delivery by co-locating and integrating homeless services at one location.

If the Keys keep doing the same activities in the same ways, chronic homelessness will actually dramatically increase. To prevent increases, there needs to be an across-the-board change in “thinking” and a change in “doing.”

Project Scope of Work

Dr. Marbut was tasked with presenting findings on how to more effectively help chronic homeless individuals in the Lower Keys and how to discourage “destination homelessness” with the hope of reducing the overall street-level homelessness in Key West and the Lower Keys. After two pro-bono site visits to Key West by Dr. Robert G. Marbut Jr. in 2011 (including a widely attended community forum hosted by Mayor Cates and SHAL on September 23, 2011), followed then by several Key West delegation site visits to Pinellas County, Robert Marbut was formally hired on May 1, 2013 by the City of Key West.

Phase 1 - Field Observations (Being Homeless in Key West):

One of the most important fact-finding techniques is to observe homelessness from the point of view of a homeless person rather than from an agency and/or government perspective. If one only observes homelessness from a service-provider perspective, he or she will only develop agency-centric solutions. Therefore, Dr. Marbut “became homeless” at the street-level in Key West.

Phase 2 - Inventory of Services:

To develop practical recommendations it is critical to have accurate information about the types and quantities of services being provided throughout the area. Phase 2 was an in-person inventory and review by Dr. Marbut of homeless services throughout the Lower Keys. Because it is very common to have agencies operate differently during nights, weekends and holidays than it does during the “traditional work week,” site visits were conducted at different times of the week. These site visits were performed throughout the 168-hour weekly cycle of service with “formal” site visits conducted Monday through Friday, 8:00 am through 5:00 pm, and “informal” visits conducted at night, during weekends and holidays. Additionally, because of prior *pro-bono* trips to the Keys, seasonal observations were also made. See Exhibit 1 for a listing of programs and agencies visited. All of these activities were conducted by Dr. Marbut in person.

Phase 3 - Needs Assessment Study:

Dr. Marbut conducted a “needs assessment” of types of services (qualitative) and capacity of services (quantitative) needed in the Keys. This required street-level observations and analysis of Point-in-Time Counts (PITCs), Keys Overnight Temporary Shelter (KOTS) reports, Stock Island Detention Center (Jail) reports, agency reports and other data.

Phase 4 - Gaps Analysis (Situational Analysis):

Dr. Marbut then conducted a gaps analysis of services between existing inventory and identified needs. Phases 3 and 4 were conducted simultaneously because of the inherent interconnectivity of the underlying issues between needs assessment and gaps analysis. Research and assessment was done on “types” of services (qualitative) and “capacity” of services (quantitative) needed in the Lower Keys.

Phase 5 - Presentation of Findings:

Dr. Marbut evaluated the current homeless operations within Key West using national best practices and the *Seven Guiding Principles of Homeless Transformation* as the key measuring tools [see Exhibit 2 on Pages 23-24 to review the *Seven Guiding Principles of Homeless Transformation*]. Based on field observations, the inventory of services, the needs assessment study, gaps analysis and national best practices, Marbut presented his findings in this written report on July 29, 2013 followed by a presentation to the City Commission on August 6, 2013.

Notes About Scope of Work:

- This proposal was for the “study” phase only and did not include any services for design, implementation of findings, operational activities nor detailed budget development. See Pages 13 and 16 for more information on budgeting.

Initial Observations

- “Destination Homelessness” is the most unique and challenging feature of homelessness in the Keys. No other community in the USA has more non-native homeless individuals than Key West. Between 97.7% and 99.4% of homeless individuals are from outside of Monroe County.
- Interconnected with “destination homelessness” is the staggeringly high percent of chronic and super-chronic homeless individuals living in Key West. Nationwide, using HUD’s definition (eg 1 year or more on the street or 4 shelter stays in the last 3 years), chronic homelessness averages between 16-21%. Yet, according to Monroe County Jail data, Key West has 54.0% homeless who have been actively homeless for 5 years or more and 25.7% have been actively homeless for 10 years or more. Therefore, using the Jail data, Key West has a higher percent of 10+ years homeless than an average city has for 1+ years of homeless. The current KOTS data does not go back beyond 3 years, so this information cannot be cross-validated on a 10+ years basis (the 3 years KOTS data does not contradict this finding).
- It should be remembered that it is the weather, not programming services, that draws homeless individuals to the Keys. Communities with beaches, palm trees and golf courses will always attract homeless individuals because of the nice climate. Additionally, the word around the USA is the Keys have great weather and a homeless individual can always get free food, free alcohol, cash handouts and sleep on a beach.
- Exacerbating the draw of the weather, is the fact that Key West as a community enables homelessness rather than engages homeless individuals. Street feeding and other street service efforts (eg distribution of clothing, backpacks and blankets), although well-intentioned and good-hearted, are very enabling and do not engage homeless individuals into service programming. Street feeding and services in parks, at beaches, at street corners and under bridges when not aligned with transformational services actually exacerbates homelessness and increases the number of homeless individuals on the street. There is an excessive amount of one-off street feeding efforts in Key West. Additionally, alcoholic drinks are openly given out for free to homeless individuals on the street in Key West. This culture of enablement needs to change to a culture of engagement.
- Key West has great raw data that is more robust and useful than most cities. The Jail has kept outstanding records of anyone homeless who has been booked 2 or more times over the last 10 years. Additionally, KOTS has tracked every intake over the last 3 years.

All total, the data set provided by the Jail included 5,360 data points and KOTS provided 11,563 data points (one for each intake), for a total of 16,923 data points (records). What is really amazing about this data set is each data point has a full name associated with the record. This means one does not have to guess about statistics, but instead can cross

reference the data by name. Therefore, this data is HIGHLY accurate and is way more useful than Point-in-Time Counts which are merely estimates on one night of the year and are known to HUD to be highly inaccurate.

Remember that the following is longitudinal and not a one-time snapshot. So best to think of this as a “universe” of folks. The big take-a-ways are:

- + There are 229 actively homeless individuals who have regularly been in jail, but who have never stayed at KOTS (Jail Only) . . . at the time of the report 79 individuals were in custody and the homeless subset of the jail population averages around 20%.
- + There are 265 actively homeless individuals who have regularly been in jail who have also regularly stayed at KOTS (Jail and KOTS).
- + There are 928 actively homeless individuals who have stayed at KOTS 2 or more times over the last 3 years who have never been booked into Jail (KOTS Only).
- + What is unknown is how many “hidden” homeless there are who have never been booked in jail nor have stayed at KOTS. These individuals live in the mangroves and back alleyways and get their meals at the soup kitchen, by dumpster diving or from handouts, but their information is not recorded.
- + Taken together, there are at least 1,422 actively chronic homeless individuals who are “unsheltered” in Key West. It should be understood that many homeless individuals pool their money in order to group-live for short periods of time in hotels and flop-houses. Then, when the money runs out, these individuals return to the street.
- + During the last 2 years, 39 long term homeless individuals known by name have died or moved away from Key West.
- + Additionally, during the last 3 years, there were an additional 1,087 one-time visitors to KOTS who were never in Jail (a rate of about one new person a day).
- The best that it can be calculated, Key West has the highest percent “unsheltered” homeless population of any city in the USA (street homeless population divided by general population). Using the very conservative figure of 1,422 divided by the 2010 Census Population of 24,649, Key West has a unsheltered homeless population of 5.8%. If you include the one-time only homeless (which is what other cities do), the number jumps to 7.2%.
- Because of the economic recovery (in terms of jobs) has mostly been limited to individuals with 4-year college degrees, because of the increase in domestic violence, and because of the unprecedented high number of returning Army and Marine combat veterans with behavioral health issues, the homeless rate in the Keys will continue to increase if no changes are made.

- Even though Key West is a small city, because of its weather and culture of enablement, the issue of homelessness in Key West has become a “big city” problem.
- Compared to other communities, the Keys dramatically lack 24/7 services for chronic and super-chronic men (eg 24/7/168/365 operations). The services that do exist are disjointed, spread-out, siloed and not coordinated. It is very important to note that homelessness does not increase with improved and expanded services. Instead, homelessness actually decreases when holistic and comprehensive programming services are put in place. Homeless individuals come to a community because of the weather, not because of the services.
- Because the services that do exist are not coordinated and are spread throughout the community, there is a daily mass movement of homeless individuals starting before 7:30 am from KOTS and the mangroves to hanging out on College Road. From congregating on College Road, homeless individuals then spread out throughout downtown, the historic district and beaches to panhandle, search for food handouts and dumpster dive. After getting mid-morning food, most of the homeless individuals then move to the beaches, parks, mangroves and the library to hang out. After hanging out in these locations during the day, many individuals then re-assemble at the Soup Kitchen starting at 2:30 pm. After eating at the Soup Kitchen at 4:00 pm, many individuals then move through the neighborhoods back to College Road to hang out and await the re-opening of KOTS at 6:30 pm, while others head to the mangroves and other hiding places.
- The Keys lack a true “master case management” system. Master case management and agency level case management are often wrongly presented as the same functionality. In practice there are major differences between master case management and agency level case management. Each homeless individual needs a single, designated Master Case Manager who creates a customized action plan for recovery that is then monitored by the Master Case Manager.
- The current paradigm in the Keys has not decreased homelessness, and in fact it has actually increased and promoted street-level chronic homelessness.
- Additional Observations Made by Dr. Marbut:
 - + Relatively low female:male ratio (a leading indicator of a more violent environment)
 - + Anecdotally observed more aggressive behaviors, especially at beaches and on Duval
 - + Very low number of families with children and almost no families on the street
 - + The homeless population turn-over rate is very stable compared to other communities
 - + The high number of homeless living in mangroves is creating environmental issues
 - + Need additional and better coordinated mental health and primary health care services
 - + Need for improved/increased access to dental, vision and substance abuse services
 - + The Keys lack affordable housing

Critical Big Picture Findings and Major Recommendations

Change Key West's Enabling Culture to Engagement Throughout the Entire Community:

- If the greater Key West community keeps doing the same activities in the same ways, the street-level chronic homeless population will dramatically increase and likely become more aggressive and embolden. There needs to be an across-the-board "Change in Thinking and a Change in Doing."
- The entire community needs to move from a culture of enablement to a culture that engages homeless individuals in all aspects of daily life. Free food handouts, cash from panhandling and alcohol drink handouts - although well-intended by nice folks - actually perpetuates and increases homelessness through enablement. Rather than street handouts, food and cash donations should be redirected to high performing agencies. All three Key West subgroups need to be engaged in this effort (eg year-round residents, seasonal residents and tourists).
- The leadership within the civic, local government, funder, advocate, service provider, law enforcement and homeless communities need to embrace transformational best practices that have worked throughout the USA.
- Homeless individuals who want help, should be provided engaging help. Individuals who turn down help, should not be enabled.
- "Hanging-out" should be replaced by program participation. Every effort possible must be made to engage individuals into programming.
- If the Keys successfully shift from a culture of enablement to a culture of engagement, news of this shift will be broadcast to homeless individuals nationwide. Individuals who want to avoid engagement will be reluctant to come to the Keys despite the attractions of the weather. Thus, the rate of in-bound homeless individuals will decrease.
- Engagement should never be mean - instead engagement should always be kind, caring and companionate.
- Need to implement a coordinated strategic "systems-approach" throughout the Keys (eg not agency-centric nor one-off arrangements). Decisions should be made based on performance and not be based on historic funding levels. Funding should always be transparent and accountable. Service providers need to work together as partners within a single coordinated holistic system in order to better help homeless people move from the streets and mangroves into formal service programs.

Creation of a Mini Homeless Transformational Center:

- National best practices posit that it is best to co-locate as many homeless services as possible within a campus environment. In Key West, this would mean that the current functions of KOTS and the Soup Kitchen as well as part of the Star of the Sea (SOS) operations be co-located at the new mini-center.
- Possible names for the new Center:
 - + Key West Hope Center
 - + Key West Safe Harbor
 - + Keys Temporary Living Center (Keys TLC)
 - + Keys to Success Center
 - + The First-Step Center
- Homelessness is too big a challenge for one agency to address. Like great sport teams, individual organizations need to adopt a team-winning attitude in which the team is first while individual agencies are second.
- “Specialty service providers” and “referral service providers” should also be located at the Center on a part-time basis.
- All agencies, programs and service providers within the Center should adopt the “culture of transformation” in all aspects of their operations.
- The existing functions of KOTS should be expanded, reorganized and rebranded into a new 24/7 year-round program, this would include “first-step” programming, transitional housing and case management.
- The lead agency for the Center, as determined by the City of Key West, would provide similar services as KOTS currently does on a 24/7 basis. Additionally, the lead agency would provide the bulk of case managers and general administrative coordination of the Center.
- The Sheriff’s Office and/or the County should be asked if it can provide and coordinate security similar to how it is done by the Pinellas County Sheriff’s Office at Pinellas Safe Harbor.
- Ideally, the Soup Kitchen services would be expanded to 14, 19 or 21 meals per week and relocate to the Center. To do this, a commercial grade kitchen must be built within the Center.
- Ideally, SOS would also locate part of its existing operation to the Center. As part of the realignment of services, SOS may want to explore formally moving from a “pantry” to a “food bank.”

- National best practices indicate that communities need to have at least one “first-step” program (sometimes called a “low-demand shelter”) yet the Keys do not have a true “first-step” program. The Center needs to include a 24/7 intake-portal and a day service center for chronic men and women. This first-step center needs to be stood up as fast as possible and should be located within the Center. This should be modeled after Pinellas Safe Harbor and Prospects Courtyard (San Antonio).
- The Center should act as the master community intake-portal for chronic and super-chronic men and women.
- For land acquisition and construction cost reasons, the most cost effective site for the Key West Center would be on Stock Island and incorporate the City owned Easter Seals and the Mosquito Control Board Buildings. Additionally, there are major operational benefits if the Center is near the jail and hospital.
- The three highly operational trailers at the current KOTS site could be moved to the Center and be re-purposed as bathroom, laundry and storage facilities.
- Foliage should be added to create an ergonomic and visual buffer between the Center, its neighbors and College Road. Fencing should also be added to create a security perimeter. The foliage improvements should be integrated with the new fencing.
- Because of ongoing operations and service needs, the Center could be built and operationalized in three phases:
 - 1- Creation of buffer and rehab the Easter Seals Building for case management services
 - 2- Creation of the First-Step Courtyard and build-out of the commercial kitchen
 - 3- Rehab of the Mosquito Control Building for transitional housing
- Need to create a master case management system that develops and customizes a recovery-action-plan for each homeless individual receiving services in the Lower Keys.
- Each homeless individual needs his/her own Master Case Manager who creates a customized action plan for recovery. Master Case Managers then need to proactively monitor and manage each recovery-action-plan. Master Case Managers should conduct the initial intakes into the HMIS system, do initial and ongoing assessments, develop the individual recovery-action-plans and be a proactive “navigator” of the recovery-action-plans.
- Men’s programming should be focused on the following (time frames should regularly be reviewed and revised based on census demographic changes):
 - + homeless in the Keys for 0-3 months . . . focus on reunification services
 - + homeless in the Keys for 3-24 months . . . focus on case management
 - + homeless in the Keys for 24+ months . . . focus on stabilization
 - + homeless veterans in the Keys . . . connecting to VA services

- The following services should be included within the Center (full-time and/or part-time):
 - + Engagement Into the Center:
 - * Outreach
 - * Intake, registration and assessment
 - * Master case management
 - + Medical:
 - * Medical (on-campus and off-campus referrals)
 - * Dental (off-campus referrals)
 - * Vision (mostly off-campus referrals)
 - * Pharmacy services (on-campus)
 - * Mental health (on-campus and off-campus referrals)
 - * Addictive disorders and substance abuse services (on-campus and off-campus referrals)
 - + Job Placement Services:
 - * Legal services and ID recovery
 - * Life skills training
 - * Job skills training (includes interview and resume training)
 - * Job placement, coaching and enlisting business community support for jobs
 - + Hygiene Services:
 - * 24/7 bathrooms
 - * Showers
 - * Hygiene skills training and services
 - * Hair cut services (to be presentable for job interviews)
 - + Overnight Sleeping:
 - * Low demand sheltering
 - * Transitional living
 - + Feeding:
 - * Food and meals
 - * Coordination of meals (delivery and prep from non-profits and churches)
 - + Other Support Services:
 - * Clothing closet
 - * Housing out-placement
 - * Veteran services
 - * Daytime activities
 - * Property storage
 - * Donation center

- + Administration:
 - * Administrative services for the Center
 - * Security
 - * Storage
 - * Volunteer coordination
 - * Community service work crews and Center work crews

- Development of detailed capital improvement and operating budgets were beyond the outlined scope of work. However, a cursory review of budgets indicates the following:
 - 1- If the Soup Kitchen moves entirely over to the Center with SOS support and street feeders are realigned to the Center, then food services should be very doable.

 - 2- The big unknown critical success factor is whether the Sheriff and/or County would take on a security role similar to what the Pinellas County Sheriff has done for Safe Harbor.

 - 3- Assuming 1 and 2 occur above, and assuming the City supports the Center at the same rate it currently supports KOTS and MOP (both direct support with cash and indirect support with utilities), the lead agency can operate the Center with a marginal increase in operating costs. There would be a need for new funding for one-time-only reunifications, increased supplies and two-three additional case managers. Ideally, some of this funding could come from contributions and grants.

 - 4- Since the City owns the Mosquito Control and Easter Seals Buildings, the renovation and rehab costs would be minimal on a square foot basis. Furthermore, some of this work might be able to be done in-house with staff and volunteers. A concept design would first need to be developed in order to ascertain accurate renovation costs. The key costs would include funding for the following:
 - * creation of a buffer zone (fencing and foliage)
 - * build-out of a commercial kitchen
 - * movement of trailers and establishment of utilities at new location
 - * renovation of the Mosquito Control Building (elevator, bathrooms and walls)
 - * renovation of the Easter Seals Building (this would be minimal in nature and be very cost effective, and could be accomplished mostly in-house)

The Center Must Become a Good Neighbor:

- The congregating on College Road needs to stop. For safety reasons, the queuing for intake needs to occur inside the Center and not on College Road. It is recommended that the intake operation be near where the Mosquito Control reception area is now which would put this function deep inside the Center.

- A robust “buffer” around the Center needs to be built. A physical fencing barrier needs to line the Center. Foliage should then be integrated within the fencing system to create a visually aesthetic barrier. Additionally, the structures within the Center need to be laid out in such away as to create positive ergonomic flow and defensible space.
- The Center needs to embrace national best practices of “*Look, Feel and Smell*” standards:
 - + all areas need to be organized neatly and uncluttered (look)
 - + all areas need to be warm and nurturing (feel)
 - + all areas need to smell like a nice home - should not smell dirty and soiled, nor should it smell like cleaning solutions (smell)
- Safety, health and hygiene are all negatively impacted by dirty, soiled and cluttered environments.
- Having high standards in this area dignifies the folks being helped while fostering higher standards for staff and volunteers. Individuals respond to their surroundings. Neat, clean and warm feeling environments lead to more positive outcomes than dirty, soiled and cluttered environments. Embracing a high environmental quality also helps in being a good neighbor.
- High quality environments also increase resources to agencies in the following four ways:
 - + increases volunteers
 - + increases funding
 - + increases staff member and volunteer productivity
 - + extends the useful life of the physical plant and infrastructure

Possible Center Phasing Plan:

Phase 1 - Operationalize the Former Easter Seals Building:

- Name the Center
- Create of a buffer around the Center
- Renovate the Easter Seals Building (building is in good shape and laid out nicely)
- Rename the Easter Seals Building (could be the Transformational Center)
- Move MOP case managers into Transformational Center
- Open it for use by other agencies and services
- Move in of administrative functions

Phase 2 - Open Courtyard Services:

- Build out a commercial kitchen
- Move the three functional trailers from KOTS to the Center
- Open covered outdoor courtyard (outdoor mats)
- Once the kitchen is operational and transitional housing is near ready, close KOTS

Phase 3 - Operationalize the Mosquito Control Building:

- Renovate Mosquito Control Building
- Create master in-take area
- Create a transformational day source area
- Create indoor mat sleeping area for single men
- Create indoor bunk sleeping area for single men and women

Redirect “Street Feeding” to the Soup Kitchen (eg align with holistic service programs):

- Street feeding, although well-intentioned and good-hearted, “enables” homeless individuals rather than engaging homelessness. Feeding in the parks, at street corners, at beaches and behind restaurants/bars exacerbates and promotes homelessness, thus actually increasing the number of homeless individuals.
- A media and public awareness campaign needs to be developed to encourage the community to move from a culture of enablement to a culture of engagement.
- Groups and individuals feeding homeless individuals need to move from enabling behaviors to engaging efforts by holistically aligning feeding efforts with engaging services. Street feeding organizations need to be encouraged to relocate their services to the new Center in order to align with holistic service programs.
- Wholesale food suppliers, caterers, grocery stores, restaurants, bars and hotels need to be encouraged to assist strategic efforts rather than one-off operations that enable homelessness.
- The same negative issues are true for cash handouts (panhandling) and the providing of free alcoholic drinks to homeless individuals.

Immediate Next Steps

Envisioning, designing, constructing, systems creation and operational start-up of a Transformational Center is multifaceted and quite intricate. There are hundreds of good decisions that will need to be made to assure success of the Center. The good news is many communities around the USA have already created very successful homeless transformational campuses. The Keys should learn from these communities and then scale and customize its campus to the unique needs for the City of Key West and Monroe County. Some of the following action steps must be sequential, while other action steps can be taken at anytime and are not dependent on other action steps:

-> **VOTE OF CITY COMMISSION TO MOVE FORWARD WITH A CENTER** <--

- Establish a Development Team for the Center.
- Hire a Homeless SME (eg subject matter expert) to help manage and support the Development Team. Depending on available City of Key West internal resources, existing work loads and expertise, the SME could function as the Development Team coordinator or as a subject matter expert supporting an “internal” coordinator.
- Hire an architect to design the Center. The capital budget would be developed during this process.
- Perform a Phase I Environmental Site Assessment (ESA).
- Solicit the support of the Sheriff and/or County to provide security functions for the Center.
- Formalize agreements with the lead agency for the Center, Soup Kitchen, SOS, Public Defender, State Attorney, Probation Office, Sheriff and County. The operating budget would be developed during this process.

-> **FINAL GO OR NO-GO DECISION** <--

- Secure the two buildings and land.
- Affirm and/or revise Center Phasing Plan.
- Perform functional concept design process with Development Team, architect and Center service agencies. This process should also include Stock Island neighbors in the development process.

- Rehab and Renovation: Determine whether improvements can be managed by the Development Team or if a general contractor needs to be hired and determine how much can be done in-house. Start improvements!!
- Solicit other potential service partners for part-time service delivery within the Center.
- Develop Center operating systems, procedures and protocols.
- Solicit further financial support (eg County, foundations, corporations and individuals).
- Culture Training for all involved (includes off campus agencies such as KWPD).
- Start of a public awareness campaign (eg relocation of street-feeding operations to the Center).
- Operational phase-in, soft-opening and grand-opening of the Center.

July 29, 2013 (3:17pm)

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Program/Agency Site Visits, Meetings and Conference Calls
(listing of key activities as of July 29, 2013)

Peter Batty
Deacon and Businessman
Co-Founder of SOS and Civic Leader

Beaches (Dog, Higgs, Rest and Smathers)
Key West and Monroe County
Homeless Gathering Places

Rev. Stephen E. Braddock, Ph.D.
Florida Keys Outreach Coalition, Inc.
President & CEO

Tom Callahan
Executive Director of Star of the Sea Outreach Mission (SOS)
Food Pantry

Hon. Heather Carruthers
Monroe County Commissioner
District III

Clearwater City Manager Bill Horne and Homeless Services Director Katerina Gerakios
City of Clearwater
Review of Clearwater's Homeless Reduction Effort

Don Craig
City of Key West
Planning Director

"Easter Seals Building"
Stock Island
Possible Location for Homeless Campus Services

Rosemary Enright
Monroe County
Public Defender

Mark Finigan
City of Key West
Assistant City Manager and Homeless Services Liaison

Roman Gastesi
Monroe County
County Administrator

Dr. Jonathan Gueverra
President/CEO Florida Keys Community College
Neighbor - Community College

HEP Campus (Homeless Emergency Project)
Clearwater
A Full Service Transformational Homeless Campus for Men, Women and Families

Dr. Eric Herrera
Lower Keys Medical Center
Emergency Department Medical Director

Sam Kaufman, Esq.
Florida Keys Outreach Coalition, Inc.
Chair

Key West City Commission Members Craig Cates, Clayton Lopez, Teri Johnston Billy Wardlow and Tony Yaniz (at the time of publication was working to schedule meetings with the remaining Members)
City of Key West

Key West Golf Club
Officers of the Homeowners' Association
Neighbor - Golf Course

Key West Police Officers - Ride-a-along
Several Key West Officers
Police Department

Key West Tourists and Residents
Had many visits with residents and tourists throughout the Lower Keys

The Key West Tropical Forest & Botanical Garden
Board of Directors and Senior Staff
Neighbor - Botanical Gardens

KOTS and MOP (Keys Overnight Temporary Shelter and Mobile Outreach Project)
Programs of SHAL (Southernmost Homeless Assistance League)
Boardmembers, volunteers and Staff

Donald Lee Jr.
City of Key West
Chief of Police

Elmira Leto
Samuel's House, Inc.
Founder and CEO

Dr. Robin Lockwood
Key West Chamber of Commerce
President Elect

Roger McVeigh
Key West
Local Citizen

Monroe County May Hill Russell Library
Monroe County
Library

Mosquito Control Building - Stock Island
Florida Keys Mosquito Control District
Possible Location for Homeless Campus Services

John Padget
Chair of Lower Florida Keys Hospital District - Monroe County
Business and Civic Leader

Virginia Panico
Key West Chamber of Commerce
Executive Vice President

Pinellas County Public Defender Bob Dillinger
Pinellas County
Public Defense and Several Social Service Programs

Pinellas Hope
Catholic Charities - Diocese of St. Petersburg, Inc.
Temporary Emergency Shelter and Supportive Services for Men and Women

Pinellas Safe Harbor and PSH Commander Lt. Sean McGillen
Pinellas County Sheriff's Office
Indoor and Outdoor First-Step Program

Mark Porter
Monroe County School District
Superintendent of Schools

James "Larry" Prescott
WestCare
Key West Site Director

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AIDS Help
Executive Director

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Monroe County
Sheriff

Shawn Smith
City of Key West
City Attorney

St. Francis House
Catholic Charities in the Archdiocese of Miami
Shelter for Single Adult Males

St. Mary's Soup Kitchen
Meals

Major Tommy Taylor
Monroe Sheriff's Office
Commander of the Monroe County Division of Corrections

Captain Gene Thompson
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The Lower Keys District - District 1

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City of Key West
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Key West Chamber of Commerce
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The Seven Guiding Principles of Homeless Transformation

The Measuring Stick Moving from Enablement to Engagement

After visiting 237 homeless service providers in 12 states and the District of Columbia, the following *Seven Guiding Principles* were commonly found to be the best practices in the USA. These *Seven Guiding Principles of Homeless Transformation* are used as key measuring sticks when reviewing homeless service providers in Key West as well as the overall service network within Monroe County.

1. Move to a Culture of Transformation (versus the Old Culture of Warehousing):

Homeless individuals must be engaged and no longer enabled. Everybody within the services delivery system (eg general public, media, elected politicians, appointed officials, monitors, boards, staffs and volunteers of service agencies and most importantly the homeless themselves) must embrace a culture of transformation. A culture, that through the help of others, homeless individuals can transform and integrate themselves back into society. For moral and fiscal reasons, homelessness must become an unacceptable condition that is not tolerated in the USA.

2. Co-location and Virtual E-integration of as Many Services as Possible:

In order to increase success, all services within a service area must be e-integrated. Virtual e-integration improves coordination of services, enhances performance, reduces “gaming” of the system, engages individuals on the margin of society and increases cost efficiencies within and between agencies. Furthermore, whenever financially possible, services should be co-located. Co-location goes beyond virtual e-integration by increasing the number of “service hits” into a shorter period of time through the reduction of wasted time in transit and minimization of mishandled referrals. Co-location also increases the supportive “human touch.”

3. Must Have a Master Case Management System That is Customized:

Because there are so many different service agencies helping homeless individuals (eg government at multi-levels, non-profits and faith-based), it is critical that ONE person coordinates the services an individual receives and to do so in a customized fashion. The types of service provided is critical, but what is more important is the sequencing and frequency of customized services.

4. Reward Positive Behavior:

Positive behavior of individuals should be rewarded with increased responsibilities and additional privileges. Privileges such as higher quality sleeping arrangements, more privacy and elective learning opportunities should be used as rewards. It is important that these rewards be used as “tools” to approximate the “real world” in order to increase sustainable reintegration into society.

5. Consequences for Negative Behavior:

Too often there are no consequences for negative behavior of individuals. Unfortunately, this sends a message that bad behavior is acceptable. Within the transformational process, it is critical to have swift and proportionate consequences.

6. External Activities Must be Redirected or Stopped:

External activities such as “street feeding” must be redirected to support the transformation process. In most cases, these activities are well-intended efforts by good folks; however, these activities are very enabling and often do little to engage homeless individuals.

7. Panhandling Enables the Homeless and Must Be Stopped:

Unearned cash is very enabling and does not engage homeless individuals in job and skills training which is needed to end homelessness. Additionally, more often than not, cash is not used for food and housing but is instead used to buy drugs and alcohol which further perpetuates the homeless cycle. Homeless individuals who are panhandling should be engaged into the transformational process. Furthermore, most panhandlers are not truly homeless but are preying on the good nature of citizens to get tax-free dollars.

Robert G. Marbut Jr., Ph.D.

First as a volunteer, then later as a San Antonio City Councilperson and a homeless service agency President/CEO, Dr. Robert Marbut has worked on homeless issues for over three decades.

In 2007, frustrated by the lack of real improvement, and as part of the concept development for the Haven for Hope Campus, Dr. Marbut conducted a nationwide best practices study of homeless services. After personally visiting 237 homeless service facilities, in 12 states and the District of Columbia, he developed *The Seven Guiding Principles of Homeless Transformation*. Since then, Dr. Marbut has visited a total of 584 operations in 21 states, Washington, DC and Mexico City.

These Seven Guiding Principles of Transformation are used in all aspects of his work to create holistic, transformative environments in order to reduce homelessness.

Dr. Marbut was a White House Fellow to President George H.W. Bush and a former Chief of Staff to San Antonio Mayor Henry Cisneros.

He earned a Ph. D. from The University of Texas at Austin, Austin, Texas in International Relations (with an emphasis in international terrorism and Wahhabism), Political Behavior and American Political Institutions/Processes from the Department of Government.

He also has two Master of Arts degrees, one in Government from The University of Texas at Austin and one in Criminal Justice from the Claremont Graduate School. His Bachelor of Arts is a Full Triple Major in Economics, Political Science and Psychology (Honors Graduate) from Claremont McKenna (Men's) College.

Dr. Marbut also has completed three post-graduate fellowships, one as a White House Fellow (USA's most prestigious program for leadership and public service), one as a CORO Fellow of Public and Urban Affairs and one as a TEACH Fellow in the Kingdom of Bahrain and the State of Qatar (1 of 13 USA educators selected).

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