Housing & Economic Development Committee

MOHS City Council Presentation

November 4, 2025



MOHS Agency Overview





Ernestina Simmons, LCSW-C
Executive Director

MAYOR'S OFFICE OF

HOMELESS SERVICES

Purpose

To respond to the urgent housing crisis in Baltimore City and to support the city's heightened and urgent commitment to preventing and ending homelessness.

Mission

To make homelessness rare, brief and non-recurring in Baltimore City

Baltimore City Coordinated Response to Homelessness

Designed to promote community-wide commitment to the goal of ending homelessness and provide funding for efforts by nonprofit providers, and State and local governments. MOHS manages nearly \$70 Million annually in CoC, HOPWA, ESG, HSP and other federal, state and local funds to support street outreach, emergency shelter, rapid re-housing and permanent housing programs.

Core Programs & Services

- Coordinated Access
- Street Outreach
- Emergency Shelters
- Housing for People with Aids (HOPWA)
- Rapid Rehousing Programs
- Permanent Support Housing



2025 At A Glance



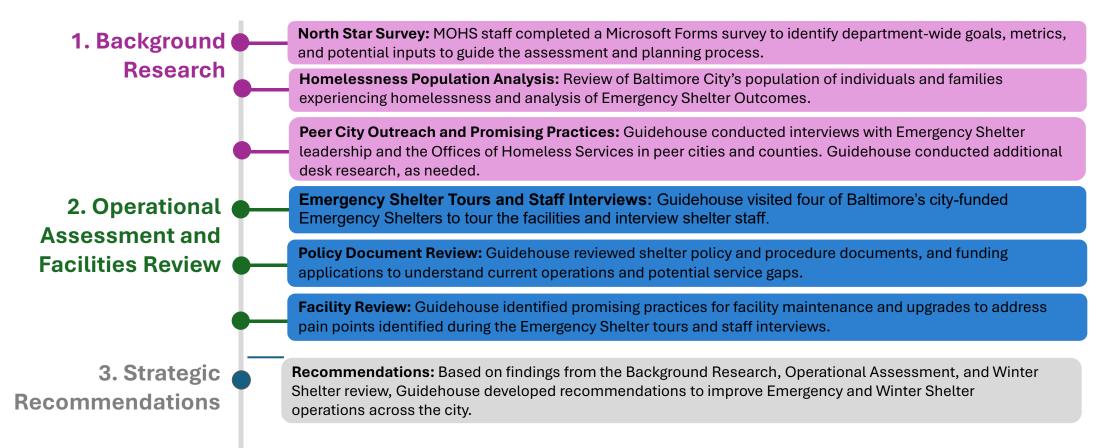
MOHS endeavors to make homelessness rare, brief and non-recurring. From January 1 to September 30, 2025, MOHS supported thousands of Baltimore City residents at risk of, or experiencing homelessness, through a variety of permanent supportive housing programs, permanent housing, supportive services, winter shelter and key initiatives.

- 16,649 clients served through supportive services, emergency shelter and permanent housing programs
- 4,345 successfully enrolled in Coordinated Access
- 3,849 clients served in permanent housing
- 1,034 clients that exited homelessness to permanent housing
- **2,104** residents were accommodated in City-funded shelters
- 3,111 unhoused residents were served by our outreach team and provided 42, 337 service connections
- 203 survivors of domestic violence were served in our domestic violence shelter, with 50% of the households exiting to a more secure housing option.
- 803 clients served with permanent housing in our HOPWA programs

Emergency Shelters Assessment and Recommendations



MOHS provides oversight of (6) Emergency Shelters, each location is operated by a 24/7 by a non-profit organization. Each of our service providers are responsible for providing supportive services that includes case management, mental health services, workforce development, housing navigation and additional supports that strengthens clients' ability to exit to permanent housing. In March 2025, our office contracted with Guidehouse to conduct an independent strategic assessment of our Emergency Shelters. The assessment helped us assess our programs and strengthened our ability to develop actionable steps to enhance our Shelter Operations and to align our programs with practices guided from research and national best practices across the US. They concluded their assessment in September 2025. Our office has began implementing many of the recommended practices.



Population Experiencing Homelessness in Baltimore City

On January 25, 2025, the City of Baltimore conducted the annual Point-In Time Count. This is mandated by HUD however it also allows communities an opportunity to get a snapshot of what is happening in their city as it relates to homelessness.

Baltimore 2025 Point-in-Time Count

2,024

Number of individuals experiencing homelessness in Baltimore City¹

Sheltered (S)	1,836
Unsheltered (U)	188
% Under Age 18	4.3%
% Age 55+	32%
% Chronically Homeless	13%
% with Serious Mental Illness (SMI)	66% (U)
% with Substance Use Disorder (SUD)	76.6% (U)

6-Year Trend

- From 2019 to 2024, there was an overall 12% decline of homelessness. However, from 2024 to 2025, 26.5% more residents were surveyed and are experiencing homelessness.
- Potential reasons may include increased cost of living, the lack of affordable housing and the end of COVID-19 related programs such as rapid rehousing programs and eviction prevention funds.

Changes between 2024 and 2025:

- Chronic homelessness decreased by 3%
- Veteran homelessness decreased by 2%
- Homelessness for youth ages 18-24 decreased by 9%
- Households that includes children experiencing homelessness increased by 46%
- Older Adults experiencing homelessness (over 65) increased by 22% from 2024.

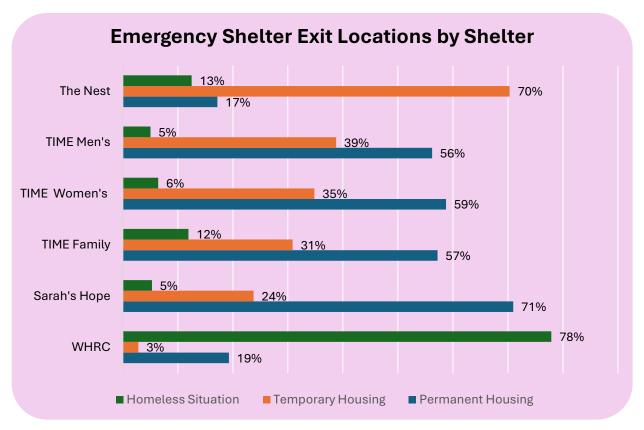
First Time Homelessness:

- 37% of the clients in emergency shelters and 52% of those that were unsheltered reported this was their first time experiencing homelessness.
 - Full 2025 PIT Report Can be Accessed Here: 2025 Baltimore City PIT Count Report.pdf

Movement Towards Permanent Housing for Emergency Shelter Residents

Between July 1, 2023 and September 30, 2025, **3,800 clients** were served by city-funded Emergency Shelters in Baltimore City.

Shelter	Pop.	Num of Client Served	Num. Clients Exited	Average Length of Stay (Num. of Days)
The Nest	Youth (18 – 24)	105	96	69 ¹
TIME Men's	Men	774	647	120
TIME Women's	Women	821	659	174
TIME Family	Families	373	249	147
Sarah's Hope	Families	391	355	204
WHRC ²	Men & Women	1,336	1,125	117

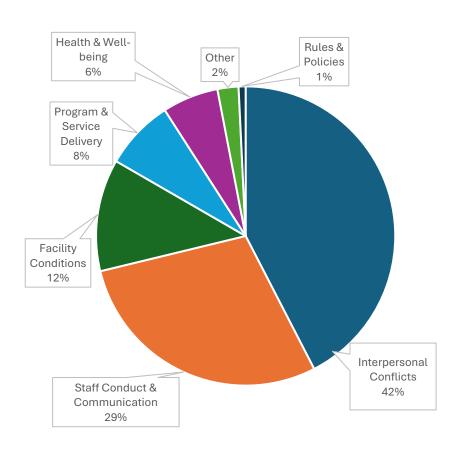


^{1.} Stays at Nest are limited to 90 days.

^{2.} WHRC = Weinberg Housing and Resource Center

Emergency Shelter Resident Grievance Submission Findings

Between 2/24/2024 and 7/29/2025, most grievances submitted by Emergency Shelter residents were related to interpersonal conflicts.



Category	Description
1. Facility Conditions	Cleanliness, Maintenance Issues (plumbing, HVAC, pest control, etc.), Safety & Security, Accessibility Concerns
2. Staff Conduct & Communication	Rudeness or Unprofessionalism, Discrimination or Bias, Harassment, Lack of Responsiveness
3. Program & Service Delivery	Case Management Issues, Unmet Needs (food, clothing, hygiene supplies), Scheduling & Availability of Services, Unfair Treatment
4. Interpersonal Conflicts	Conflicts with Other Residents, Bullying or Threats, Roommate Issues
5. Rules & Policies	Unclear or Unfair Rules, Policy Enforcement Concerns, Appeal of Disciplinary Action
6. Health & Well- being	Medical Concerns Not Addressed, Mental Health Support Issues, Emergency Response Delays
7. Other	Any grievances that do not fit the above categories

12% of the Facility
Condition Complaints
were related to access
to cleaning supplies.

At least 42% of the Interpersonal Conflicts were due to roommate difficulties.

A total of 355 grievances were submitted over a 15-month time period within our City Funded Shelters. Our Congregate Shelter accounted for 30% of all grievances.

Recommendation 1: Increase Case Management and Support Services



Background:

- Emergency Shelter staff stated that navigating DSS and acquisition of identification documents has continued to be a challenge for case managers.
 Staff has also faced difficulty convincing constituents to attend meetings and/or trainings outside of the shelters.
- Staff noted additional support is needed to address ongoing behavioral health challenges faced by shelter constituents as they pose a barrier to movement towards positive housing outcomes.
- Staff also indicated that the growing number of older adults add a strain to current resources.

Progress:

MOHS has partnered with the following agencies to provide additional onsite services and support:

- Baltimore City DSS- Adult Protective Services Unit.
- **MONSE-** Provides onsite conflict resolution to residents and mediation support.
- Family Preservation- Intensive case management and support to families who voluntarily agree to services
- Tuerk House- Hosting meetings weekly to educate clients about services and providing transportation to clients who enroll in programs and services.
- Baltimore City DSS- Family Investment Program.
 Effective 1/1//2026, we will begin to offer onsite workforce development programs in selected City Funded Shelters.

Recommendations:

1. Deploy onsite DSS support at all six city-funded shelters:

Enrollment in entitlement benefits and/or housing programs requires access to identification documents. Shelter staff indicated that navigating DSS can be time intensive and a difficult to navigate barrier for shelter residents. Because MOHS already has a standing relationship with DSS, expanding the support to additional locations is a lower-intensity item.

2. Develop a MOHS Case Management team to provide targeted onsite support to Emergency Shelter staff and residents:

Shelter staff requested additional support with navigating behavioral health needs among shelter residents and the growing aging population (i.e., 55+). A MOHS-owned case management team would provide needed expertise for targeted areas of need. Supports could include:

- a. Onsite behavioral health and substance use disorder counseling
- b. Housing and entitlement benefits training for older adults
- c. Ongoing service navigation and housing plan development support for onsite case managers of individuals with behavioral health needs and/or older adults

3. Initiate partnerships with local Departments / Agencies Focused on Aging:

MOHS will need to collaborate with the local community to understand opportunities to best serve the growing older adult population experiencing homelessness. Proactively initiating relationships can set the groundwork for future opportunities to jointly apply for grant/funding opportunities.

Recommendation 2:



Update and Standardize Shelter Policy and Procedures

Background:

- Shelter staff reported inconsistency across emergency shelters in policies and policy enforcement (e.g., food in rooms, curfew, grooming) led to resident confusion and tension.
- Staff noted limited tools or authority to manage disengaged residents who decline to participate in services.
- The removal of daytime exit requirements during COVID have contributed to increased wear and tear on shelters buildings.
- PROGRESS:
- MOHS has worked closely with our Shelter Transformation Committee and created a Standards of Care which outlines policies that are across all Emergency Shelters. In addition, we have added a person-centered housing plan which is now required for clients after being enrolled in the shelter for (3) days. This process includes the client meeting with their assigned case manager and developing goals focusing on strengthening the client's ability to exit the shelter.
- In addition, MOHS has been working closely with the CoC and Shelter Transformation Committee on a Length of Stay policy. We anticipate this going into effect on 1/1/2026.

Recommendations:

1. Standardize Key Policies Across All Emergency Shelters

Implement consistent city-wide shelter policies for:

- a. Curfew times and providing opportunities to earn rewards for participating in shelter programming
- b. Food in rooms and guidance on outside food (e.g., allowing coffee outside of mealtimes)
- c. Identifying daytime stay allowances and shelter access hours to minimize wear and tear on buildings

2. Implement a MOHS Policy to Discharge Emergency Shelter Residents who Refuse to Make Progress Towards a Successful Shelter Exit

Require all shelter residents to develop a "shelter exit plan" within 30-days of entering the shelter and collaborate with Emergency Shelter staff to develop guidelines and / or a checklist by which all plans and movement towards permanent housing are measured.

- a. The policy will provide a clear definition of how to determine whether a plan is "actionable" and "effective".
- b. The policy will also establish timelines by which shelter residents must make measurable steps towards a successful exit.
- c. What is included in each step of an exit plan will be established on a case-by-case basis by onsite case managers and reviewed/approved by case management supervisors.

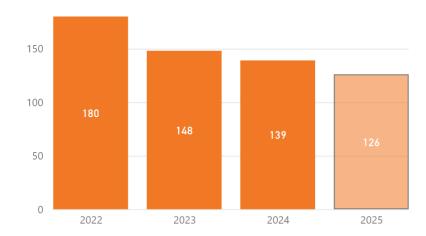
Baltimore City System Performance Measures (SPM) FY 2020 - FY 2025

*FY2025 Data is not yet final

Years 2022 2025

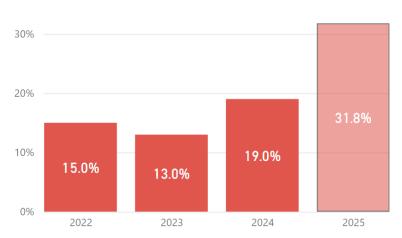
SPM 1- Length of Time Homeless

Average amount of days spent in emergency shelter.



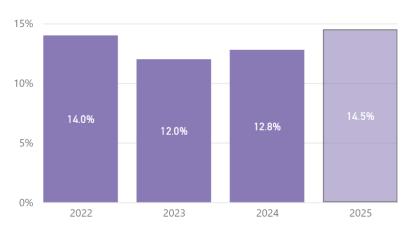
SPM 7a - Successful Placements from SO

Percentage of exits from SO to ES, SH, TH, RRH or PH



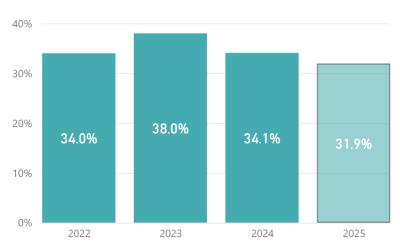
SPM 2- Returns to Homelessness

The extent to which clients who leave homelessness experience additional spells of homelessness.



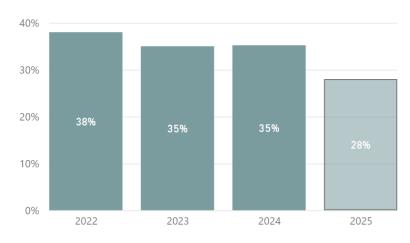
SPM 7b1- Exits to Permanent Housing

Percentage of exits from ES, TH, SH, RRH to PH



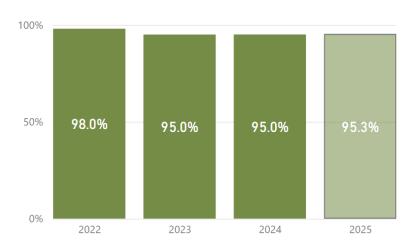
SPM 4- Income Growth

Percentage of adults who left CoC funded programs and saw income growth.



SPM 7b2- Retention of Permanent Housing

Percentage of clients in PH who maintained permanent housing



Abbreviations: SO- Street Outreach, ES- Emergency Shelter, TH- Temporary Housing, SH- Safe Haven PH- Permanent Housing, RRH- Rapid Re-Housing

Permanent Supportive Housing Analysis for FFY23, FFY24 & FFY25



The provided statistics offer a comparison of key performance metrics between Federal Fiscal Years which is October-September. Below is a breakdown and analysis of each data point for FFY 2023, 2024 and 2025 for clients served in Emergency Shelter, Transitional Housing, Safe Haven, Rapid Rehousing and Permanent Housing:

Metric	FY23	FY24	FY25 (Unofficial)	Change (FY24 → FY25 Unofficial)
Total Clients Served	6628	6784	7308	+524
Total Households Served	4801	4921	5309	+388
Average Length of Time Homeless (Days)	211	204	181	-23
Exit to Permanent Housing Rate	32%	29%	26%	-3%
Returns to Homelessness Rate	2%	6%	5%	-1%

Key Initiatives & Systems Performance

Emergency Shelter Needs



Emergency Shelters are a critical component in a homeless response system. They are designed to be a low-barrier access point that addresses an immediate need while offering additional supports and services such as case management, mental health workforce development and additional supports that leads to long-term self-sufficiency. As such, investments in non-congregate shelters are critical as we aim to provide comprehensive services and supports that lead to long-term success.

The City of Baltimore purchased the hotel formerly known as the Fairfield Inn on October 1, 2025. This site includes 155 rooms across two separate towers allowing us to serve two separate demographics. MOHS plans to:

- Serve 145 woman in the higher tower (double occupancy)
- Serve up to 80 men in the lower tower (double occupancy

As of July 1, 2023, the Fairfield Inn has exited 46% of their clients to permanent housing which exceeds this measure nationally which illustrates that non-congregate shelter that includes comprehensive services and supports result in better outcomes for clients. (The national average for clients in shelter exiting to permanent housing is 32.40%. National Summary System Performance Measures – 2019-2023

MOHS Continued Shelter Needs:

- Family Shelter- The City of Baltimore has seen a 46% increase in families in need of shelter since 2024. As such, we are searching for a site that can be used to support families.
- Overflow Shelter- During Winter Shelter, we aim to ensure every resident experiencing homelessness has a safe space to sleep to prevent cold related deaths. Our primary locations for winter shelter includes:

McVets- provide 65 beds to men

WHRC- provide 15 men and 15 woman

MOHS facility- Provides up to 22 rooms dedicated to families and couples

MOHS facility- Provides up to 22 rooms for women and men (double/triple occupancy in each room)

Overflow Site- Currently the city utilizes recreational centers or surplus schools for overflow shelter. The past (5) years MOHS has used Robert C. Marshall with Samuel FB Morse as an overflow site. This year, neither of those two sites are available for use. MOHS has been working with DGS to identify a permanent location for over 15 months as well as applying for capital support that will enable us to purchase a site outside of the cities current inventory. We understand the practice of using recreation centers and surplus schools is ineffective and we aim to create a winter shelter space that aligns with national best practices (showers, ADA compliance, storage and supportive services).

Permanent Housing Initiatives



ARPA Funding has strengthened our ability to invest in permanent housing and an area of focus for our office has been youth homelessness, family homelessness and chronic homelessness. As such, a few investments have included:

- The City of Baltimore purchased the Holiday Inn and the Sleep Inn in 2024. The Holiday Inn is currently being used as a men's shelter and the Sleep Inn as a Couples/Family Shelter. In October 2024, Episcopal Housing Corporation and Healthcare for the Homeless was awarded this project to convert the two hotels to 100 units of Permanent Supportive Housing. This project was successful in their submissions for Low Income Tax Credits for 4% and 9%. The developer anticipates phase one starting in Mid 2026.
- Homes for America/Restoration Gardens- This funding enabled us to rehabilitate 44 units of permanent housing for Transitional Aged Youth. In partnership with Baltimore City DSS and HABC, this project will offer onsite supportive services and accept youth that are aging out of foster care. The program began accepting referral from Baltimore City DSS in July 2025, we anticipate the full renovation being complete in November 2025.
- HABC- Housing Plus Program. This project enabled us to rehabilitate 50 permanent housing units for households that includes minor children that are experiencing homelessness. This project is complete and thus far has housed 43 families. We anticipate the remaining vacancies being filled by the end October 2025.
- **Springboard Community Services-** This program will provide transitional housing and permanent supportive housing to youth ages (18-24) years of age. The facility will include 24 transitional housing beds and 8 permanent housing units. We anticipate this building coming online in 2026/2027.

Permanent Housing Initiative Continued



MOHS in partnership with DHCD released the Housing Accelerator Fund. This initiatives aimed to increase both Permanent Supportive Housing and Affordable Housing for Baltimore City Residents. The project aims to develop (281) affordable housing units and (127) Permanent Supportive Housing units. In addition, HABC has provided project-based voucher that will support many of the projects.

The projects that were awarded are:

- 407 Franklin Partners: 6 units that will prioritize transitional aged youth
- Beacon Homes: 56 units which will be dedicated to veterans
- BRIDGES: 83 units which will prioritize families
- Health Care for the Homeless Real Estate Company: 42 units, mixed household types
- Homes for America, Inc.: 83 units that will prioritize seniors
- NHP Foundation: 59 units, mixed household types
- Springboard Community Services: 29 units dedicated to transitional aged youth
- Unity Properties/New Shiloh: 50 units that will prioritize single adults and families

The first project to projected to be complete in Spring 2026.

Federal Funding & Community Impact

Programs Impacted by Federal Funding Priority Shifts

- MOHS is the collaborative applicant for the CoC however we also work closely with HABC on side aside vouchers that are
 designated for people experiencing homeless. This past year, we have already seen the impact of this federal
 administration priority as it relates to housing.
- *Emergency Housing Vouchers (EHV)* EHVs are tenant based rental assistance vouchers under Section 8. Eligibility for an EHV was limited to individuals and families who are:
 - (1) homeless
 - (2) at risk of homelessness
 - (3) fleeing or attempting to flee domestic violence
- The City of Baltimore was granted 249 EHV vouchers using ARP funds. The funds were intended to support households through September 30, 2030. On March 25, 2025 the federal government announced there were insufficient funds to continue to operate the programs and clients would need to exit the program in 2026. This will impact over 215 households who remain enrolled in the program.
- Hope Safe Haven- This program is a residential facility that provides support for individual experiencing chronic homelessness and mental illness. The program lost their federal funding and informed us they would be ending their program on November 30th, 2025.

The Mayor's Office of Homeless Services is working closely with the Housing Authority of Baltimore City to transfer the EHV residents to other HABC programs. In addition, we are working closely with Hope Safe Haven to attempt to transfer eligible clients to permanent supportive housing programs.

Emerging Shifts to HUD CoC FY24-25 NOFO

- **HUD- Continuum of Care Programs:** These programs serve our most vulnerable clients in the City with supportive services, rapid rehousing and permanent supportive housing.
- **July 31, 2024:** HUD issued a 2-year NOFO and the City was awarded 33M for FY24, with the same amount expected for FY 25
- July 3, 2025: HUD shared intent to issue FY 25 NOFO prioritizing street outreach and transitional housing
- September 29, 2025: POLITICO article reveals intended changes that includes:
- o **30% cap on permanent housing programs** (PSH & RRH): This would result in a potential \$19.5 million in funding that supports 700 permanent housing units being shifting to transitional housing or street outreach programs.
- **Transitional Housing:** Transitional housing facilitates the movement of homeless individuals and families to PH within 24 months of entering TH. A shift towards transitional housing will result in a lack of permanent housing that supports our most vulnerable population.

Current Allocation of CoC Award

Project Type	Units	Grant Award	% of Total Rental Assistance & Services Awards
PSH	858	\$23,694,426	79%
RRH	132	\$4,186,066	14%
	7	\$256,487	1%
	13	\$864,334	3%
Supportive Services Only Projects (SSO)	N/A	\$821,358	3%
Total Renta Other Services (Hou	I/Lease/Services Subsidy Project	\$ \$29,822,671	
•	pringboard YHDP		
MOHS (H	MIS, CA, Planning	\$1,783,577.00	
	Total HUD Award	d \$32,488,738	

Impact of HUD Proposed Changes

Project Type	Units	30% Cap on PSH/RRH Units	Grant Award	30% Cap on Grant Award
PSH	858	25	7 \$23,694,426	\$7,108,327
RRH	132	3	9 \$4,186,066	\$1,255,819
TH	7		\$256,48	7
TH-RRH	13		\$864,334	1
SSO Only	N/A		\$821,35	8

This is a reduction of \$19.5 million in funding for nearly 700 permanent housing units in Baltimore City.

Call to Action

- The National Alliance to End Homelessness (NAEH) <u>issued a call-to-action</u> urging Congress to include a provision in the continuing resolution that requires HUD to renew all eligible CoC renewals based on the results of the FY2024 2-year CoC Program NOFO, as originally planned.
- View the <u>NAEH website</u> for a guide on recommended talking points and data on nation-wide impact.

Appendix

Onsite Case Management and Support Services at Emergency Shelters

Case management and support services provided by Emergency Shelters were identified through review of funding applications and interviews with shelter staff.

Key:

✓ = Yes

X = No

Through Partnership

	EMERGENCY SHELTER	Case Management	Housing Navigation	BH Services	SUD Services	Workforce Dev.	Onsite DSS
	Sarah's Hope – Family Shelter			Pon	7777		
	TIME – Family Shelter			7777	Proposition of the second	A CONTRACTOR OF THE PARTY OF TH	
	TIME – Women's Shelter			Popp.	nn	Ton I	
	Wienberg Housing and Resource Center (WHRC)			Pon !	nn		
Not Conducted	The Nest (Youth Shelter)	Partners with YO! Baltimore		Pon I	Pon A	no.	X
Not Cor	TIME – Men's Shelter		V	Tono 1	Anna A	To the second	

- BH = Behavioral Health
- SUD = Substance Use Disorder
- 3. DSS = Baltimore City Department of Social Services

Current Processes to Measure Client Satisfaction

All six city-funded Emergency Shelters collect client satisfaction data through surveys and / or onsite client listening sessions.

	Sarah's Hope	TIME - Family	TIME - Women's	WHRC	The Nest	TIME - Men's
1. Surveys	Yes	Yes	Yes	Yes	Yes	Yes
2. Community Meetings	Yes Town Halls; Resident Advisory Committee Meetings	Yes Town Halls; Shelter Improvement Committee Meetings	Yes Town Halls; Shelter Improvement Committee Meetings	Yes Resident Council Meetings	Yes Community Meetings	Yes Town Halls; Shelter Improvement Committee Meetings
3. Suggestion Box	No	No	No	Yes	Yes	No

Emergency Shelter Staff have leveraged findings to improve shelter policies. Examples include:

- Allowing residents to bring outside food and coffee into the shelter. Previously only staff were allowed to bring
 in outside food which led to tension between staff and residents.
- Changing curfew hours to accommodate daylight savings and to provide residents more time for outside
 activities.
- **Purchasing reusable water bottles for residents to reduce the number of paper cups used**. The water bottles are also cost-effective and more convenient for residents to take with them to their rooms.

Emergency Shelter Training Requirements

Emergency Shelter Providers are required to provide new hire and ongoing training for their staff. As a part of their contractual agreements, we have required the below trainings by our providers. In addition, MOHS hosts ad hoc training for providers. They include:

Contractual Obligations for Training hosted by Providers

Homeless Management Information System, Coordinated Access System, Housing First Training, Reasonable Accommodations and ADA Compliance, Emergency Preparedness

Customer Service Training, Cultural Responsiveness (including LGBTQI cultural responsiveness), **Trauma Informed Care, Motivational Interviewing, Suicide Risk Assessment and Prevention, Mental Health & First Aid**

Non-Violent Crisis Intervention, Boundaries and Confidentiality, Race Equity and Homelessness, Naloxone/overdose and Understanding Lived Experience of Homeless.

MOHS Hosted Training

Baltimore City Health Department:

Narcan Training- Train the Trainer Model, Naloxone Training and Overdose Response

Baltimore Crisis Response Initiative (BCRI):

Crisis De-Escalation, Crisis Intervention
Sheppard Pratt: Mental Health & First Aid

HUD Technical Assistance Consultant:

Shelter Participation and Motivational Interviewing, Office of Attorney General-Fair Housing Training

Recommendation 3:



Update and Standardize Shelter Policy and Procedures (cont.)

Background:

- Shelter staff reported inconsistency across emergency shelters in policies and policy enforcement (e.g., food in rooms, curfew, grooming) led to resident confusion and tension.
 - Some policies—such as strict curfews or no outside food—were seen as unnecessarily punitive, limiting client autonomy and comfort.
 - Opportunities to reward resident engagement were underutilized, despite clear benefits to participation.
- Staff noted limited tools or authority to manage disengaged residents who decline to participate in services.
- The removal of daytime exit requirements during COVID have contributed to increased wear and tear on shelter buildings.
- PROGRESS:
- Emergency Shelters are overseen by both a Program Compliance Officer (PCO) and the Emergency Shelter Manager. Annually, the PCO monitors the programs and facilities using the Emergency Shelter Grants Habitability Standards. In addition, MOHS Emergency Shelter team conducts site visits to the shelters. Last, effective October 2025, we added a room-check list to our inspection process.

Recommendations:

3. Develop a Standardized Facilities Maintenance Cadence and Checklist:

a. Recommended Frequency and additional items to include on Checklists:

	Suggested Items				
1. Room-Checks Daily by Shelter Staff	 Add review of sufficient supplies (e.g., linens, toilet paper, paper towels). Add review of fridge and exit signs/emergency route signage to maintenance/repairs review. 				
2. Facility Maintenance Checks Monthly by Shelter Staff	 Clarify the type(s) of Singe (e.g., Emergency Evacuation Routes) that must be included in each room. Develop a "Common Space" preventative maintenance checklist in addition to the Room Checklist. 				
3. Facility Checks Monthly by MOHS Staff	Add review of whether there are enough trash receptacles in kitchen common spaces, bathrooms, and sleep areas.				
Other	 Develop an ADA Compliance Checklist for non-congregate rooms that house residents with physical disabilities. The list should be used to confirm the room meets minimum mobility requirements during the intake process. Clarify tobacco product rules across shelters (e.g., is there a smoking area? Can residents keep cigarettes and / or vapes in their rooms) and add guidance to checklists, 				