

GOVERNMENT OF THE DISTRICT OF COLUMBIA



Interagency Council on Homelessness (ICH)

To: Mayor Muriel Bowser
From: Kristy Greenwalt
Executive Director, Interagency Council on Homelessness
Re: Design Guidelines for DC General Replacement Units
Date: October 16, 2015

This report is in response to [Mayor's Order 2015-255](#), issued on September 25, 2015, commissioning the District of Columbia Interagency Council on Homelessness (ICH) to establish a committee for the purpose of providing recommendations on design guidelines for replacement units for the DC General Family Shelter.

1. Background

1.1 Homeward DC and Systems Change

In March 2015, the ICH released [Homeward DC](#), a roadmap to transforming the homeless services system in the District of Columbia and ensuring that by 2020, homelessness in the District is rare, brief, and non-recurring. The plan identifies a series of action items across five key strategies:

1. Develop a more effective crisis response system;
2. Increase the supply of affordable and supportive housing;
3. Remove barriers to affordable and supportive housing;
4. Increase the economic security of households in our system; and
5. Increase prevention efforts to stabilize households before housing loss occurs.

There is no one single solution when it comes to ending homelessness. It will take simultaneous investment in and focused energy on all of the strategies identified above to move from a shelter-based system to one that is focused on rapid stabilization and connection back to permanent housing. Accordingly, the ICH member agencies and partners are working to advance progress on all of these strategies. However, one of the most critical pieces of our systems change work is ensuring the “front door” to our service system – emergency shelter – operates both efficiently and effectively.

1.2 Effective Crisis Response

Effective crisis response refers to our system’s ability to respond to housing loss like the crisis that it is, ensuring families and individuals have a safe place to stay, and helping them quickly access the services and supports needed to return to permanent housing. Effective crisis response is a key tenet of [Opening Doors: Federal Strategic Plan to Prevent and End Homelessness](#). Increasing urgency and improving response time is so important that “length of stay” has become one of the key metrics used by the U.S. Department of Housing and Urban Development to assess the performance of local communities.

Under *Homeward DC*, key action items to improve our system’s crisis response include closing DC General and transitioning to smaller, community-based emergency shelters, implementing year-round access to shelter, and redesigning our rapid re-housing programming. While not the solution to homelessness itself, well-designed shelter facilities (coupled with strong supportive services) are key to our system’s ability to help families quickly and safely stabilize and return to permanent housing.

1.3 Balancing Needs and Constraints: Apartment-Style versus Private Room Shelters

The question is not whether to close DC General or if our community needs emergency shelter as part of its overall service system, but rather how to design emergency shelter facilities to best meet the needs of families experiencing a housing crisis. Much of the debate that preceded the establishment of this committee focused on whether families experiencing homelessness could receive the safety, security, and support needed to stabilize their circumstances and exit homelessness in a private (single) room setting, or whether full apartments were required.

Stakeholders have repeatedly raised a number of concerns about private room settings. Most predominantly, these concerns relate to adequate privacy and safety for families (particularly families with histories of trauma), reducing conflict over shared space, the ability to meet dietary needs/restrictions, the ability to safely store food, medication, and/or formula, and the ability to meet reasonable accommodation requests. These concerns are more fully outlined in Exhibit 1 below.

Exhibit 1. Key Needs Related to Private Room Facilities

Committee participants were asked to identify concerns they had about private room settings. Following is the list of issues raised by the group.

- ❖ Adequate privacy and safety (particularly with regard to bathroom space)
- ❖ Re-traumatization of vulnerable families/children
- ❖ Conflict over shared space
- ❖ Number, age, and gender of individuals utilizing shared spaces (particularly bathrooms)
- ❖ Managing the logistics of people getting ready for school, jobs, appointments
- ❖ Appropriateness for children (e.g., quiet space for homework)
- ❖ Health issues (e.g., communicable diseases, bed bugs)
- ❖ Ability to meet reasonable accommodation requests
- ❖ Ability to meet dietary needs and medication needs
- ❖ Cost effectiveness of providing food if families prefer to buy their own
- ❖ Cleanliness of shared spaces (particularly bathrooms)
- ❖ Community/neighborhood buy-in of facilities
- ❖ Ability to protect religious freedoms (e.g., meals, time/privacy for prayer)
- ❖ Location/isolation of families from the community
- ❖ Ability of families to meet daily living needs
- ❖ Adequate security of personal belongings
- ❖ Capacity of providers to manage conflict in shared spaces
- ❖ Capacity of providers to help households quickly exit to permanent housing
- ❖ Programming rules (cannot be too general)
- ❖ Ability to transition buildings into housing if shelter is no longer needed

While it is critical to develop shelter facilities that can adequately address these needs, there also exists a number of constraints that must be taken into consideration as we move forward with a plan to close DC General:

- ❖ Length of Stay. Length of stay is a critical metric for any crisis response system. Long episodes of homelessness are detrimental to children—impacting school performance, health, and other indicators of well-being. Rapid exits back into permanent housing are not only better for families, but they are also better for the system. Shorter lengths of stay mean more families can be served over the course of a year with the same number of units, resulting in fewer dollars being spent on overflow motel rooms. Although not conclusive, the District’s data suggests there may be a correlation between apartment-style units and longer lengths of stay. (This trend is also seen in data from other large cities, including New York City and Seattle.) There are, of course, several factors that can impact length of stay, including where housing resources are focused to help families exit and where families with reasonable accommodations are placed. However, unit configuration may be at work in the data as well.¹
- ❖ Capital Costs. The average size of each unit is also a consideration in this discussion. Clearly, full apartments are much bigger than private rooms, but even the addition of private bathrooms and/or kitchenettes adds significantly to the square footage requirement for a unit. Larger units mean fewer units per building, which would require additional buildings to yield the necessary number of units to replace the capacity of (and therefore close) DC General. Furthermore, plumbed space is the most expensive on a per square foot basis. Concentrating plumbing risers and runs creates better cost value. If the entire building requires plumbing infrastructure, the average cost per building also increases. Similarly, common kitchens require fire suppression systems to meet building code, which also increase the cost per building.
- ❖ Annual Operating Costs. More buildings required to replace DC General means more resources on an annual basis for staffing, security, maintenance, etc. However, design decisions that do not impact the number of buildings can also have operating cost implications, such as the amount of cleaning/maintenance required and the ability to quickly turn over units and prepare them for new occupants.
- ❖ Timeline for Closing DC General. The number of buildings required will likely have an impact on the timing of closing DC General. Large increases in square footage requirements would necessitate between two and four additional buildings, which would postpone the closure of DC General between one and two years.

It is this combination of needs and constraints that the group was asked to navigate to produce the recommendations in this report.

¹ There was disagreement among stakeholders about whether it could be argued that a correlation exists between length of stay and apartment-style settings. No research currently exists that isolates different variables (e.g., unit configuration, placement of families needing reasonable accommodations, targeting of housing resources to support shelter exit) and allows us to determine the significance of each factor. However, correlation is not causation, and many cities do see this trend in their data.

2. Process Overview

Following issuance of the Mayor’s Order, ICH Director Greenwalt identified a group of 14 stakeholders with relevant expertise, including:

- ❖ Engineering/Building Design
- ❖ Homeless Services Systems Change
- ❖ Federal Homeless Policy and National Best Practices
- ❖ Domestic and Sexual Violence
- ❖ Early Childhood Development
- ❖ Program Design and Shelter Management
- ❖ Budget/Finance

The list of names was submitted to the ICH Executive Committee for vetting. The final list of committee members is provided in Exhibit 2.

Exhibit 2. Design Principles Committee, Appointed Members

- ❖ Stephen Campbell, DC Department of General Services
- ❖ Kate Coventry, DC Fiscal Policy Institute
- ❖ Carol Dostert, Consumer Representative/Advocate
- ❖ Cortney Fisher, DC Office of Victim Services and Justice Grants
- ❖ Amber Harding, Washington Legal Clinic for the Homeless
- ❖ Peg Hacskaylo, DC DASH
- ❖ Tamaso Johnson, DC Coalition Against Domestic Violence
- ❖ Jamila Larson, Homeless Children’s Playtime Project
- ❖ Sharon McDonald, National Alliance to End Homelessness
- ❖ Kelly McShane, Community of Hope
- ❖ Judith Sandalow, Children’s Law Center
- ❖ Margaret Riden, DC Alliance of Youth Advocates
- ❖ Laura Zeilinger, DC Department of Human Services

All meetings of the ICH operate according to the provisions of the District’s Open Meeting Act. In addition to the appointed members, several other interested stakeholders participated in one or more of the committee meetings. A list of participating individuals can be found in Appendix A.

The committee convened three times over the three-week period, and a subset of committee members helped organize and conduct a consumer focus group. In addition, ICH Director Greenwalt had several individual discussions with committee members between meetings to answer questions and solicit feedback, which provided the input needed to continue shaping and refining the group process.

- ❖ Meeting #1: Wednesday, September 30 (9am – 11:00am). The first meeting began with broad framing on the systems change work happening in the District under *Homeward DC* to help participants better understand the specific role of shelter in the broader system, as well as the other pieces of work underway to help transform the system into one that is focused on permanent housing. The meeting then moved into identification of key concerns about private room settings,

which was used as a backdrop for the subsequent discussions on design elements. The purpose of identifying these concerns upfront was to push the group to consider whether concerns could be mitigated/addressed through strategic and creative design choices (which would allow the District to adhere to existing budget and time constraints), or in contrast, if concerns could only be addressed in an apartment-style setting. The meeting concluded with an initial discussion about bathroom facilities.

- ❖ Meeting #2: Wednesday, October 7 (9am—11:00am). The second meeting delved deeper into design elements. The meeting began with a presentation on different design options across four key areas: 1) Meals/Food/Refrigeration; 2) Study Space; 3) Recreation Space; and 4) Bathrooms. Stakeholders were then divided into breakout groups and asked to bring back specific recommendations on these four topics. The report out revealed a significant amount of consensus on the first three topics, but that additional detail was needed to help stakeholders more fully assess tradeoffs with regard to bathroom space.
- ❖ Consumer Focus Group. Between the second and third meeting, a focus group was conducted at DC General to solicit feedback from existing DC General clients. (For more information on the focus group, see Appendix B.) Members of the committee attempted to organize a second focus group of clients that had previously stayed at DC General and are now in permanent housing and/or clients staying at other shelter facilities in the District, but there was not enough time to identify and convene interested participants.
- ❖ Meeting #3: Wednesday, October 14 (9am—11:00am). The third committee meeting began with a discussion of the feedback obtained via the consumer focus group. The group proceeded to review and refine recommendations related to kitchens, study space, and recreation space. The group then moved to an in-depth review of cost implications and tradeoffs associated with different bathroom configurations. The meeting concluded with a vote on various bathroom configurations.

Because some individuals can be hesitant to speak up in a large group format, the process also included the use of “reflection” worksheets at the conclusion of the second and third meetings. The purpose of the worksheets was to determine the extent to which the recommendations that were emerging reflected the true sentiments of the stakeholders around the table, as well as to get insights on where people still had questions or concerns. Information from the worksheets has been incorporated into this report.

Timing Implications Related to this Report

While many interested stakeholders offered testimony at the October 13 City Council hearing on the *Advancing Year Round Access to Shelter Policy and Prevention of Homelessness Amendment Act of 2015, Bill 21-352*, a majority of individuals participating in the this committee indicated that their perspective changed throughout the course of the committee process, and more specifically, as a result of learning more about the cost implications and tradeoffs related to different bathroom configurations, which were discussed in depth during the October 14 meeting.² Under ideal circumstances, this committee would have concluded its work and submitted its recommendations prior to the hearing on the legislation so that stakeholders could offer testimony based on a fuller understanding of the facts, but in this instance, the

² Of the ten reflection worksheets submitted following Meeting #3, eight stakeholders indicated that their perspective had changed as a result of the participating in the process, one stakeholder indicated her perspective changed “a little,” and one indicated that he still did not have a clear opinion.

timing simply did not allow for that to happen. As such, it's important to note that perspectives may have shifted following the hearing and additional conversations with stakeholders may be beneficial.

3. Recommendations

3.1 Research on Shelter Design

Very little research has been conducted to date specifically on the design of emergency shelter facilities for families experiencing homelessness. However, there is a growing body of research on the field of design more generally. Throughout the world, and increasingly in the United States, smart design is being used to help overcome challenges related to increased competition within the housing market and skyrocketing housing costs, particularly in larger urban areas. The "tiny house" movement has attracted more and more attention as it offers housing accommodations that are both more affordable and ecologically friendly. There are many ideas from this movement on how to use space in flexible ways that are applicable to our discussion on shelter redesign.

Further, a body of literature exists on the different ways to think about the concept of "home." In terms of function, a home is usually thought to meet daily living needs, including eating and sleeping, bathing, washing/drying of clothing, sanitation and waste management, and securing body and possessions. However, psychological needs create a different set of functions for the home, including claiming territory, relaxing, securing peace of mind, maintaining a positive self-identity (pride, respect, dignity), protecting oneself from others, maintaining a sense of consistency in one's surroundings, providing for self and others (independence, self-sufficiency), social support (often family but also friends/roommates), and maintaining control/ownership over a space.³ Borrowing ideas from this research, the idea of "home" is not related to specific structural elements or aspects, but psychological feelings related to safety, warmth, control of environment, etc.

This literature is relevant in our discussion about shelter design, because even though emergency shelters are not synonymous with permanent housing and should not be thought of or used as such, it is important that families accessing emergency shelter experience the functional and psychological benefits of "home." However, there may be a variety of ways to achieve these functional and psychological benefits.

3.2 Overarching Principles

The remainder of report describes the recommendations that emerged through this process. Before getting into specific design features, however, it is important to note that two key themes surfaced over and over in the discussion:

- ❖ Flexibility is Key. Perhaps not surprising, opinions on essential design elements varied from one person to the next based on personal experiences, preferences, and priorities. While there was a significant amount of consensus by the end of the process, one key takeaway is that flexibility is key. In order to maximize the use of space and increase the functionality of the facilities, developers should consider how space can be used flexibly to accommodate the different needs and preferences of different people over time. For example, stakeholders thought it would be important to take into consideration a facility's proximity to other community amenities (e.g.,

³ Miller, Abbilyn Marie. [Determining Critical Factors in Community-Level Planning of Homeless Service Projects](#). University of Illinois at Urbana-Champaign, 2012.

adjacent parks, libraries) to help meet needs of clients in a more cost effective manner. Examples of how flexibility can be built into the facilities are described in more detail below.

- ❖ Maximize Privacy and Control. Flexibility is key to using each unique building/location strategically in large part to maximize options for privacy and control over personal space. Stakeholders felt that more desirable design options existed (e.g., private bathrooms) but that it was important to balance desires with constraints, particularly related to the timing of closing DC General. Given these tradeoffs, however, stakeholders felt that it was critical for developers to capitalize on different options within each facility to maximize privacy and control for clients.
- ❖ Design Elements Cannot Be Considered in Isolation of Program Policy. Stakeholders reinforced over and over that effective program policy is “make or break” for the design elements under consideration. For example, shared bathrooms are not feasible if policy prohibits parents from leaving children unattended (such as current policy at DC General). Under such a scenario, if a parent needed to use the bathroom in the middle of the night, this would require that the parent wake a sleeping child to bring him/her into the bathroom. Stakeholders gave other examples of policies that will need to be reconsidered in order to make recommended design elements work. Further, stakeholders reinforced that policy must of course be effectively implemented, which will require clear expectations written into contracts, well-trained program staff, and improved monitoring efforts. Consequently, a key recommendation is that this work group continues in the months ahead to provide input on various aspects of the family systems redesign. One specific task should be the review of existing family shelter policy to produce recommendations on changes or enhancements needed. This work should occur after the design choices have been finalized and before the Department of Human Services begins procurement for operation of the new facilities.

3.3 Recommended Design Elements

The recommendations in this report reflect enhancements or additions to baseline assumptions governing the design of the new facilities. (See Exhibit 3 below for more detail on the baseline assumptions.) Many ideas were discussed – some of which were ruled out as infeasible. This report does not attempt to capture the entire breadth of options discussed, but rather those that emerged as the most feasible and desirable. In some cases, opinions were divided on the best option; those instances are noted, with an attempt to briefly explain pros and cons of each perspective.⁴

Exhibit 3. Baseline Design Assumptions

- ❖ All facilities are expected to have a residential, welcoming, family/community-oriented feel. They will incorporate warm/cheerful colors, artwork, materials, and texture as part of the overall design aesthetic.
- ❖ Supportive services will be provided onsite under separate contract.
- ❖ There will be a maximum of 50 units per building and 10 units per (residential) floor.
- ❖ Private rooms will be, on average, between 300 and 400 square feet. There will be 3-4 beds per unit, with the potential for a trundle bed to be added as needed. Rooms will include modest storage for clothing, chairs, and a table to sit/study. Rooms will have locks.
- ❖ Each floor will have minimally one room with a private bathroom, one family style bathroom (with sink, toilet, and bathtub/shower), one multi-fixture bathroom for men, and one multi-

⁴ Stakeholders reviewed data on the size and composition of households entering the shelter system to help inform recommendations. Average family size is 3.5 persons, and nearly 45% of households have a child under the age of two. This data is briefly summarized in Appendix C.

fixture bathroom for women (each with three toilet stalls and three shower stalls).

- ❖ Each floor will allow space for a reception/staff desk that is positioned to see common areas.
- ❖ Each floor will have some space for study and adjacent common circulation.
- ❖ Each floor will have laundry facilities.
- ❖ Common spaces will include a space for dining, a warming kitchen (including counter space, sink, full refrigerator, and warming oven), office space for staff, meeting space, outdoor play space (active and passive), and facility storage space.
- ❖ Each facility will have minimally ten spaces for parking.
- ❖ Each facility will be fully ADA compliant and compliant with HSRA DC Code 4-754.24.

Private Rooms

- ❖ There should be no more than ten rooms per floor. Rooms should be clustered with 4-5 rooms on a given side or wing of the floor to provide a greater sense of community.
- ❖ Rooms should allow clients as much control over their space as possible (e.g., control over windows/airflow, lighting, storage of personal belongings, locks/security).
- ❖ Rooms should be in warm/cheerful colors and allow for some level of personalization (e.g., pictures, rugs, small decorations).
- ❖ Each room should have a desk or small table with lamp lighting to allow for work, games, meals, etc.
- ❖ Each room should allow adequate floor space and appropriately placed electrical outlets for placement of a mini-refrigerator.
- ❖ Rooms should provide creative solutions to maximize storage (under bed drawers, shelving, etc.)
- ❖ Rooms should include a mirror and appropriately placed electrical outlets to allow clients the flexibility to get ready for work/school in their rooms if desired.
- ❖ To provide more flexibility with regard to placement of large families, there should be at least one set of adjoining rooms on each floor that could either be used separately for two families or jointly for one large family.

Kitchen/Meals

- ❖ There was consensus that clients must have access to both mini-refrigerators and microwaves, but there were different opinions regarding whether they should be made available in rooms as standard protocol.
 - Committee members generally thought all rooms should have a mini-refrigerator. However, participants of the consumer focus group expressed concern about food in rooms leading to bugs and rodents. They did, however, feel that access to refrigerators was critical, especially for storage of medicine and formula. Some focus group participants felt that it would be better to make mini-refrigerators available upon request.
 - With regard to microwaves, many stakeholders thought that a bank of microwaves available on each floor in a common area was more desirable than having them placed in each room. This would allow microwaves to be cleaned/maintained more easily (without staff having to enter a client's personal space), and it would allow clients ready access to sinks to clean dishes. However, a few stakeholders thought having them in the room was preferable due to the flexibility it allows clients (e.g., heating a baby's bottle in the middle of the night without having to leave the room).
 - Space and electrical outlets in rooms should allow for both, and location of the equipment can be resolved via discussions on program rules.
- ❖ Clients should have shelving space in the rooms or a locked cupboard in a central location for dry food/snacks.

- ❖ Committee members discussed at length the need and desirability of having a full kitchen (with a stovetop/oven) available in each facility. (This is in contrast to a warming kitchen, which is included as part of the base assumptions.)
 - With regard to benefits, a full kitchen could be used for programming/training, and it could also be reserved for use when a parent wanted to prepare a meal for his/her family.
 - The drawbacks, however, included concern over conflict if families weren't following rules (e.g., cleaning up after themselves appropriately), the increased construction cost to meet building code related to fire suppression systems, and questions over whether the space would actually be used.
 - Based on the reflection worksheets, two people felt strongly that at least one kitchen in each facility was essential, but the majority of stakeholders seemed to put this in the "nice to have but not essential" category.

Study Space

- ❖ The overarching theme with regard to study space is that it is important to provide different ways to meet the needs of different individuals/families.
- ❖ All rooms should have a desk or table with lamp lighting to allow homework to be completed within rooms.
- ❖ A room for small group study (e.g., 2-3 people) should be provided on each floor. A larger study space/library should be made available on the main floor for use by all clients, but this space should be designed flexibly so that the room can be used for other purposes. For example, portable study carrels could be used to create privacy for study but could be removed to allow the room to be used for meetings or games. Participants of the consumer focus group also felt that it was important to have separate space for use by adults (for employment search) and youth (for homework).
- ❖ Study rooms should have windows that allow parents to monitor the activity of older children while entertaining smaller children in an adjacent room.
- ❖ Access to computers is important, but opinions differed on whether desktop or laptop computers were more desirable.
 - Some stakeholders maintained that computer labs often go unused and were therefore not a good use of limited space; they thought making laptops/tablets available for checkout would create more flexibility.
 - Some consumers participating in the focus group, however, thought that clients would not take good care of laptops and that desktops were a better solution.
- ❖ Many stakeholders thought that study space could be reduced if the facility was close to a library that provided access to computers and printers.

Recreation Space

- ❖ Given the large number of very young children in the family shelter system (approximately 45% of households have a child under age two), specific play space should be provided for young children with age-appropriate furniture, equipment, toys, and books.
- ❖ To save space, communal space should be designed as multipurpose rooms (e.g., dining, meeting, recreation space). Partition walls should be considered to allow more flexibility.
- ❖ Likewise, age-appropriate outdoor recreation space should also be provided for different age groups (e.g., a jungle gym, basketball court). Outdoor space should offer privacy (e.g., via landscaping) but does not have to be gated/locked to avoid the sense of separation/isolation.
- ❖ Proximity to other neighborhood amenities should be taken into consideration. For example, if the facility is adjacent to a school or park, separate outdoor place would not be necessary.

Bathrooms

Bathrooms were the largest source of concern for stakeholders. Due to concerns over privacy, safety, cleanliness, and convenience, most stakeholders seemed to begin the committee process with the opinion that private bathrooms in each room were the optimal solution. However, after further analysis and discussion about the costs and tradeoffs, a number of stakeholders changed their position.

A large continuum of options exist, each with a different set of costs and tradeoffs. (For more detail, see Appendix D: Bathroom Options – Rough Order of Magnitude Costs.) In an ideal world with unlimited resources and property availability, bathrooms in each room would be optimal. In this situation, however, adding bathrooms to each room not only drives up the cost per building, but it also increases the space requirements for each unit (which subsequently increases the number of buildings needed to meet the 288-300 unit requirement to close DC General). If additional buildings are needed, the Department of General Services estimates that it would likely delay closing DC General by between one and two years. Further, in addition to the (one-time) increase in capital expenditures, there would be an increase in annual operating expenses associated with each additional building – resources that could otherwise be used for other needs within the homeless services system (e.g., permanent housing).

To help stakeholders understand tradeoffs in a more concrete way, a number of different scenarios were examined:

- ❖ Base Case: The base scenario includes one private room with bathroom per floor, one family style bathroom per floor (with sink, shower/tub, and toilet), and multi-fixture shared bathrooms (one for men and one for women) on each floor. Each multi-fixture bathroom is assumed to have three shower stalls and three toilet stalls. This base case is achievable within the existing budget.
- ❖ Option 1: In addition to the base case, this option would include one additional private room with bathroom per floor per site.
- ❖ Option 2: In addition to the base case, this option would include one additional family style bathroom per floor per site.
- ❖ Option 3: All rooms have a private bathroom.
- ❖ Option 4: All units are apartment-style (efficiencies), including a private bathroom and kitchenette.

Stakeholders were conflicted over the choice of maximizing private bathroom space with having to delay closing DC General. While discussing these options, one stakeholder suggested a hybrid approach of one building with 100% of units containing a private bathroom, and all other buildings as base case or, preferably, option 2 (with a second family style bathroom on each floor). This option would increase the per building capital cost for one building only, and the net loss of units (8-10) in that one building would still keep us within the target range of the number of units needed to close DC General. This option is presented as Option #5 in the table below.

There were some questions/concerns raised about equity with this particular option, but stakeholders pointed out that there is already broad variation with regard to our existing apartment style shelter stock. Further, it would increase flexibility to meet the needs of households that need reasonable

accommodations or otherwise have significant safety or privacy needs by more than doubling the number of rooms with private bathrooms (from 30 under the base case to approximately 65).⁵

As Exhibit 4 reveals, and as mentioned throughout this report, different people have different perspectives based on their own experiences and priorities. One or two stakeholders expressed the opinion that maximizing the capacity of the facilities was the most important principle (as reflected in the desire to stay with the base case). There are certainly other options along this continuum that the group did not have time consider, but the overwhelming recommendation was to maximize private bathroom space however possible without delaying closing DC General.

Exhibit 4. Recommendations on Bathroom Configuration*			
Scenario	# Votes (Appointed Members)	# Votes (Other Participants)	# Votes (Total)
Base Case	1	1	2
Option #1	0	1	1
Option #2	4	5	9
Option #3	2	1	3
Option #4	0	0	0
Option #5	2	1	3

*Numbers represent those present for the third meeting and interested in recommending a specific approach. Some participants abstained from voting.

The committee also discussed design elements to improve the privacy and security of the shared, multi-fixture bathroom space. Key recommendations include: 1) lockable shower stall doors that extend to the floor; and 2) the addition of a small area inside the stall with a bench for undressing/dressing that can be separated by a shower curtain to keep clothing dry and/or allow for a child to sit while the parent is showering. Ideally, each stall would offer these privacy features, but if space limitations prevent this addition for each stall, then minimally one male and one female stall on each floor should include this enhancement.

Lastly, and importantly, given the large percentage of households with children under age two, portable bathing tubs that can be assigned to a family are recommended both to increase the ease of bathing infants as well as to reduce concerns about cleanliness and sharing of bathtub space.

Summary

As discussed throughout this report, the overarching principle that stakeholders kept coming back to was to design with creativity and use space flexibly to maximize privacy and control over personal space for

⁵ The Department of Human Services received approximately 280 requests for reasonable accommodations across the entire family shelter system in FY15, which represents approximately 20% of family shelter placements during the year. Because one-third of the shelter stock is (and will continue to be) comprised of apartment-style units, the District should not have difficulty meeting reasonable accommodation requests with the existing stock. However, we know that the homeless services system serves a high number of families that have experienced domestic or sexual violence or other forms of trauma. Because of data privacy issues, we currently do not have very robust data on the number of households fleeing an active domestic violence situation nor the number of households that would fall into the “high security/high privacy need” category. Consequently, additional flexibility within the system to meet the needs of these households is both desirable and advisable.

families. Specific recommendations on enhancements to the baseline assumptions are offered to further that objective.

Members of the committee were grateful to have the opportunity to weigh in on this important project. As mentioned earlier in this report, stakeholders provided numerous examples throughout the process of how policy and programming will be critical to making these design elements work. Accordingly, it was recommended that this body transition into an ongoing work group of the ICH to provide feedback on the family system redesign, and specifically on the policy changes or enhancements needed to ensure these new facilities can help the District achieve its goal of making homelessness rare, brief, and nonrecurring.

Appendix A. ICH Committee on Design Guidelines: Participating Stakeholders

Name	Organization
Stephen Campbell*	Department of General Services
Laura Zeilinger*	Department of Human Services
Cortney Fisher*	Office of Victim Services and Justice Grants
Sharon McDonald*	National Alliance to End Homelessness
Kate Coventry*	DC Fiscal Policy Institute
Amber Harding*	Washington Legal Clinic for the Homeless
Maggie Riden*	DC Alliance of Youth Advocates
Peg Hacskaylo*	District Alliance for Safe Housing (DASH)
Tamaso Johnson*	DC Coalition Against Domestic Violence
Kelly McShane*	Community of Hope
Judith Sandalow*	Children's Law Center
Jamila Larson*	Homeless Children's Playtime Project
Carol Dostert*	Consumer Representative
Kevin Trussell	Contemporary Services
Curtrina Hoston	Contemporary Services
Eva Chavez	DC Doors
Pam Lieber	Advocate
Yvette Mosley	Transitional Housing Corporation
Daphne Glanton	Transitional Housing Corporation
Jesse Lovell	DC for Democracy
Nancy Mercer	Corporation for Supportive Housing
Ebony Rankin	US Department of Housing and Urban Development
Brett Gagnon	US Department of Housing and Urban Development
Chris Dyer	Office of Victim Services and Justice Grants
Lisa Franklin-Kelly	Department of Human Services
John Healy	Ward 3 Resident
Tininka Rahman	Children's National Health System
Alana Intrieri	Chairman Mendelson's Office
David Whitehead	Washington Interfaith Network
Jessica Li	Department of Human Services
Lanita Taylor	Contemporary Services
Daniel Rappaport	Office of Victim Services and Justice Grants
Damon King	Children's Law Center
Jay Thal	Ward 3 Resident
Jenna Cevasco	DC Deputy Mayor for Health and Human Services
Marcia Armstrong	PSI Services
Monica Kamen	Fair Budget Coalition

*Appointed Committee Member

Appendix B. DC General Focus Group Notes

A focus group with current residents was held at the DC General Family Shelter on the evening of October 13, 2015. The Homeless Children's Playtime Project recruited parents to give their feedback on proposed design features for the family shelters that will replace DC General.

The focus group was conducted by:

- Kristy Greenwalt, Executive Director of the District Interagency Council on Homelessness (ICH)
- Kate Coventry, DC Fiscal Policy Institute and appointed member of the *ICH Committee on Design Guidelines for Emergency Housing for Families Experiencing Homelessness*
- Nancy Mercer, Corporation for Supportive Housing (CSH), national technical assistance provider on homeless services system redesign and systems change; interested stakeholder/public participant in *ICH Committee on Design Guidelines for Emergency Housing for Families Experiencing Homelessness*

Participants:

- The focus group began with 8 parents (2 fathers and 6 mothers). An additional 6 parents joined the focus group after it began (1 father and 5 mothers).
- Parents were of varying ages and had between 1 and 4 children. Children ranged in age from 2 months to 14 years old.

ICH Director Kristy Greenwalt had all attendees introduce themselves and then offered a brief summary of the Mayor's plan to replace DC General with smaller shelters. She explained that the purpose of the focus group was to solicit feedback on possible design features from attendees as they have direct experience of staying in family shelter.

Bathrooms:

- Parents raised the following issues/concerns about bathrooms:
 - *Cleanliness*. Bathrooms at DC General are not cleaned enough and have problems with mold. There are also have been outbreaks of scabies.
 - *Access to tubs*. At DC General, parents have to wash small children in the sink and it is very difficult logistically.
 - *Enforcement of rules and more monitors*. At DC General, there is one monitor for every 20 families and the monitor cannot effectively ensure rules are followed. Men use the women's restroom, which makes women and girls uncomfortable. Focus group members are reported people having sex in the bathrooms.
 - *Bathroom Etiquette*. Folks do not clean up after themselves, leaving toilets unflushed and not properly disposing trash. Parents suggested that residents be required to attend etiquette classes.
- When asked about the importance of a private bathroom (on a scale of 1 to 10, with 10 being most important), focus group participants provided the following ratings:
 - 3 (1 parent)
 - 4 (3 parents)
 - 4-5 (1parent)
 - 10 (2 parents)

- Two parents reported that having their own private bathrooms was critical. One mentioned that he had a disability and was waiting for a disability room. There was agreement from all attendees that families with disabilities should have their own bathroom.

Food storage, Cooking, and Dining

- The parents expressed concerns about private food storage and cooking facilities leading to issues with cleanliness (and therefore bugs and rodents).
- They also expressed concerns that ovens and microwaves could lead to fires (or minimally fire drills/false alarms).
- However, there were also numerous complaints about the quality of the food at DC General.
- One parent reported that her kids would not eat the cafeteria food and that she wasn't able to cook very many things without a refrigerator and microwave. She also reported that the things she could make were more expensive and it was difficult to afford these foods with her food stamps, so she wasn't able to stretch her budget over the full month.
- Parents also reported the need to store medicine.
- General agreement that best idea would be to have families request microwave and fridges for their rooms if they wanted them (upon request).
- Six parents were willing to share kitchen space but noted that shared kitchens would only work if families were able to store food securely.

Study and Computer Space

- One parent said it was very important that families be able to set up study space in their rooms and that they have access to furniture that is sized for small children.
- Parents preferred the idea of a computer lab or labs to a laptop loan system. Parents thought laptops would get broken. There was a suggestion to have designated "homework hours" in the computer lab and to have a separate lab for parents who need computer access for doing job searches and other activities.
- Having Wi-Fi in the building would help parents be productive in job searches.
- Parents also wanted tutoring and mentoring programs onsite and reported it was difficult to get to tutoring site in Southeast.

Playspace and Recreation

- Parents agreed that the new shelters needed more recreation options for kids. At DC General, kids can only attend Playtime Project once per week.
- Parents also agreed that more programming was needed for babies and children under age 5.
- Parents appreciated the playground at DC General but think too many children are on the playground at a time and that one monitor is not sufficient, especially since the monitor has to leave the playground to escort kids to the bathroom.

Laundry

- Onsite laundry is essential because kids create lots of dirty laundry and clean clothes are needed for job interviews/work.
- Parents suggested that the new shelters provide more linens such as sheets and towels.

General Comments

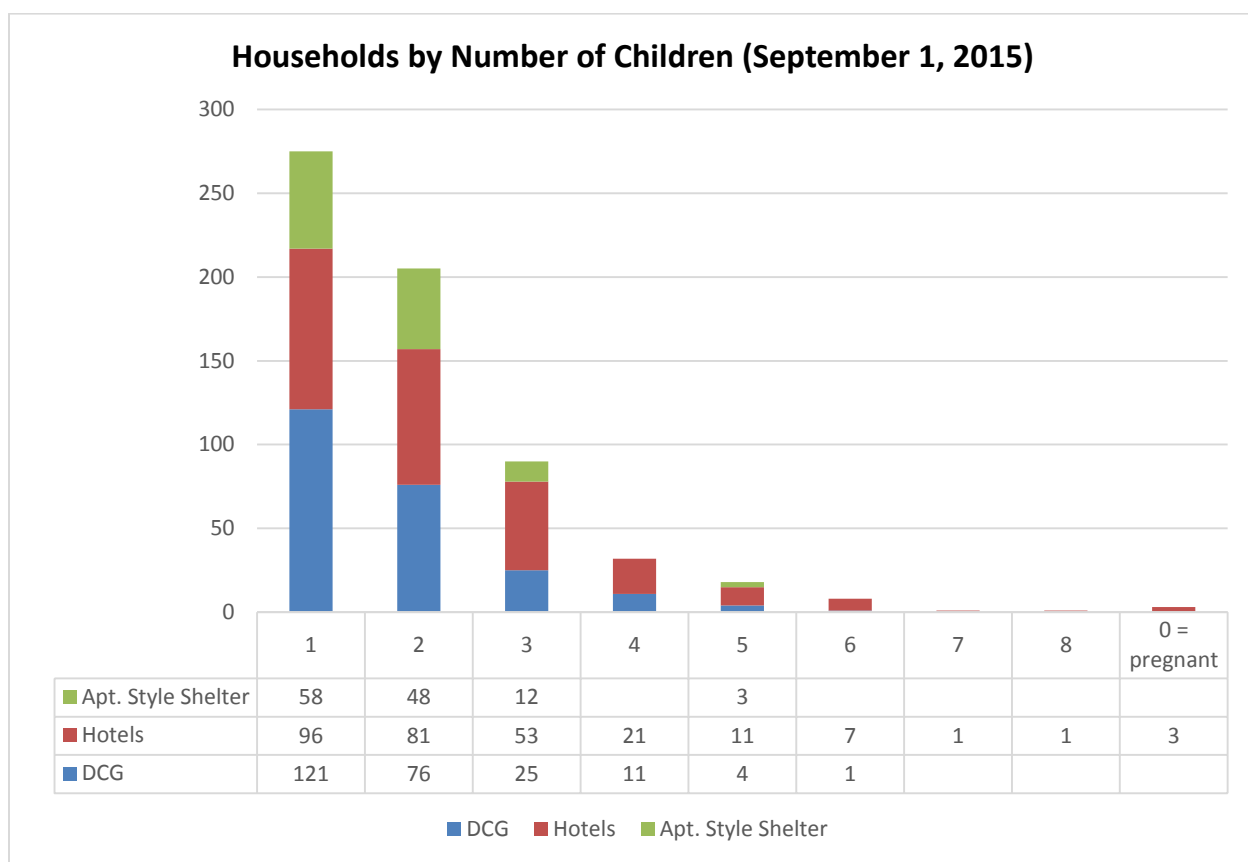
- One parent opened the conversation by saying that "shelter style" was ok, because otherwise she thought people would get too comfortable. She noted that her family lived in shelter growing up. She thought it would be important to have more rules/restrictions.

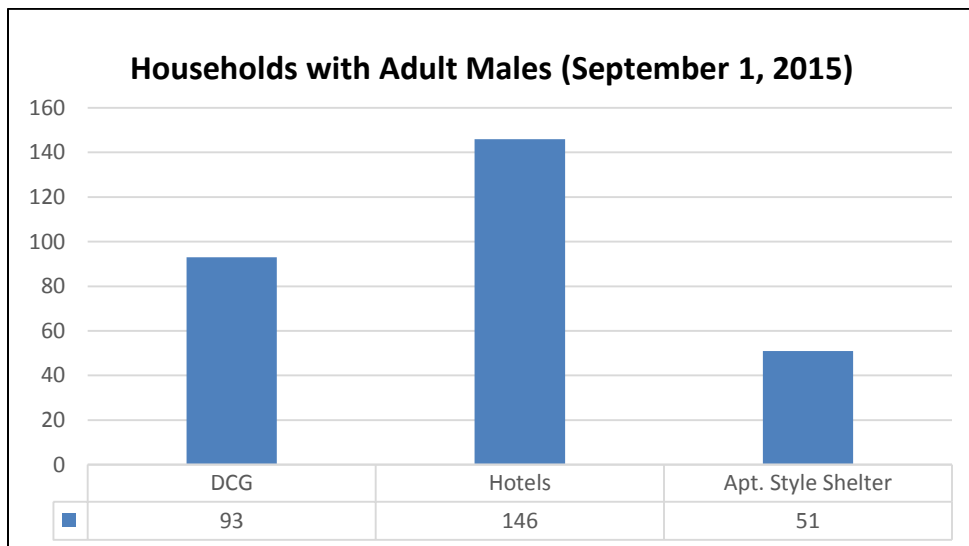
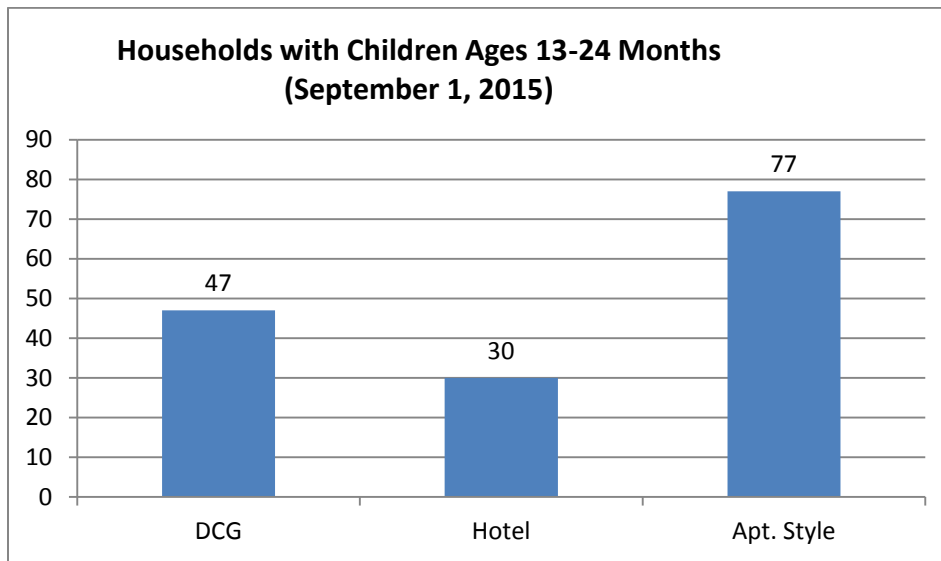
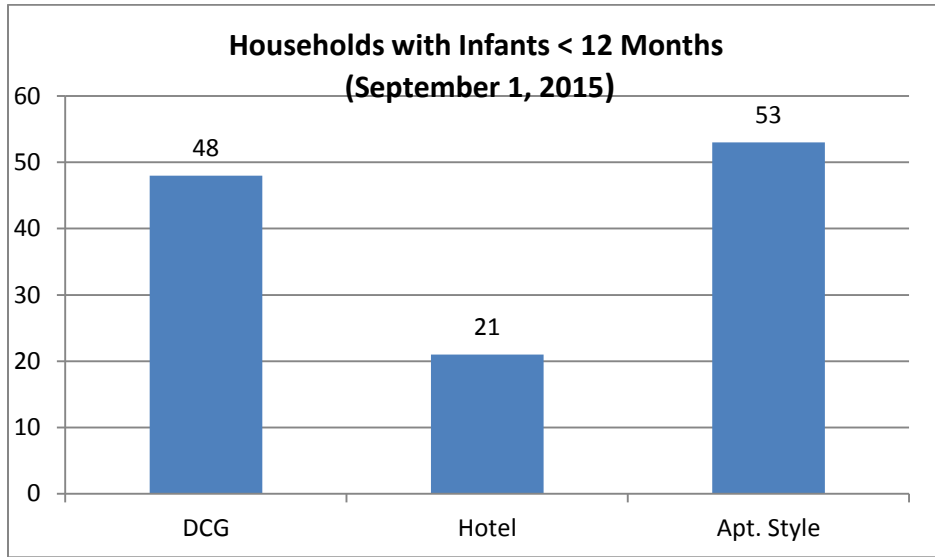
- Parents are very concerned about the spread of disease in shelter and would like the new shelters to require that all residents, staff, and volunteers have health certificates.
- Parents are also concerned about bed bugs and recommended that residents be required to wash all belongings before entering shelter.
- Participants want more help with employment.
- One parent suggested having a mobile clinic visit the new sites or have staff help residents locate local medical care.
- Parents recommend that the new shelters be cleaner than DC General. Particularly, air conditioning units need filters and floors need to be washed frequently as babies need places to crawl.

Appendix C. Household Size and Composition

To enable committee members to consider specific scenarios around room occupancy and design of shared space, we looked at the composition of households in the system as of September 1, 2015. While the number of households in the system varies from one day to the next, the percentage and distribution of household types remains fairly consistent (e.g., these figures look very similar to data that was examined this time last year as the ICH began work on the development of Homeward DC).

On average, there are 3.5 persons per household. A significant number of households are headed by young parents (aged 18 to 24). Consequently, many of the children in the shelter system are also very young (nearly 45% under age two). The system does serve some very large households (5+ children), but these households constitute less than 5% of families entering the system. Finally, over 45% of household have an adult male present.





Appendix D: Bathroom Options – Rough Order of Magnitude Costs

[Internal: Please see separate attachment.]