



Men's Shelter of Charlotte, Inc.

AGENCY STRATEGIC GOALS & ACTIVITIES

Strategic Plan Period 2011-2015

MISSION: *The Men's Shelter of Charlotte is dedicated to providing safe emergency shelter while working to end homelessness for each man.*

VISION: *Our vision is to serve as the catalyst for systemic change to end homelessness in our community.*

VALUES: Commitment to Excellence – *the Men's Shelter of Charlotte has passion for researching and implementing best practices that promote an end to homelessness through measureable outcomes.*

Continuous Quality Improvement – *the Men's Shelter is committed to ongoing assessment, evaluation and understanding that produces defined results.*

Dedication to Partnerships – *the Men's Shelter of Charlotte promotes partnership between its professional staff, the board, its volunteers and its community providers.*

GOALS:

1. Complete Merger Transition Plan

Activities:

- a. Phase 1 Merger and Administrative Consolidation (May 2010)
- b. Phase 2 Program Consolidation and Integration (Sept. 2010)
- c. Phase 3 Consistency and Strategic Planning (2012)
- d. Phase 4 Open Homeless Transition Center for Men (2015)

2. Serve as safety net for homeless men by identifying and filling service gaps

Activities:

- a. Prevention & Outreach (ongoing)
- b. Basic Needs – Emergency Shelter (ongoing)
- c. Supportive Services (ongoing)
- d. Continuing Care (ongoing)
- e. Service Delivery Collaborations with Partner Agencies (ongoing)

3. Ensure an adequate supply of emergency shelter beds

Activities:



- a. Implement 500 Bed Plan (May 2010)
- b. No Turn Away Policy (ongoing)

AGENCY STRATEGIC GOALS & ACTIVITIES

2011-2015
(continued)





4. Offer a continuum of supportive services that help men move beyond homelessness

Activities:

- a. Complete Community Catalyst Fund Cohort with Bridgespan (summer 2010) 
- b. Develop Homeless Transition Center for Men (2015) 








5. Implement Master Development Plan to ensure adequate agency funding

Activities:

- a. Redesign funding applications with Mecklenburg County and United Way to combine all agency services into single program called “Supportive Shelter” (spring 2010) 
- b. Complete planning process with Capstone Advancement Partners (2011) 
- c. Implement Planned Giving Program (2012) 
- d. Initiate Funding Campaign for Homeless Transition Center (2012) 








6. Board Development

Activities:

- a. Implement new committee structure (2010) 
- b. Complete board development work with Coolspring Center (2010) 
- c. Complete strategic planning process (2011) 
- d. Implement *The Nonprofit Secret* as required reading for board members (2010) 
- e. Implement comprehensive new board member orientation (2011) 
- f. Initiate board assessment process (2011) 
- g. Initiate board recruitment process based on three identified criteria: 1) passion for mission, 2) participation in development, and 3) participation in good governance (2011) 



7. Management & Staff Development

Activities:

- a. Implement Program Policy and Procedures Manual (2011) 
- b. Improve Finance & Human Resources Policies and Procedures (2010) 
- c. Implement Master Community Development Plan (2010) 
- d. Complete master inventory of agency equipment (2010) 
- e. Institute workplace safety training (2010) 
- f. Institute Choice Theory/Reality Therapy training and implement lending library (2011) 
- g. Enhance performance review process and staff development plans to include all agency personnel and implement electronic format (2011) 

8. Strategic Planning

Activities:

- a. Implement strategic plan (ongoing) 
- b. Evaluate and update strategic plan (ongoing) 

CLIENT SERVICES GOALS, OUTCOMES, & INDICATORS

FY 2011-2012

MISSION: *The Men's Shelter of Charlotte is dedicated to providing safe emergency shelter while working to end homelessness for each man.*

GOALS:

1. **Provide safe shelter and meet basic needs**
2. **Address barriers related to homelessness and self-sufficiency**
3. **Obtain and maintain more appropriate housing**

CLIENT SERVICES TARGETS:

Basic Needs (Emergency Shelter):	2,500 unduplicated men served per year
Emergency Shelter Average Census:	500 (including mats) men sheltered on average each night
Prevention & Outreach:	100 people engaged who are living on the streets or in camps
Continuing Care:	250 men moved into more appropriate housing
Supportive Services:	1,000 men engaged in support activities per year
Comprehensive Case Management:	700 men on caseloads with service plans per year
Family Reunification:	150 men per year reunited with family

PROGRAM DESCRIPTION:

The Men's Shelter of Charlotte has a singular program – Supportive Shelter – that is comprised of four interdependent components: Prevention & Outreach, Basic Needs, Supportive Services, and Continuing Care.

OUTCOMES MEASUREMENT:

The Men's Shelter of Charlotte measures multiple indicators to determine success towards our goals. How do we do this? By collecting and analyzing client level data in both our client services database and in hardcopy formats, we can easily aggregate data to measure each indicator. Each set of indicators measures progress towards a stated outcome. Progress made on each outcome determines our overall success in meeting each stated goal. Why do we do this? By measuring goals, outcomes, and indicators, we can determine how effective our agency is in helping clients meet their needs. Our client's success is the largest measure of our success.

STRATEGY FOR ACHIEVING GOALS:

The Men's Shelter of Charlotte takes a singular program approach. We understand that for our clients to be successful, we must individualize services provided to each person. With multiple programs, services are often delivered in silos and programs can inadvertently become competitive with one another. That's why the Men's Shelter is designed around a singular program construct. There are four components to our program: Prevention & Outreach, Basic Needs, Supportive Services, and Continuing Care. These components are completely interdependent - sharing clients, sharing resources, and often sharing staff. While each component has a team leader, they all fall under the guidance of a single client services director. Everyone knows how to do everyone else's job. We consider our program design to be a continuum of care within itself that is purposely created with the client as our center focus. Once we know what a client needs and wants, our team gets to work finding the most effective and efficient methods of delivering services for that client.

CAPACITY FOR ACHIEVING GOALS:

The Men's Shelter of Charlotte has two shelter facilities working together using what we call our *Two Campus-One Shelter* approach. Our professional staff works around the clock making sure our shelters operate smoothly, consistently, and warmly welcome all who seek our assistance. Our case management staff is available whenever our clients need them, including 24 hour access on call as needed. Our senior leadership is always available in person or by phone to support our staff. In addition to our professional staff, the Men's Shelter has over 2,000 volunteers, 100+ congregations, dozens of businesses, and more than a dozen nonprofit and local government service providers working with us on our campuses to serve the needs of our population. Our Community Development Team ensures that our agency has adequate resources – financial, volunteer, and in-kind – to successfully carry out our mission. Our administration ensures that our staff has the support (pay, benefits, and supervision), training (job skills and professional development), and voice (input and professional latitude) to effectively accomplish our goals. The Men's Shelter is considered a leading agency in our community and works collaboratively for the benefit of our clients and to help end homelessness for all people.

GOALS, OUTCOMES & INDICATORS:

Goal #1: Provide safe emergency shelter that meets basic needs

Outcome

1. All clients accessing MSC's Basic Needs Component (overnight shelter) will receive safe shelter that meets basic needs (i.e. shelter, food, clothing, hygiene, etc.).

Target: 2,500 clients

Indicators

- a. On average at least 500 men per night will receive safe shelter each year (Target = 500 avg)
- b. 100% of men receiving shelter will have access to 3 nutritious meals per day during their entire length of stay (Target = 2,500 of 2,500)
- c. 100% of men receiving shelter will have access to clothing, showers, and hygiene kits during their entire length of stay (Target = 2,500 of 2,500)
- d. 100% of clients receiving shelter will have access to an intake staff member or case manager to assist them with meeting basic needs (Target = 2,500 of 2,500)

Goal #2 To address major barriers related to homelessness and self-sufficiency, including but not limited to substance abuse, mental illness, income, mainstream benefits, and legal issues.

Outcome

1. Clients accessing MSC's Supportive Shelter program will be engaged to receive an assessment of present barriers

Targets: (a) 2,500 clients; (b) 250 clients; (c) 2,500 clients; (d) 100 clients; (e) 2,250 clients

Indicators

- a. 90% of clients engaged by MSC's Supportive Shelter program will receive an assessment of present barriers to self-sufficiency (Target = 2,250 of 2,500)
- b. 90% of clients engaged by MSC's Continuing Care Component will complete an assessment of present barriers to self-sufficiency and develop an Individualized Service Plan to address their barriers (Target = 225 of 250)
- c. 50% of clients receiving overnight shelter will receive an assessment of present barriers to self-sufficiency (Target = 1,250 of 2,500)
- d. 50% of clients engaged by MSC's Prevention & Outreach Component will complete an assessment of present barriers to self-sufficiency (Target = 50 of 100)
- e. 25% of overnight emergency guests who complete an assessment of present barriers to self-sufficiency will be engaged by MSC's Continuing Care Component to plan for moves to more appropriate housing (Target = 562 of 2,250)

Outcome

2. Clients will identify and address major barriers through participation in MSC's Supportive Services and Continuing Care Components.

Targets: (a) 1,000 clients; (b) 250 clients; (c) 2,500 clients

Indicators

- a. 1,000 clients accessing overnight shelter will participate in one or more activities offered through MSC's Supportive Services Component (Target = 1,000 of 1,000)
- b. 95% of clients enrolled in Continuing Care will develop an Individualized Service Plan that identifies barriers and outlines goals to address them (Target = 238 of 250)
- c. 50% of clients accessing overnight shelter will participate in one or more educational, self-improvement, or supportive activities offered through MSC's Supportive Services Component (Target = 1,250 of 2,500)

Outcome

3. Clients in need of substance abuse and/or mental health assistance will receive appropriate treatment and supportive services.

Targets: (a) 1,250 clients or 1/2 of population; (b) 90 clients; (c) 90 clients; (d) 72 clients; (e) 833 clients or 1/3 of population; (f) 1,000 clients; (g) 1,650 clients or 2/3 of population; (h) 250 clients

Indicators

- a. 50% of clients in need of substance abuse screening will receive a formal assessment (Target = 625 of 1250)
- b. 90 clients with a formal assessment and committed to addressing substance abuse will participate in Relapse Prevention (Target = 90)
- c. 80% of clients participating in Relapse Prevention will learn effective substance abuse coping strategies (Target = 72 of 90)
- d. 50% of clients participating in Relapse Prevention will be connected to appropriate community-based supports for long-term assistance and support by program exit (Target = 36 of 72)
- e. 75% of clients in need of mental health assistance will be referred to one or more community based providers for assessment and/or treatment (Target = 625 of 833)
- f. 1,000 clients will be engaged by MSC's Prevention & Outreach and/or Supportive Services component and encouraged to have their substance abuse and mental health needs assessed.
- g. 50% of clients with substance abuse and/or mental health barriers will learn effective strategies to cope with their issues through participation in Supportive Services activities (i.e. AA/NA, Mental Health and Anger Management support groups, like skills classes, and substance abuse treatment). (Target = 825 of 1,650)
- h. 100% of clients enrolled in Continuing Care and placed in more appropriate housing will be connected to appropriate community-based supports for long-term mental health and/or substance abuse assistance and support (Target = 250 of 250)

Outcome

4. Clients will be engaged to assess their needs related to income and mainstream social services and assisted with plans to meet those needs.

Targets: (a) 2,500 clients; (b) 700 clients; (c) 700 clients; (d) 700 clients; (e) 500 clients; (f) 50 clients; (g) 375 clients

Indicators

- a. 95% of clients accessing overnight shelter will, within one week, have their income and mainstream social services needs assessed (Target = 2,375 of 2,500)
- b. 85% of clients engaging in case management services through Supportive Shelter components will develop an Individualized Service Plan with one or more goals to address income and mainstream social services needs (Target = 595 of 700)
- c. 60% of clients enrolled in case management services through Supportive Shelter components will increase their income through employment and/or benefits acquisition by program exit (Target = 420 of 700)
- d. 70% of clients enrolled in case management services through Supportive Shelter components will apply for one or more mainstream social services for which they are entitled and interested in receiving prior to program exit (Target = 490 of 700)
- e. 500 clients will have their income and mainstream social service needs assessed through Supportive Services activities and linked to one or more benefits, if eligible (Target = 500)
- f. 50 clients not currently using the emergency shelter (i.e. living on the streets or in camps) will be engaged to assess their income and mainstream social services benefits eligibility through MSC's Prevention & Outreach team (Target = 50)
- g. 90% of clients enrolled in Continuing Care will apply for one or more mainstream social services for which they are entitled and interested in receiving prior to moving from the shelter into more appropriate housing (Target = 337 of 375)

Outcome

5. Clients will be engaged to assess their legal needs (i.e. criminal records, credit issues, child support, driver's license issues, etc.) and assisted with plans to meet those needs.

Targets: (a) 2,500 clients; (b) 700 clients; (c) 700 clients

Indicators

- a. 95% of clients accessing overnight shelter will, within one week, have their legal needs assessed (Target = 2,250 of 2,500)
- b. 75% of clients engaging in case management services through Supportive Shelter components will develop an Individualized Service Plan with one or more goals to address legal needs (Target = 525 of 700)
- c. 60% of clients enrolled in case management services through Supportive Shelter components will successfully address one or more legal needs by program exit (Target = 420 of 700)

Outcome

6. Clients wishing to pursue family reunification will receive help to re-establish relationships with family members and plan for reunification.

Target: 200 clients

Indicators

- a. 200 clients will have access to staff trained to assist with the re-unification process (Target = 200)
- b. 75% of clients receiving staff assistance with the re-unification process will move from the shelter to a re-unified family living situation (150 of 200)

Goal #3 To help guests obtain and maintain more appropriate housing

Outcome

1. Clients will be engaged to assess their housing needs and assisted with plans to obtain more appropriate housing.

Targets: (a) 2,500 clients; (b) 700 clients; (c) 250 clients

Indicators

- a. 100% of clients accessing the overnight shelter will learn about available housing resources (Target = 2,500 of 2,500)
- b. 85% of clients enrolled in case management services through Supportive Shelter components will develop one or more housing goal(s) as part of their Individualized Service Plans (Target = 595 of 700)
- c. 250 clients participating in Continuing Care will develop one or more housing goals as part of their Individualized Service Plans prior to obtaining more appropriate housing.

Outcome

2. Clients with HIV/AIDS will receive individualized assistance in locating and obtaining more appropriate housing through the Continuing Care Component's HOPWA grant project.

Target: (a) 50 clients; (b) 50 clients; (c) 30 clients

Indicators

- a. 50 homeless men with HIV or AIDS will be identified and engaged with housing information activities to encourage them to enroll in the project (Target = 50 of 50)
- b. 60% of men engaged will be enrolled in the project and receive ongoing housing information services through an assigned case manager (Target = 30 of 50)
- c. 33% of project participants will receive permanent housing placement services to help them obtain housing (Target = 10 of 30)

Outcome

3. Clients ready to move from the shelter to more appropriate housing will receive supportive services to obtain and maintain their housing.

Target: (a) 500 clients; (b) 500 clients; (c) 375 clients; (d) 250 clients

Indicators

- a. 75% of clients ready to move from the shelter to more appropriate housing will be enrolled in Continuing Care Component case management to receive assistance with obtaining and maintaining more appropriate housing (Target = 375 of 500)
- b. 50% of clients ready to move from the shelter to more appropriate housing will receive assistance through Basic Needs, Prevention & Outreach, and/or Supportive Services components (Target = 250 of 500)
- c. 100% of clients enrolled in Continuing Care will receive case management assistance in locating more appropriate housing options (Target = 375 of 375)
- d. 50% of clients enrolled in Continuing Care Component case management and completing the goals in their Individualized Service Plans will move from the shelter to more appropriate housing within six months of program enrollment (Target = 125 of 250)

Outcome




4. Clients moving from the shelter to more appropriate housing with Supportive Shelter components case management assistance will be linked with appropriate and desired community-based supportive services to maintain their housing.





























Target: 250 clients

Indicators

- a. 95% of clients moving from the shelter to more appropriate housing will be connected with at least one supportive service to help them maintain housing (Target = 237 of 250)
- b. 50% of clients moving to more appropriate housing with Supportive Shelter components case management assistance (125 of 250) will have developed a support system of at least five people or organizations.

PROGRESS: Progress is measured by dashboard for Goals and Outcomes and by actual results for each Indicator.

 = Meeting Goal or Outcome  = Progress Being Made Toward Goal or Outcome  = Progress Not Being Made Toward Goal or Outcome

FY12	1 st Quarter July-September	2 nd Quarter October-December	3 rd Quarter January-March	4 th Quarter April-June	FY11	FY10
Goal 1						
Outcome 1						
Indicator A						
Indicator B						
Indicator C						
Indicator D						
Goal 2						
Outcome 1						
Indicator A						
Indicator B						
Indicator C						
Indicator D						
Indicator E						
Outcome 2						
Indicator A						
Indicator B						
Indicator C						
Outcome 3						
Indicator A						
Indicator B						
Indicator C						
Indicator D						
Indicator E						
Indicator F						
Indicator G						
Indicator H						
Outcome 4						
Indicator A						
Indicator B						
Indicator C						
Indicator D						
Indicator E						
Indicator F						
Indicator G						
Outcome 5						
Indicator A						
Indicator B						
Indicator C						
Outcome 6						
Indicator A						
Indicator B						
Goal 3						
Outcome 1						
Indicator A						
Indicator B						
Indicator C						
Outcome 2						 (new)
Indicator A						
Indicator B						
Indicator C						
Outcome 3						
Indicator A						
Indicator B						
Indicator C						
Indicator D						
Outcome 4						
Indicator A						
Indicator B						

Goals – Outcomes – Indicators as Reported to Funders – FY 11/12

	UWCC	Mecklenburg County	ABC Board	City ESG	State ESG	HOPWA
Goal 1	X	X		X	X	
Outcome 1	X	X		X	X	
Indicator A				X		
Indicator B	X			X		
Indicator C	X			X		
Indicator D	X			X		
Goal 2	X		X			
Outcome 1	X		X			
Indicator A	X		X			
Indicator B	X					
Indicator C						
Indicator D	X		X			
Indicator E			X			
Outcome 2	X		X			
Indicator A	X					
Indicator B	X		X			
Indicator C			X			
Outcome 3	X	X	X			
Indicator A			X			
Indicator B			X			
Indicator C			X			
Indicator D			X			
Indicator E						
Indicator F	X					
Indicator G	X	X				
Indicator H	X					
Outcome 4	X					
Indicator A						
Indicator B						
Indicator C						
Indicator D						
Indicator E	X					
Indicator F	X					
Indicator G	X					
Outcome 5						
Indicator A						
Indicator B						
Indicator C						
Outcome 6						
Indicator A						
Indicator B						
Goal 3	X	X				X
Outcome 1	X					
Indicator A	X					
Indicator B						
Indicator C	X					
Outcome 2						X
Indicator A						X
Indicator B						X
Indicator C						X
Outcome 3	X	X				
Indicator A	X					
Indicator B	X					
Indicator C	X					
Indicator D	X	X				
Outcome 4	X					
Indicator A	X					
Indicator B	X					

Men's Shelter of Charlotte: Logic Model

