

Strategic Plan 2026-2028

*Knoxville-Knox County
Continuum of Care (TN-502)*

September 2025



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Introduction

As homelessness has grown in Knoxville and Knox County since 2018, community leaders have recognized the increasing burden on residents, businesses, homeless service providers, community systems such as health care and law enforcement, and most of all on the people experiencing homelessness themselves. In September 2023, after months of preparation, the administrations of City of Knoxville Mayor Indya Kincannon and Knox County Mayor Glenn Jacobs created the Knoxville–Knox County Office of Housing Stability (OHS). Their purpose was to forge a truly collaborative effort to address homelessness across both jurisdictions.

OHS staff quickly identified cold-weather shelter as an immediate need and forged partnerships with local churches and nonprofits to support their work as warming centers. In the winter of 2023–2024, at least 287 individuals and families sought shelter at these warming centers; that number rose to more than 400 in the winter of 2024–2025. Existing year-round shelters were simultaneously operating at capacity, sheltering an additional 400 people.

In spring 2025, OHS officially became the Lead Agency of the Knoxville–Knox County Continuum of Care (CoC). The CoC is the federally recognized local planning body responsible for coordinating the community’s response to homelessness, including system-wide planning, governance, data management through the Homeless Management Information System (HMIS), and the application for and oversight of certain federal funding streams. The CoC Board provides formal governance and strategic oversight, setting policy, approving community-wide goals, and ensuring compliance with federal regulations. As the new Lead Agency, OHS provides the administrative backbone for these efforts: convening partners, facilitating funding competitions, managing HMIS in collaboration with the HMIS lead, and ensuring that CoC policies and initiatives are implemented consistently across Knoxville and Knox County.

Vision

A continuum of services that prevent and end homelessness, and where every resident has access to safe, affordable, and stable housing.

Mission

The Knoxville-Knox County Continuum of Care mobilizes community partners to make homelessness rare, brief and non-recurring through collaboration, data-driven strategies, and a client-centered approach.

Knoxville-Knox County Continuum of Care

The Knoxville-Knox County Continuum of Care (CoC) is the U.S. Department of Housing and Urban Development's (HUD) designated planning body for organizing and delivering a comprehensive, community-wide response to homelessness. The CoC brings together local governments, nonprofit service providers, faith-based and philanthropic partners, people with lived experience of homelessness, and other stakeholders to plan, coordinate, and evaluate strategies that prevent and end homelessness. In addition to facilitating collaboration across a broad network of partners, the CoC is responsible for developing a communitywide strategic plan, setting performance standards, monitoring outcomes, and ensuring that federal, state and local resources are used effectively.

Governance of the CoC is vested in the CoC Board, a representative body of key stakeholders that sets policies and priorities, approves funding applications, and ensures compliance with HUD requirements. The Board is supported by committees and workgroups that focus on specific elements of the homeless response system, such as Coordinated Entry, data quality, and performance evaluation, ensuring that planning and decision-making reflect both technical expertise and the insights of people with lived experience.

As the newly designated Lead Agency, the Knoxville-Knox County Office of Housing Stability (OHS) serves as the administrative backbone of the CoC. OHS convenes the full membership, provides staff support to the Board and its committees, and manages the annual HUD funding competition and related contracts. OHS also partners with the Homeless Management Information System (HMIS) Lead to maintain and improve the community's data infrastructure, ensuring that decisions are grounded in accurate, timely information. By fulfilling these responsibilities, OHS helps the CoC sustain a coordinated, accountable, and data-driven system capable of making homelessness in Knoxville and Knox County rare, brief, and non-recurring.

Strategic Planning Process

This three-year strategic plan, while setting goals through 2028 in some cases, was developed through a comprehensive, multi-stage planning process. OHS and the CoC Board convened five geographically distributed public listening sessions (north, south, east, west, and city center) attended by more than 100 participants, with an additional 28 people providing input online. Participants shared how homelessness affects their families, neighborhoods, and workplaces; what assistance they would need if they themselves became homeless; and which interventions they see as most critical. Themes included deep concern and compassion for those experiencing homelessness alongside frustration and a sense of powerlessness; calls for more resources and faster interventions to prevent downward spirals; and recognition of the importance of faith communities and families in offering help.

OHS and its partners also interviewed more than 80 individuals experiencing homelessness and facilitated a focus group of 15 residents of permanent supportive housing. These conversations underscored the importance of personal relationships, outreach workers, and case managers; highlighted barriers such as long waiting lists, unaffordable housing, lack of transportation, and the impact of criminal justice involvement; and emphasized the need for safe places to rest, access to toilets, and storage for personal belongings.

The results of this extensive input process directly informed the priorities of the plan and ensured that the strategy to make homelessness rare, brief, and non-recurring is grounded in both broad stakeholder perspectives and the lived experience of those most affected.



Plan Structure and Goals

The plan is organized around **five overarching goals** that together describe the system-level changes required to prevent and end homelessness in Knoxville and Knox County:

Goal 1	Ensure a Homeless Services System that Responds with Urgency and Efficiency
Goal 2	Prevent Homelessness
Goal 3	Reduce Unsheltered Homelessness
Goal 4	Increase Access to Permanent Housing for Homeless Households
Goal 5	Expand Funding Capacity and Sustainability of the Homeless Services System

Each goal includes specific, measurable objectives with timelines and responsible parties. A consolidated total timeline appears at the end of the plan to provide a system-wide view of implementation milestones.

Goal 1

Ensure a Homeless Services System that Responds with Urgency and Efficiency

Objective 1: Establish new leadership (Continuum of Care Board) and administrative support (Lead Agency) for the Continuum of Care by 2026.

1.1 Strengthen planning for local homeless services

Action	Responsible	Timeline
Establish and implement community-level written standards for homeless services.	OHS, Lead Agency/Policy Development Work Group	Year 1
Assure appropriate referrals between homeless service providers, reduce overlap in services and facilitate future planning efforts.	OHS	Year 1–3

1.2 Improve governance and representation in the Continuum of Care

Action	Responsible	Timeline
Establish a governance charter for the CoC Board.	OHS, CoC Governance Work Group	Year 1
Create a Lived Experience Advisory Board (LEAB) with compensated members.	OHS, Homeless Coalition	Year 1
Ensure LEAB members participate in CoC committees and planning.	OHS, Lead Agency/Policy Development Work Group	Ongoing

1.3 Enhance Coordinated Entry System

Action	Responsible	Timeline
Require all homeless service providers that receive local homelessness funding or federal CoC or ESG funding to use the Coordinated Entry System.	OHS, HMIS, City and County government, Coordinated Entry Work Group	Year 1
Improve the Coordinated Entry System based on feedback from providers and clients.	OHS, HMIS, Coordinated Entry Work Group	Year 1
Complete a housing needs analysis by subpopulation using HMIS data and share with providers and local government partners.	HMIS, OHS	Year 1–2

1.4 Conduct housing inventory and gap analysis specific to homelessness

Action	Responsible	Timeline
<p>Maintain ongoing gap analysis of housing needs to address current level of homelessness:</p> <ul style="list-style-type: none"> ◦ Housing ◦ Available properties ◦ Funding sources ◦ Support services ◦ Shelter diversion efforts 	OHS	Year 1; Ongoing – Conduct gap analyses every 6 months for prioritization of funding and programming.

Goal 2

Prevent Homelessness

Objective 2: Increase the number of households who avoid homelessness through shelter diversion services by 150%.

Baseline: In the second quarter of 2025, in an average month, 12 people avoided homelessness through shelter diversion services. A 150% increase would bring that total to 30 people per month.

2.1 Expand shelter diversion

Action	Responsible	Timeline
Establish written standards for shelter diversion.	OHS, Policy Development Work Group	Year 1
Define partnerships for diversion opportunities.	OHS, providers	Year 1; Ongoing

2.2 Develop housing navigation program

Action	Responsible	Timeline
Pilot a program based on best practices.	OHS, providers	Year 1; Possibly Ongoing
Assess pilot program, local needs and resources.	OHS, providers	Year 1 – 2; Ongoing

Goal 3

Reduce Unsheltered Homelessness

Objective 3: Decrease unsheltered homelessness by 15% over 3 years.

Baseline: In the first quarter of 2025, there was a monthly average of 689 people enrolled in street outreach services. A 15% reduction would bring that number down to 586.

3.1 Expand homeless shelter and warming center capacity

Action	Responsible	Timeline
Increase shelter capacity by 35%. Potentially include seasonal shelters and warming centers as needed during freezing weather.	OHS, providers	Year 1; Ongoing as needed

3.2 Increase homeless day center capacity

Action	Responsible	Timeline
Pilot a Day Center program based on best practices.	OHS, on-site provider, partner providers	Year 1; Possibly Ongoing
Assess pilot program, local needs and resources.	OHS, providers	Year 1 – 2; Ongoing
Improve Access to Sanitary Facilities for the Day Center and Day Space.	OHS, on-site provider	Year 1; Ongoing

3.3 Improve access to health services for people experiencing homelessness

Action	Responsible	Timeline
Increase coordinated care with medical and behavioral health service providers serving homeless patients	KCHD, OHS, providers	Year 1; Ongoing

3.4 Expand employment opportunities for people experiencing homelessness

Action	Responsible	Timeline
Develop on-site partnerships with employment service providers at the Day Center and Day Space.	OHS, employment service providers, homeless service providers	Year 1; Ongoing

Goal 4

Increase Access to Permanent Housing for Homeless Households

Objective 4a: Increase permanent housing placements for homeless households by 20% by 2028.

Baseline: In the first quarter of 2025, 246 homeless individuals exited the system housed. An increase of 20% would bring this total to 296 people every quarter. (HMIS)

Objective 4b: Reduce average duration of homelessness by 60 days by 2028.

Baseline: In the first quarter of 2025, the average duration of homelessness was 280 days, over twice the five-year average of 137 days. A reduction of 60 days would bring it to 220 days. (HMIS)

4.1 Maximize housing resources for homeless households

Action	Responsible	Timeline
Establish written standards for both Permanent Supportive Housing and Rapid Rehousing programs.	OHS, Lead Agency, Policy Development Work Group	Year 1; Ongoing
Explore options for increasing Permanent Supportive Housing, Rapid Rehousing and other needed housing resources.	OHS, private development partners, local government partners, local funders	Year 1-3; Ongoing

Objective 4c: Achieve Functional Zero for Veterans Experiencing Homelessness – House more veterans from homelessness than are becoming homeless by 2030. Baseline: In the first quarter of 2025, there were 138 homeless veterans in Knoxville and Knox County. (HMIS)

4.2 Expand veteran housing options to consistently progress annually toward functional zero

Action	Responsible	Timeline
Increase access to affordable permanent housing for veterans through review of policies and prioritization, inventory options (1.4) and landlord coordination.	OHS, HMIS, providers	Year 1-2; Ongoing
Define benchmarks for reaching functional zero (e.g., <10 veterans homeless at any time).	OHS, HMIS, providers	Year 1; Ongoing

Goal 5

Expand Funding Capacity and Sustainability of the Homeless Services System

Objective 5: Increase funds flowing through the lead agency to support homeless services by 15% by 2028.

Baseline: In 2025, \$2.314 million flowed through the Office of Housing Stability to support homeless services and the administration of the homeless services system. A 15% increase would bring that number to \$2.661 million.

5.1 Increase grant funding opportunities

Action	Responsible	Timeline
Improve CoC grant application score to 165 out of 200 (from the 2024 score of 150).	OHS, CoC Board	Year 1-3 progressively
Submit applications for bonus projects annually to the CoC grant program.	OHS, providers	Year 1-3
Identify and apply for privately funded grants.	OHS, providers	Year 1-3
Create and maintain a state funding opportunities sheet for providers.	OHS	Updated quarterly

5.2 Increase local funding opportunities

Action	Responsible	Timeline
Increase local funding for the CoC Lead Agency/OHS by 3% annually over 3 years.	City and County elected officials	Year 1–3

5.3 Develop philanthropic contributions

Action	Responsible	Timeline
Engage at least 3 philanthropic partners to support homeless services.	OHS, city/county officials	Year 1–3

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