The attached document was submitted to the Washoe County Board of Commissioners during the meeting held on May 2, 2016 by Manager's Office for Agenda Item No. 7 and included here pursuant to NRS 241.020(7) as amended by AB65 of the 2013 Legislative Session.
OBJECTIVES

- Introduction to the Reno Area Alliance for the Homeless
- Share the latest homeless numbers in Washoe County
- Outline RAAH Strategic Plan for Addressing Homeless Housing Needs
- Share current achievements for the Strategic Plan
- Explain how you can help
RAAH has been in place since 2000

Coalition of over 40 agencies including nonprofits, faith based, local jurisdictions, for profit businesses, state agencies, advocates, homeless and formerly homeless
Mission:

Our mission is to mobilize and coordinate our resources to improve lives of those most vulnerable in our community.
Vision:

Prevent homelessness and provide permanent housing to promote optimal physical, behavioral and community health
RAAH CORE ACTIVITIES

- Issue identification and resolution
- Project homeless connect
- Point in time count
- Planning, collaboration, resource sharing and advocacy
On January 28, 2016

- 2-3 Person Teams of volunteers gathered at 4 AM to organize their plan to count the homeless on the streets
- Teams included social workers, police officers, psychiatric case workers, administrative assistants, and more
- They explored known and suspected areas where the homeless congregate
132 individuals were found existing on the streets
132 individuals were found existing on the streets
452 individuals were staying the night in the local homeless shelter
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452 individuals were staying the night in the local homeless shelter
392 were in transitional housing
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392 were in transitional housing
3,680 people in weekly motels
From the PIT on January 28th, 2016, the following is undeniable:

- 584 individuals were confirmed as homeless
- 4072 individuals were ‘under-housed’
Number of Persons in Emergency Shelters or Transitional Housing

- 2010: 695 (231 Emergency Shelter, 464 Transitional, 705 Total)
- 2011: 704 (292 Emergency Shelter, 412 Transitional, 705 Total)
- 2012: 705 (298 Emergency Shelter, 407 Transitional, 705 Total)
- 2013: 751 (305 Emergency Shelter, 446 Transitional, 751 Total)
- 2014: 672 (323 Emergency Shelter, 349 Transitional, 672 Total)
- 2015: 794 (340 Emergency Shelter, 454 Transitional, 794 Total)
- 2016: 844 (392 Emergency Shelter, 452 Transitional, 844 Total)
POINT IN TIME TRENDS

Persons in Weekly Motel Count (including subset of seniors and children)

Year       | Seniors | Children | Weekly Motels |
------------|---------|----------|---------------|
2010        | 164     | 576      | 2,568         |
2011        | 139     | 478      | 2,559         |
2012        | 171     | 708      | 2,802         |
2013        | 162     | 680      | 2,649         |
2014        | 190     | 807      | 3,315         |
2015        | 199     | 807      | 3,179         |
2016        |         |          | 3,680         |
POINT IN TIME TRENDS

Long Term Motel Residents (longer than 1 year)

Year | Count of People
--- | ---
2010 | 1,242
2011 | 1,242
2012 | 1,421
2013 | 1,212
2014 | 1,098
2015 | 1,098
2016 | 1,561
The Nevada Housing Division within the State of Nevada Department of Business and Industry provides affordable housing opportunities to improve the quality of life for Nevada residents.
Vacancy Rates by Type of tax credit funding

- **Senior**: 3.40%
- **Family**: 5.30%
- **Overall**: 4.70%

**Legend**
- Blue: 4% and BOND
- Blue: LIHTC 9%
100% of properties with rental assistance had a waitlist

- Rents at market rate and affordable properties increased more than 10% over 2013 rates

- Nevada’s average wages increased only 3% over past two years

- “…the new Tesla plant as well as other new economic activity appear poised to overwhelm affordable housing resources
The Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.
From July 2014 to January 2015, RAAH leaders and other stakeholders engaged in planning to address housing and behavioral health issues in the region.

The plan was adopted in March 2015 and workgroups were established to lead efforts to implement the plan.
STRATEGIC ISSUES TO PREVENT AND END HOMELESSNESS

- Strategic Issue #1 – Data/ Coordinated Assessment and Centralized Intake
- **Strategic Issue #2 - Housing**
- **Strategic Issue #3 – Wraparound/SOAR**
- **Strategic Issue #4 – Funding**
Data/ Coordinated Assessment and Centralized Intake

- Coordinated Entry system goes live today!
- All homeless individuals assessed with standardized instrument to determine needs and create a single prioritized waitlist
- Full transparency of housing inventory and waitlist to improve quickly and efficiently housing those in need
Based on the Point in Time numbers, data from Washoe County Social Services and children service providers, our prioritized needs include:

- 50 Transitional housing units for youth 24 and younger
- 1,000 Affordable housing units for seniors
- 200 Rapid Rehousing Units
- 610 Permanent Supportive Housing Units
GOALS - HOUSING

- Embracing ‘Housing First’ philosophy to remove barriers that delay and prevent housing a person in need.
- RHA is awaiting approval of 50 project based vouchers and 23 additional housing choice vouchers.
- CABHI grant (SAMHSA) has reduced chronically homeless numbers from 69 in 2014 to 28 in 2016.
- Community awarded over 1.6 million from HUD in 2015 and seeking over 1.8 million this year. Two additional grants requested for rapid rehousing projects for up to 10 families and 6 youth.
<table>
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<td>8</td>
<td>Ridge House</td>
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Total: $1,832,562.00
Experiencing homelessness exacerbates health problems and the ability to access appropriate care. Housing instability and living in lower socioeconomic neighborhoods can lead to significant stress, mental health problems, obesity, and diabetes. Patients with multiple and chronic health needs often find navigating a complex and fragmented healthcare system overwhelming, making wraparound supportive services an essential component of linking health care, human services, and housing.
WRAP AROUND/SOAR

- Need 75 case managers to help the homeless and the under-housed access needed benefits and services (based on 20:1 client to case manager ratio).
- Need increased community capacity to provide wrap around services.
- Washoe County recently received a bonus grant that they will use to hire 3 additional case managers.
- Medicaid Expansion is increasing coverage for our citizens
- Community providers are expanding such as Northern Nevada Hopes and Community Health Alliance
Sufficient funding for homeless programs continues to be an ongoing issue. Funding for housing in Nevada comes from a variety of sources, however, it is only sufficient to maintain current projects and there is a lack of dedicated funding for the target subpopulations.
FUNDING

- State of Nevada is working on accessing additional federal funding via a 1915(i) waiver that would pay for additional supports
- National Housing Trust Fund will provide an additional 3 million dollars to Nevada in 2017 to help house individuals with extremely low incomes
- RHA continues to expand its voucher program and target individuals with the greatest needs
- Our CoC continues to apply for and increase federal funding for permanent supportive and rapid re-housing options
WE NEED YOUR HELP

- Time to stop ‘Planning’ and start ‘Doing’

- We’ve mapped out a plan, we know what needs to be done
Coordinated Entry - Up and Running!

Help with sustainability and participation 😊
WE NEED YOUR HELP

- **Wraparound/SOAR** – State Medicaid and Community Providers working hard to increase access to short and long term services

- To extent possible, support providers of behavioral and physical health services to thrive in our community😊
WE NEED YOUR HELP

- **Funding** -
  - CoC Expanding Federal Grant Funding
  - Medicaid developing 1915(i) Waiver
  - RHA Expanding Voucher Programs
  - National Housing Trust Fund Dollars

- Allocate additional resources to shelter and housing programs which have been shown to reduce overall costs to community and improve the lives of many 😊
Housing — Despite the NHD’s best efforts to increase affordable housing in Nevada, we are losing the battle to increase inventory. This also impacts Rapid Re-Housing, Transitional Housing, and Permanent Supportive Housing.
WE NEED YOUR HELP

- Learn and utilize policies and NAC’s that already exist to incentivize Integrated Housing Developments
- Reduce barriers for developers such as Impact Fees
- Consider Inclusionary Housing Policies that Mandate a percentage of affordable housing in new developments