The attached document was submitted to the Washoe County Board of Commissioners during the meeting held on October 9, 2018, by Amber Howell for Agenda Item No. 16 and included here pursuant to NRS 241.020(8).
WASHOE COUNTY VULNERABLE POPULATION & HOMELESSNESS STRATEGY
We are homeless not invisible.
Graph is total capacity of shelters broken into each category. Overflow is men & women; primarily men. Family/Maternity Shelter usually houses around 85 people.
The Community Assistance Center (CAC) provides services to assist individuals who are homeless with resources and case management. HSA provides 2 million dollars in funding for the CAC.

The Community Assistance Center is made up of three shelters:

- Men’s Shelter
- Women’s Shelter
- Family Shelter
- Triage Center
- Children In Transition Office
CAC CAMPUS
PLAYGROUND
The things you take for granted, someone else is praying for.
REASONS THAT LEAD TO RESIDENTS’ HOMELESSNESS

- Cost of housing
- Lack of income/loss of employment
- Health, mental & addiction issues
- Evicted/kicked out/end of relationship/domestic violence circumstances
- No family/friend support system
- Transient/runway
WHAT RESIDENTS’ NEED TO LIVE INDEPENDENTLY

- Housing
- Employment
- Medical/mental health assistance
- Transportation
- Program/service availability
- Vocational rehabilitation
CROSSROADS

Washoe County Adult Services collaborates with the Catholic Charities of Northern Nevada providing supportive living arrangements for men and women transitioning out of homelessness. Clients in the program are given a safe and caring environment to live in, along with wrap-around social services including drug and alcohol counseling, employment support, volunteer/work opportunities and other tools to help them establish a new, more productive path in life.

The goal of Crossroads is to prevent relapses into homelessness and substance abuse, and to reduce public costs associated with jail, hospital and other emergency services.
We have come dangerously close to accepting the homeless population as a problem that we just cannot solve.
CURRENT CHALLENGES/NEW OPPORTUNITIES

Current Shelter does not bill Medicaid services

Lack of substance abuse and mental health services

Minimal health & dental access

Low incentive to make positive decisions and work towards independence

SNAP benefits continue to be provided while living at the shelter

Children need a more secure, child friendly daycare that includes a supportive learning environment and various social and recreational opportunities

Ongoing drug use on campus

Co-mingling several populations leads to an increase in incidences and safety concerns for residents. The shelter is the #1 response location for MOST and REMSA.

Sex trafficking
2017 HOMELESS POPULATION SERVED

2,677

CAC SERVICES LEVELS/DEMOGRAPHIC

2,677 Served

2,402 Adults

- 69% Men (1,662)
- 30% Women¹ (727)
- 32% 45-54 years old (671)
- 16% of women with children (118)

275 Children

- 57% Male (157)
- 43% Female (118)
- 3% alone in shelter (8)
- 42% < 5 years old (116)

- 12% are Seniors² (331)
- 2,357 Households
- ≈24 households with children served each month
- 65% stay <=30 days (1,744)

¹ The remaining 1% are Trans.

² Seniors, for the purposes and data of this presentation, are those 62 and older.

Source: HUD Annual Performance Report; NV-501 Volunteers of America (VOA); 01/01/2017-12/31/2017
Graph is based off Point-in-Time calculations of households served; report was ran the last Wednesday of each referenced month.

Source: HUD Annual Performance Report; NV-501 Volunteers of America (VOA); 01/01/2017-12/31/2017
67% had 2 or more conditions from Start to Exit

Mental Health Problem = leading reported condition of those who have children with them at the CAC

Source: HUD Annual Performance Report; NV-501 Volunteers of America (VOA); 01/01/2017-12/31/2017
CAC ENTER & EXIT STATISTICS

LIVING SITUATION
- 43% in Emergency Shelter; paid for with emergency shelter voucher

EXIT DESTINATION
- 17% into permanent housing
- 16% into temporary housing

LENGTH OF STAY
- 65% <= 30 days
- 11% >= 91 days

NON-CASH BENEFITS
- 55% receive >1 source
- 44% receive NO benefits

INCOME
- 52% have no income
- 58% from SSI and SSDI for those who reported receiving income

HEALTH CARE
- 20% do not have insurance
- 74% receiving Medicaid or Medicare

Source: HUD Annual Performance Report; NV-501 Volunteers of America (VOA); 01/01/2017-12/31/2017
Maybe home is nothing but two arms holding you tight when you’re at your worst.
NNAMHS CAMPUS PROPOSAL

**PHASE 1**

**8 CENTRAL HOMELESS FAMILIES**
- AT CAC: 21 ROOMS
- UTILIZING EXISTING STAFF
  - 2 HSA CASE MANAGERS
  - 1 VOA SHELTER MANAGER
  - 6 VOA FTE’S
  - 6 VOA PT’S

**8 SOUTH HOMELESS WOMEN**
- AT CAC: 50 BEDS
- UTILIZING EXISTING STAFF
  - 1 VOA CASE MANAGER
  - 1 VOA SHELTER MANAGER
  - 6 VOA FTE’S
  - 6 VOA PT’S

**8 C HOMELESS FAMILIES**
- AT CAC: 6 ROOMS
- UTILIZING EXISTING STAFF
  - FAMILY STAFFING/CASE MANAGEMENT

**604 HOMELESS POST PARTUM**
- AT CAC: 12 ROOMS
- UTILIZING EXISTING STAFF
  - VOA FAMILY STAFFING/CASE MANAGEMENT

**SRC HOMELESS SHELTER LEARNING CENTER**
- AT CAC: 40 CHILDREN
- UTILIZING EXISTING STAFF
  - STAFFED THROUGH BOYS & GIRLS CLUB

**PHASE 2**

**ENLIVEN SENIOR DAYBREAK**
- AT 9TH: 22 CLIENTS
- UTILIZING EXISTING STAFF
  - RELOCATE ALL SENIOR SERVICES STAFF

**601 INDEPENDENT LIVING/SUBSTANCE ABUSE**
- AT CAC: 50 BEDS
- NEEDS SIGNIFICANT REHAB

**MOBILE PANTRY**
- TO INCREASE FOOD SECURITY & SELF SUFFICIENCY

**PHASE 3**

**KITCHEN SENIOR NUTRITION**
- AT 9TH: 22 CLIENTS
- UTILIZING EXISTING STAFF
  - RELOCATE ALL STAFF

**ADDITIONAL ITEMS NEEDED**

**SECURITY**

**FOOD & SNAP BENEFITS**

**LAUNDRY**

**MAINTENANCE**

BY SHIFTING POPULATIONS TO NNAMHS, FREES UP TO **212 BEDS** AT RECORD ST.

REQUIRES REHAB TO PROVIDE LONG TERM HOUSING
NNAMHS CAMPUS PARCEL MAP
The greatest cruelty is our casual blindness to the despair of others.
The Daybreak program is a licensed adult day program offered at the Washoe County Senior Center on 9th Street, in Reno. Daybreak provides a safe and secure environment for cognitively or physically impaired adults. Services are designed to provide social and health assistance; as well as, community support to adults who need supervision and supportive care outside of the home, and serves as an alternative to institutional care. The Daybreak program also offers respite for caregivers, allowing seniors to age in place—promoting healthy caregiving.

Daybreak is the only medically based program in the region supported by full-time nurses. Community Health Aides provide personal care support, social activities, and therapeutic activities including physical and cognitive exercises, as well as a noon meal and daily snacks.
EXPECTED OUTCOMES/GOALS

1. Separate populations at Community Assistance Center
   - Relocate women, children and families

2. Implement a targeted approach for programming of the male population focused on their unique needs and access to resources
   - Eliminate overflow
   - Reduce visibility of homelessness downtown

3. Expand Crossroads Program success

4. Utilize NNAMHS campus availability
   - Consolidate HSA resources on campus
   - River House / TADS currently at NNAMHS
I always wondered why somebody didn’t do something about homelessness, then I realized I AM somebody.
GOALS & RESIDENTS’ PLANS

- Access to mental health and substance abuse resources
- Decrease admission to jail and emergency room stays
- Preservation of families to prevent foster care placements
- Be self supporting and have a productive life
- Get an education
- Maintain stability
- Find and keep employment
- Help others in same circumstances
- Reconnect with family/friends
I was homeless and you gave me shelter!
YOU ARE NOT FORGOTTEN

Questions?