MINUTES OF THE MEETING

OF

THE NEVADA INTERAGENCY ADVISORY COUNCIL ON HOMELESSNESS SUBCOMMITTEE FOR TECHNICAL ASSISTANCE

August 08, 2023

The Nevada Interagency Advisory Council on Homelessness Subcommittee for Technical Assistance was called to order by Chair Michele Fuller-Hallauer at 1:07 p.m. on Tuesday, August 8th, 2023. This meeting is being conducted virtually. This meeting was noticed in accordance with Nevada Open Meeting Law and posted on https://dwss.nv.gov/Home/Features/Public-Information/ the Division of Welfare and Supportive Services website.

COUNCIL MEMBERS PRESENT:

Chair Michele Fuller-Hallauer, Manager, Clark County Social Services

Chris Murphy, Grants Manager, Churchill Council on Alcohol and Other Drugs DBA: New Frontier, Nevada

Karen Van Hest, Director of Reimbursement and Compliance at Catholic Charities of Northern Nevada

Austin Pollard, State Housing Manager for United Healthcare

Nolga Valadez, Benefit Services Outreach Manager, Three Square, Nevada

Dr. Pamela Juniel, McKinney-Vento Coordinator, Nevada Department of Education, Nevada

COMMITTEE MEMBERS ABSENT:

Brooke Page, Corporation for Supportive Housing Director, Southwest, Nevada

Cristy Costa, Human Services Director, Northern Nevada Community Housing

Bill Ennis, Director, Salvation Army in Mesquite Nevada

Lorena Lemus, Case Management Services Coordinator Northern Nevada Hopes, Reno Nevada

Scott Benton, Emergency Shelter Director, Nevada Cares Campus

Blaine Clements, Case Worker, Washoe County Human Services, Resigned

OTHERS PRESENT:

Niani Cooper, Manager, Homeless to Housing, Nevada Department of Health and Human Services, Nevada

Samantha D'Ambrosio, Coordinator, Homeless to Housing, Nevada Department of Health and Human Services, Nevada

Abigail Bagolor, Administrative Assistant, Homeless to Housing, Nevada Department of Health and Human Services, Nevada

Jonet Anderson, Administrative Assistant, Homeless to Housing, Nevada Department of Health and Human Services, Nevada

Ryan Sunga, DAG, Nevada

Agenda Item I. [Welcome, Call to Order and Roll Call]

Niani Cooper:
Good afternoon, and welcome to the Governor's Interagency Advisory Council on Homelessness to Housing Technical Assistance Subcommittee. This meeting has been publicly noticed and compliance with Nevada's open meeting law. Chair Michele Fuller-Hallauer will call the meeting to order.

Chair Michele Fuller-Hallauer:
Good afternoon, it is 1:07 p.m. on August 8th, 2023. I'd like to call meeting of the Nevada Interagency Council on Homelessness Subcommittee for Technical Assistance to order. Will the moderator Niani please call roll?

Niani Cooper:

[Roll Call. We Have Quorum.]

Chair Michele Fuller-Hallauer:
Thank you. Let's go on to item number two.

Agenda Item II. [General Public Comments]

Chair Michele Fuller-Hallauer:
Item number two on our agenda is public comment. No action may be taken upon a matter raised

until the matter has been specifically added to an agenda. Comments are limited to three minutes. If you are making a public comment via phone, please call 1-775-321-6111, ID number: 124739311 pound. We are now open for public comment. Please unmute yourself and state your name for the council.

I have a public comment that I would like to make before we get this meeting started. Michelle Fuller-Hallauer, Clark County social service. I would like to let folks of this Technical Assistance Committee and the general public know that this Thursday, August 10th, will be my last day as an employee for Clark County Social Service. I am leaving employment after 21 years of service with the county. I have started my own technical assistance and consultant agency called Winged Wolf Innovations, where I will be providing leadership and organizational development, systems redesign and transformation, strategic planning and facilitation and training, as well as program development and administration. I have also made a commitment that I will continue in my role as the Chair of this Technical Assistance Committee for the State Interagency Council on Homelessness to Housing in my new role as a pro bono. Even though I am not working directly in homeless service delivery. I just wanted to let you all know that the next time we meet, I will not be a Clark County Social Service employee. Thanks.

Any other public comment? Okay, seeing none, hearing none, I will close this item and we will move on to agenda item number three.

Agenda Item III. [Possible Approval of Minutes from July 11th, 2023, ICHTA Meeting]

Chair Michele Fuller-Hallauer:
This item is for possible action, a discussion, and possible approval of minutes for July 11th, 2023, Interagency Advisory Council on Homelessness Technical Assistance subcommittee. Do I have a motion to approve or discuss the of the minutes from July 11th, 2023?

Austin Pollard:
I make a motion to approve the minutes from the July 11th, 2023, Technical Assistance Subcommittee meeting.

Chair Michele Fuller-Hallauer:
Thank you, Austin. Do I have a second?

Karen van Hest:
I'll second that motion.

Chair Michele Fuller-Hallauer:
Thank you, Karen. We have a motion and a second. All those in favor, please indicate by unmuting yourself and saying "aye".

Karen van Hest, Nolga Valadez, Chris Murphy, Austin Pollard:
Aye.

Chair Michele Fuller-Hallauer:
Any opposed, please unmute yourself and indicate by saying "nay". Any abstentions? Please unmute yourself and indicate by stating you abstain.

Motion carries. Agenda item number four.

Agenda Item IV. [Presentations Regarding the Coordinated Entry Process]

Chair Michele Fuller- Hallauer:
This agenda item is for information only. We will receive presentations regarding the coordinated entry process crisis response system for people experiencing homelessness from Katrina Peters from Northern CoC, and Celeste Williams from the Southern Nevada CoC. Katrina, do you want to go first?

Catrina Peters:
Thank you. I'm Catrina Peters, CoC coordinator for the northern Nevada CoC. I'm going to share some information on the basic mechanics of how our coordinated entry system works and some data that we've analyzed recently to help best match up the need of the community with the coordinated entry system and referrals available off the queue. It's a challenging process. We super appreciate the HUD funding. With that comes a lot of regulatory guidance that we need to follow and we're just trying to make all those pieces work together.

For coordinated entry, I'd like to start the conversation with talking about the CoC, or the Continuum of Care. Coordinated entry is a requirement to continue to receive those CoC dollars that are critical for our community. I get asked all the time, "what is the CoC?". It's kind of a challenging thing to explain. It's a group of people working together to solve homelessness in the community, and we do that through shared policy, through shared data, using our homeless management information system, and we also work together and have agreed upon priorities for resources. We don't have enough resources in our community to house everyone, and agreeing on those priorities helps us really tackled those target populations and try to get the most bang for our buck, so to speak. It also really helps to avoid silos. It's a venue for folks to come together and work collaboratively so that we don't have each program off on its own. It also helps with making those resources go a little farther if we're working together. Some folks can provide certain cervices, others have different services and just bring everybody together on that. HUD also has a very lengthy definition of the CoC, and so I want to share that as well. It's a regional or local planning body that coordinates housing and services funding for homeless families and individuals.

I also typically describe the CoC in that we have six core responsibilities. The first is completing a consolidated application annually, so that's the annual funding process. We're currently in the middle of that, so we are all very busy and occupied with that process. The opportunity to keep that money coming into the community and an opportunity to bring new projects online. We're

also charged with monitoring the CoC grantees. The individual programs that receive funding have a grant agreement directly with HUD, but we're also charged on the local level with monitoring those grantees providing that training and technical assistance to set folks up for success. We also managed coordinated entry and we'll talk about that in a little more detail. Our community utilizes a "no wrong door". We have a standardized assessment that's also utilized in Southern Nevada, and it results in a single prioritized list of people experiencing homelessness in our community that we make referrals from. We also do our Point in Time count every year per the HUD regs. That's to occur the last 10 days in January. We also maintain HMIS or our homeless management information system that is our community wide database for people experiencing homelessness and having that data in a centralized spot allows us to pull reports quickly and easily that we provide to HUD on an annual basis and that we're required to submit again to keep that funding. It also allows us to see outcomes across the community and be able to adjust resources accordingly. We're required to submit HUD reporting on a quarterly and annual basis.

In Washoe County, we utilize the coordinated entry system that consists of a standardized assessment that standardized assessment. We call that "CHAT". It's the same assessment used in Southern Nevada and all referrals receiving that HUD COC funding are required to take referrals off that single prioritized list and coordinated entry. While it's challenging, there's pros and cons to it. At the end of the day, it's a critical opportunity to make sure we've got one list of people that we're serving across the community and that there's a standardized assessment to get that clear prioritization so we're serving the right populations in the right order. If we didn't have this list, clients would have to go to each individual program across the community, go through that application process, tell their story however many times across the community, and you can kind of quickly and easily see how cumbersome that would be for clients, how that would just lead to silos across programs. So really, at the end of the day, I'm just a strong advocate of coordinated entry despite its challenges, because it is a critical opportunity in the community to making sure we're serving higher acuity folks first. We've got clients across the community, and we have that no wrong door approach. We've got around 50 folks across the community who can do that standardized assessment. Our matchmaker is the person who clicks in the buttons in that HMIS system to make that referral from that prioritized list to programs that have an opening and are waiting to receive a client. Those referrals are made according to program eligibility, but they're also made according to acuity, based on that standardized assessment.

We've made a couple key changes to how coordinated entry works in our community over the last two years. Washoe County took over the matchmaker role on July 1 of 2021, and we immediately started case conferencing for folks that are on that list. We get our service providers around the table, and we go through the list of people who actively have a housing referral. We're making sure that that client gets linked up with that program so that they can pursue that funding opportunity. We've had a lot of success with that. We've also got outreach folks included in that case, conferencing mix, so if somebody's unsheltered, we're able to try to find that person quickly and easily.

We've made quite a few policy updates, but there's a couple that have really had a big impact. The first is we implemented a policy change where if a client has two denials because they couldn't be contacted, they don't get returned to the list. What we found before that is that we would have a lot of folks who would be on the list forever, couldn't be contacted when their name came up. It was really frustrating for programs to continually get referred clients that frankly, we weren't even sure we're still in that community. This is has had a really big impact on being able to get folks housed quickly. We also moved from the VI-SPDAT to the CHAT in December of 2021, and we removed everybody from coordinated entry that didn't have a new assessment. This helped kind of clean up the list as well; we made sure everybody that was on it was still experiencing homelessness and seeking housing. We do have a minimum score for someone to be placed on the community queue. When we initially went to the CHAT, we just had all our service providers refer everybody to the list, regardless of score. We were able to analyze some data, because unfortunately we're not able to serve everybody who is on the list. We want to think about folks who have the highest acuity and serve in those higher priority folks first, so we established a threshold. You must have a score of 15 to be referred to the queue and be on the list.

I wanted to next share some data on what the demographic mix of people on the queue looks like, what our referral mix looks like, and talk about how we're trying to get those two to be a little more closely aligned. When we look at families, they're about 3% of people on the community queue. Part of this is because to be on the queue, you must be literally homeless and there's some CPS ramifications of children in an unsheltered or homeless environment. There's a lot of criticisms of this number because people say "hey, wait a minute, we have a lot of families struggling with housing instability or potentially unhoused that aren't necessarily reflected on this list". But when we pull the data, this is kind of the current situation.

We have about 6% of people on the queue who are confirmed veteran. We have a close relationship with our VA. Every other week we get together and do a veteran's case conferencing so that people who self-identify as a veteran, the VA can check and indicate in this system if that matches up and they are verified by the VA. That makes them eligible for certain housing benefits. We really try to tap into those VA housing opportunities first because they're a little more plentiful in the community than what we can refer to off the queue.

We also have a pretty good handle on the data in terms of who meets a homelessly chronic definition. Per HUD, that means the Head of Household has a disability, and they've been homeless for twelve months, or have four episodes of homelessness over the last three years adding up to twelve months. That's about 1/3 of our population, which is a high needs population, and I think really underscores the need for permanent supportive housing.

When we look at folks who self-identify as actively fleeing DV, that's about 11% of our queue. Just to be transparent, with the coordinated entry system and putting people on a list that can be really challenging for folks that are actively fleeing DV, because they're actively seeking a housing resource right now and putting them on a wait list is like a tough set of circumstances. When we look at gender, about 3/4 of our population or male, that matches kind of national trend.

Previously I shared information on the demographics of who's on the queue once folks are on the list, then we make referrals and from those referrals. A certain percentage of folks move in, which is our goal. When we look at fiscal year 2021, we made 267 referrals. Of those 267, 61 people moved in. Many of those folks were into a rapid rehousing program. When we look at 2022, we did 445 referrals. A lot of that volume was due to the emergency Housing voucher program. We were incredibly lucky to get 137 vouchers into our community from HUD, and that gave us a couple amazing opportunities. We were making a lot of referrals off the queue, and we increased that referral traffic, so we were able to clean up that queue and find out who is still experiencing homelessness and seeking housing. We also were able to move 65 people into housing that year. We have a total of 93 people we were able to move into housing in 2022. Then, when we look at 2023, we see referral traffic for EHV's go down, because we had a lot of folks in those units. Those vouchers were filled, so not as many opportunities to refer. We did make a lot of referrals into permanent supportive housing, but ultimately that resulted in just 56 people moving into housing from those programs. 29 were EHV's, 29 were rapid rehousing, and only four in permanent supportive housing. We like to share this information, so folks have an idea of the volume. That we've got a lot of folks on the queue, but unfortunately there's a smaller percentage of that that we're able to actively move into housing.

What you see from the red bar to the left, those are all our permanent supportive housing programs, and each colored bar is a different year. You can see that Restarts Anchor Program is the lion share of our permanent supportive housing dollars, and permanent supportive housing is most of our COC dollars. With that permanent supportive housing program, clients are eligible for that rental assistance and case management if they need it. That results in folks staying in those programs a long time. When we look at rapid rehousing, we have a CoC-wide policy that folks can only stay in those programs for up to a year. HUD allows you up to 24 months. All our programs have elected to limit that to a year. The idea is to be able to help more folks. Rapid rehousing is intended to get folks up and off their feet and transition to independence. We just have two programs in our community that are rapid rehousing. We've got our Restart Program for families, and then we've got the Safe Embrace Program specific for people experiencing domestic violence.

We've also done some analysis to match up the percent of total funding to the percent of CoC funded resources. When we look at permanent supportive housing, we've got 2% of people on the queue that are families, but it's just under 20% of our funding. What this tells us is that we potentially need to adjust that mix to be able to best serve people on the queue. We have a similar circumstance in rapid rehousing. We've got 4% of families that score in the rapid rehousing range and are on the queue, but families are 60% of our CoC resources. We're also having conversations on how we can better serve single adults so that we can get those a little more closely aligned. HUD has offered up additional funding to specifically meet the needs of the DV population. Currently right now we have quite a bit more DV funding than we have people represented on the queue.

Some of our future work entails us really trying hard to align eligibility criteria for programs receiving referrals off the queue with the demographics of the queue. The fewer barriers and the fewer conditions on eligibility, the better we're able to meet the needs of the population. We also want to ensure full utilization of our CoC funding, so this year we're pursuing a reallocation of lower funding programs so that we can bring on higher performing or potentially new programs who can best meet the need.

We've also undertaken some efforts to get feedback from folks with lived experience to improve programs, including improving the coordinated entry system. We have a contract with Nevada Homeless Alliance, and they'll be helping us incorporate feedback from folks with lived experience. This is about our annual application process, and also giving us feedback on folks that are experienced utilizing the coordinated entry system, doing a secret shopper kind of exercise. I think they've also done that in Southern Nevada, so we're excited to replicate that here in Northern Nevada and see what kind of feedback we get.

We're also really working to increase our HUD funding for CoC programs. In addition to each program pursuing their own program funding, the CoC puts together an application. That impacts how much funding comes into the community. We're really working to meet those CoC goals on improving policy and making sure that we're implementing all those HUD best practices here at the local level.

I think that's all I have, but I would be happy to take any questions if that's allowed in the in the formal meeting format.

Pamela Juniel:
Thank you very much for this wonderful overview. I know that I had a question in a previous meeting about how this worked. I just want to let you know that this really helps me be able to bridge the gap in how I communicate with families about services and differentiate between the continuum of care and the coordinated entry system, the purpose of it.

Celeste Williams:
I'm Celeste Williams and I will be talking about the Southern Nevada homeless CoC coordinated entry system. We operate in the same CoC system and definitions; our population is just greater. I look for the day that our numbers are in that respectable nature as the Northern CoC. I don't have our numbers on the screen, but I ran them quickly while she was giving her presentation. Currently, we have a total of 4,653 people listed on our homeless community queue that is made up of 3,624 adults without children, 830 families, and 197 youth. We have community access points that do housing assessments that get our population on the community queue. We have seen an increase in housing assessments and an increase in homelessness due to the need here in Southern Nevada with affordable housing. There are a lot of different resources ending, not enough resources, evictions. Here a lot of the eviction coverages have ended. We're seeing a lot of families. We also have matchers that work diligently with our agencies throughout the community that match the agencies that do have openings and have housing opportunity and

resources to the individuals in our community queue. We have a cute little video that goes a little bit more into that with a few of our people that we like to play here. These are actual members of our community that we turned into a cartoon.

(Video)

"Welcome to this overview on the coordinated entry system. My name is Maureen, and I will be hosting our presentation today. Thank you for taking the time to learn about this component of our homeless service system. Before we get started, let's learn a little bit about homelessness in Southern Nevada. What does homelessness in our community look like? There are many faces to homelessness. Homelessness can happen to a family that is struggling after a recent job loss, and it had only enough savings to last a month. It disabled senior who can't afford housing, groceries or his medications on their fixed income after at landlord increased their rent, a veteran struggling to find a job in the civilian workforce and LGBTQ teen who is no longer welcome at home after coming out to his family and mom and her child fleeing an abusive partner, a man or a woman with serious mental illness and substance abuse disorder who has lived on the streets for a decade to add some additional perspective, the minimum wage in Nevada is $10.25 per hour affordable rent for a single parent making minimum wage would only be $510 per month. However, fair market rent for a 2-bedroom unit is $1,457. To afford that unit, the parent would need to make $28.50 per hour. Subsidized housing might be an option for this single parent, but Southern Nevada only has enough affordable housing for 14% of the population that needs it.

Did you know that our most recent data is showing a rise in the number of people employed experiencing homelessness? We are seeing more and more people who are sleeping in their vehicles and hold steady jobs to help these individuals and families who are struggling with housing and securities or homelessness. We have numerous providers spread out across the valley supporting efforts to prevent and end homelessness. Government entities, nonprofit organizations, faith-based groups, and corporate partners are working together to provide homeless prevention and assistance programs to our unhoused neighbors. While the Southern Nevada homelessness continuum of care is tasked with coordinating the community wide response to homelessness, it really does take all of us working together and supporting programs to bring about results. A healthy system of care means housing for all Nevadans, and that homelessness is rare, brief, and one-time event, as you can see in this graphic, all the individuals that need housing assistance are able to obtain, retain and maintain stable housing through a housing program, affordable housing, or other innovative solutions.

We know that the housing solutions look different for everyone and it's not always an immediate fix or a traditional one. Our team members work with households to help them navigate the system and find individualized solutions that meet their needs. There's not a one size fits all solution. Our coordinated entry system works to provide the right solutions to the right people at the right time. One way to access these services is through the coordinated entry system.

The first step in the coordinated entry system is people are matched with services right away that meets their most significant needs and ends their housing crisis. Other times we might not have immediate access to resources that will meet their needs. When I meet people who may need services, one of the first tools we use is the short assessment triage tool. This tool asks questions to determine the client's immediate needs, such as food services, medical services, eviction mitigation or housing problem solving services. Some clients will be identified as candidates for the community housing assessment tool, or CHAT. We offer the same services in our office that you do out in the field. Our community has three different types of CHATs based upon the makeup of the household. The basic CHAT is designed for households of adults without children. The F CHAT is for households with children, and the Tay VI-SPDAT is for households comprised of justice, young people under age 25. Each assessment collects basic information about the household and their specific needs so they can be matched to programs that offer the services that best suit the household members.

What happens after the household completes the assessment? Sometimes they are matched with services or resources right away that meet their most significant needs and ends their housing crisis. Other times we might not have immediate access to resources that will meet their needs. When we don't have the immediate resources and the household is experiencing homelessness, they may be referred to our coordinated entry community queue. Our community employs matchers, whose priority is to match program vacancies with potential clients. They keep tabs on all our community programs and make referrals for clients based on their needs. When a program has a vacant spot, they keep separate lists for adults without children, families, young people under age 25, households fleeing domestic violence, and veterans. This helps to ensure that all clients are given the best solutions to their specific housing needs.

To access assessments, the first step is to go www.helphopehome.org. Once on the website, click on the 'get help' button that is located at the top of the page. From here you will scroll down the page to see resources. The 'Coordinated Entry Assessments" tab includes all the assessment sites. You will notice that the assessment sites are separated based on subpopulations.

Some of our most asked questions are, "how long does it take to get services? What do I have to do to enter your program? Do I have to be sober or stop using? Can I keep my pet with me? Do I have to share a room with someone?" You can find an updated list of frequently asked questions on the HelpHopeHome website. You can also submit a question you have that you didn't see on the list. We regularly update the list and respond directly to any questions we receive. Thank you to my colleagues for helping share this information today. We hope it's been helpful to better understand our system and the first steps to ending homelessness in Southern Nevada. Be sure to visit the HelpHopeHome website regularly to learn about the new programs and opportunities to get involved and support our community's efforts to prevent and end homelessness once and for all."

(End of video.)

Celeste Williams:
Recently we did have TA providers are come down and the secret shopped Southern Nevada and they went to several agencies and provided us a report card. I think they went to 11 or 12 agencies, and they provided us here in Southern Nevada, a very important report card. They gave us some very important information that we must take from, and how to build on and make better our CoC here in Southern Nevada. These are some of the takeaways that we have, and that we're currently working on restructuring and detangling the coordinated entry system.

Number one, we just completed the evaluation of the system. We are speaking to other communities to learn their processes. We started doing regular case conferencing. Today kicked that off with two of the populations, and tomorrow will be another one we currently had already had the youth case conferencing. They do that every day due to us having a large youth shelter here. They do the case conferencing everything – the youth providers, the matchers, and the youth shelter. They are trying to get them a better fit in the community. We also saw that there was a need to do the case conferencing for the families, and for the adults without children on a more frequent basis. We had working groups and we had different conversations with different people, but never everyone in the same place at the same time dedicated to the same goal. That actually started today. Our plan is to start the case conferencing, begin going through the queue, working it down, trying to get some of these numbers.

Next step is implementing housing problem solving system wide. Getting this training out here to everyone in our reach, in our agencies, with nonprofit organizations. We do have a high turnover. In our community we see people starting and changing jobs. We've trained on housing problems solving, but what does it look like? While we can't match as you saw in the video, the income isn't matching the rent, the rent isn't matching what we need. We need to find and how to have other housing problems solving conversations so that training is being revamped and kicked out and pushed into our community, standardizing expectation, messaging, supports of system access points.

One of our most impactful things that I took away from when we had our evaluation is everyone didn't have the same information. This person or agency is working on 2020 information, while somebody else was working on 2021 information. We're looking to standardize the expectations throughout our community. There is no wrong door for anyone to come to. We are revising our housing assessment tool to be more effective. We're also considering a third party coordinated entry lead entity. Right now, we have a team of six matchers. One of the suggestions that was brought forth during the evaluation was looking to get a non-biased, outside, lead agency that can help with monitoring who is being denied and why, and who is in queue.

We have working group meetings every third Tuesday of each month from 1:00 pm to 3:00 pm. We have a virtual meeting, and now we've implemented case conferencing. The goal is to create change and to be set on a new path to help in homelessness.

Pamela Juniel:
Bang up job on the presentation! I loved how you brought in the animated people to explain each of the terms and everything. I'm ready to take these presentations and send these out statewide to all my McKinney Vento liaisons. For the purposes of offering knowledge and making sure they link up with people in their respective areas. These presentations are just so well done, to the point where we can get the word out. So that when I'm training my liaisons, I'm better equipped to provide some very sound information for them, and to help them communicate and collaborate with other community-based organizations as well.

Chris Murphy:
I'm with New Frontier. One issue that we've always struggled with, because we're located 660 miles Southeast of Reno, is with clients that we have, we cannot refer to any other CoC. we have a lot of our clients that share common areas. We have clients that come here from Las Vegas, we have clients that come here from Reno, but if we put them in through our coordinated entry system, that client cannot be shared outside of rural Nevada area. Since the rural Nevada area consists of 15 counties, and we share so many of the common people that we're trying to help somehow, we are we should be able to overcome that.

Catrina Peters:
We do our best to collaborate. Carson City is in a similar boat; geographically they're not that far from us. But logistically, having people on more than one community queue is unattractive for a variety of reasons. I am not unsympathetic to the challenges of a balance of state. Trying to coordinate service provision across 15 giant counties is a weighty task. I don't have a particular solution but do acknowledge that that's the challenge for sure.

Pam Juniel:
Do you have a consistent way of getting people into the queue? I'm just curious about how that works because 80% to 90% of the state is rural remote, and we also have our tribal communities. I was curious about the instrumentation of the CHAT.

Catrina Peters:
I can't speak for rural, but we do administer the same questions. As a community we assign some bonus points to transition aged youth, partially because the way the questions are structured, and chronicity of homelessness having a certain point value assigned to it. If we didn't add points for TAY, they'd stay at the bottom of the list. As a community we've decided they are a priority population, and then kind of a similar story for people that meet the chronically homeless criteria. They tend to be heavy system utilizers, so we want to try to intervene with those folks.

Chair Michele Fuller-Hallauer:
The CHAT, the Community Housing Assessment Tool, just to give some historical context, is a tool that was developed in Southern Nevada. It was developed by the Southern Nevada CoC, implemented in Southern Nevada, and evaluated by a third party for efficacy. Once we had implemented it for quite a few years, the other two CoC's asked about utilizing that tool in their

services so that we were utilizing the same tool across the state. The difference is, as Catrina mentioned, they may have assigned a different point value to different questions, but they're using the same tool with the same questions.

Chris Murphy:
Being a path provider through Sanchez we've had the opportunity to work with other agencies in various other states. In Nevada, we have a unique opportunity because all of us are under the same HMIS system, which is unheard of in most states. I think that that's for one wonderful. We all utilize the same assessment tool, so the only piece that we're missing is being able to transfer a client from here to there. Not that they would exist on two community queues, but we'd move them from one queue to another.

Chair Michele Fuller-Hallauer:
When you say transfer them, are you saying if a client is in a county in the rurals, and they moved to, let's say Southern Nevada or Reno, that you can just somehow indicate within HMIS that that client moved to a different county? Then they can shift from the rural queue to the Northern Nevada queue or the Southern Nevada queue so they're on the appropriate queue, but they've already had the assessment done?

Chris Murphy:
Right, and they're able to get the help where the need the help at, instead of having to go back in and start the whole process all over again.

Catrina Peters:
One thing that we've implemented recently is a coordinated entry review board. We've got a well-structured set of policies, and one item in that policy is that you must be in our geographic area to be served. However, we have a review board for hearing cases that fall in these special circumstances. So maybe you had a client who was from Reno, went somewhere for treatment, and wants to return. I think that's a case that potentially our coordinated entry review board could hear. But I think the caveat to that, and to just be clear on expectations, we can't serve people outside our geographic area. If they live outside Washoe County, unless there's some special sets of circumstances, they wouldn't meet the eligibility per our current policy to be on the Northern Nevada queue.

Chair Michele Fuller-Hallauer:
I think what Chris is saying is that they move to your geographic area because they want to live in your geographic area for whatever reason. I can see the concern of not wanting certain error. I absolutely understand, and we have the same policy, regarding what Katrina saying. They must reside or have intent to reside long term in the geographic area that we're serving. I also understand what you're saying, Chris. There should be an easier way if they've already had an assessment. We're using the same assessment across the state. If they're already on the queue, but they're permanently moving to another area for whatever reason, how do we get them connected

to the services more expediently, rather than having to jump through a lot of other hoops when they've already jumped through hoops?

Celeste:
If I can interject just a little from the feet to the street side outreach part of this. There should be an agency, or a contact people could connect with so they could be re-assessed, because maybe the circumstances are different after moving. Touching base doesn't mean starting over, but just to have client engagement. The purpose of an engagement in outreach and intake is not to hinder the process, but just be on someone's radar. If it was just a transfer button, they possibly still could get lost in the shuffle, because if we didn't update the contact information, the location information might be outdated.

Austin Pollard:
Has there been any considerations on the coordinated entry system as it pertains to being able to do the CHAT assessments, possibly opening it up outside of just the coordinated entry sites? I seem to have some difficulty when I have individuals who go inpatient. I'll get the housing referral, and they don't meet the criteria for the programs that we have. There is an urgency to get them on the community queue, but there seems to be some difficulty connecting them with the coordinated entry site. Have you considered opening it up to MCO's like the CHW's being able to perform the CHAT assessments? That way they can be there in the hospital and get the person on the queue to provide the potential services sooner.

Chair Michele Fuller-Hallauer:
There are folks outside of just the coordinated entry sites that do assessments. I think what you're asking is, are there folks specifically in the hospitals that are doing assessments? I think that those options are on the table as we redesign the coordinated entry system at this point, because we're trying to make the system more user friendly, more efficient, and effective. I think as we move into these next three to six months, I think it's important that if anybody has suggestions and ideas that they attend the coordinated entry system working group, the third Tuesday of every month. Bring your thoughts and ideas to the table because we need ideas. We're exploring what makes the most sense for our community as we redesign the coordinated entry system because we want to serve the most vulnerable neighbors in Southern Nevada.

Pam Juniel:
This can also be for Michelle too, but Celeste and Catrina, when you mention youths, what are the age ranges when you disaggregate your data around youth experiencing homelessness?

Catrina Peters:
We do 18 to 24. We have one transition age youth homeless shelter and that's their age range specifically. One of our case conferencing groups is transition age youth, and that's 18 to 24. We do a similar family case conferencing. We just do that once a month because we don't have as many families and there isn't as much change in who's on the list. We define that as head of household that's over 18 and household members that are under 18. I share that to say, people

who are under 18 that are parenting fall into this gray space, because technically they're a TAY, but we don't have any TAY family specific accommodations.

Chair Michele Fuller-Hallauer:
If there are no other questions or comments, Katrina, the last thank you so much for your very informative presentations. Thank you for sticking around for this discussion. We really appreciate it and appreciate your partnerships. Let's go on to the next item, item number 5.

Agenda Item V. [Champions Report the Status Update from the CoC and TA Subcommittee Members]

Chair Michele Fuller-Hallauer:
Champions Report (status update) from CoC and TA Subcommittee members regarding their progress in developing content and language to be included in their assigned sections of the Nevada Strategic Plan on Homelessness. I will start with Chris, who is our champion for the Rural Nevada COC.

Chris Murphy:
I had my data manager go through this strategic plan for the rural Nevada area and add her comments regarding everything that our CoC is doing as far as our part of policy, procedure, and coordinated entry. I have not gone through and added the CoC strategic plan wording and what we're doing in those areas yet, but we're making progress on it. My hope is once I've populated it as much as I can, it can be provided to Mary Jane.

Chair Michele Fuller-Hallauer:
Great, thank you. We have a vacant champion position for the Northern Nevada CoC.

Austin Pollard:
If it's okay with Catrina, I can assist with that.

Catrina Peters:
Austin is one of the leads on our CoC annual plans, so I feel like it's a perfect fit.

Chair Michele Fuller-Hallauer:
Thank you, Austin. Next time we'll be calling on you to give an update. Thank you for volunteering.

Catrina Peters:
Hettie and I did sit down and go through the matrix of our plan and the statewide plan. If it's helpful, I can reach out to her and see if that got shared with you all. If not, we could dig that out and send it if that's helpful at all.

Chair Michele Fuller-Hallauer:
That would be wonderful, thank you. I'm the champion for the Southern Nevada CoC. As I mentioned during public comment, when I first started, I'm kind of wrapping things up so I can exit from my position with the county. I've been preoccupied, so I haven't done a whole lot with that. We've been undergoing a lot of evaluation of both the organization of our CoC and our coordinated entry system. Two pieces of information that have come up that I think are important for us to know as we are working with our strategic plan.

One, the number of persons with IDD (intellectual developmental disabilities) is dramatically increasing in our CoC, especially young people under the age of 25. I have data that backs that up out of our HMIS system, and it's alarming. Our case managers are beside themselves because they don't know how to manage folks that have IDD issues. Folks from DRC that have expertise in working with folks with IDD are not at the table and are not intricately involved with the CoC. It's hard to get persons experiencing homelessness access to services at Desert Regional Center. I think that is something that we need to keep in mind as we are working in our strategic plan. Especially with our wraparound services, and maybe even our education and workforce development aspect of things.

The other thing is I was trying to work with our Clark County School District to integrate data between the school district and HMIS, so that we could really get a good sense of our doubled-up families. I wanted to develop a good depth and breadth of the doubled-up situation. That's really the last safety net for many families before they fall into our homeless services system. With that knowledge, a program could be developed that would help assist those doubled-up families. I didn't know how many we had. I figured the school district was a good place to start. The response I've gotten from the school district is they're not really interested in sharing data with HMIS. We need to go to the school department, the State Department of ED, and talk to them about possibly integrating and getting the data from them. That is something that we need to discuss and determine how we can maybe get some data integration taking place at the state level.

Pamela Juniel:
I have been working with Title One Hope. At the state level, we're able to approve their use of art funds and McKinney Vento funds on a documentary of individuals who are doubled up because we looked at the data and we found that there wasn't a lot of information. We're going to get first-hand lived experience accounting on that. Also, the state just formed the Homeless Data Work Group. It's facilitated by our data and accountability team. I would invite this organization to maybe have membership on that. That's where we are compiling certain types of data from young children all the way up. We have individuals from different divisions within the state. We also have some district partners when we're looking at like how we are collecting and reporting that data, not only at the state level but at the federal level. This is a brand-new group and it's right in line with the questions you're asking.

Chair Michele Fuller-Hallauer:
Let's move on to our strategic issue champions. Housing? Brooke's not here. Austin, do you have any updates on the housing section?

Austin Pollard:
We don't have any updates yet.

Chair Michele Fuller-Hallauer:
Okay. Prevention and Intervention? Scott's not here. Karen, any updates?

Karen van Hest:
Sorry, he hasn't been in contact with me at all, so we haven't moved forward.

Chair Michele Fuller-Hallauer:
Okay. Wraparound Services?

Pamela Juniel:
I just wanted to and that I didn't select a specific group, but I just wanted to add to Karen, even though you and Scott may or may not have had anything to add to, but with homelessness prevention and intervention, I just wanted to share with this group because we're still in the early stages. We're using our money at the state level. We just got approved and we're finalizing the contract process to bring an app to serve homeless children and youth to the state of Nevada. We will be the second in the country, behind Pennsylvania. We're doing this at the state level to launch an app where it ties to McKinney Vento liaisons across the district and aligns with a lot of the resources. We're still in the building process, so I will be leaning on this group.

Chair Michele Fuller-Hallauer:
Thank you for letting us know. Wraparound Services, Nolga? Karen?

Nolga Valadez:
I have not reached out to Karen. I'm not making any excuses, but I'm I am half of my team right now. I have been trying my hardest to get to this and I have not. That's why I have not reached out to Karen. I promise this coming week I will start working on this and I will get some progress going.

Chair Michele Fuller-Hallauer:
Nolga and Karen, I wanted to let you know that Dr. Pamela Juniel said she would like to join your group as well. Education and Workforce? Bill's not here, Scott's not here. We'll just skip right over that. Coordination of Primary and Behavioral Health? Lorena? Chris?

Chris Murphy:
We haven't met together.

Chair Michele Fuller-Hallauer:
Okay, the next section is Coordination of Data and Resources. Chris and I have not met yet, but I do have another update. I already gave you one update regarding the school district. The other one is regarding UNLV and their system data mapping that we had received a presentation on a year ago. They were going to map the data across all systems in the state. My theory is that all of our major systems are collecting similar data, and we're serving the same clients. We're just calling the data different things. If we visually map that out, then we can break that down and say, "oh, look, hey, we're collecting the same data on the same clients and let's just breakdown these silos and share data". I reached out to Dr. Cook Craig who is the lead on that project, to ask where we were on that. Things have been put on the back burner because there were some serious illnesses that took place on her team, and she's lost some team members. She is very anxious to get that up and going and started again, and I reassured her that me leaving the county does not mean that we are leaving this project. In fact, I'm taking the project with me when I leave for the county, so it's it is continuing.

Policy That is Broken. Brooke and Bill? Neither one is with us right now, so we'll move on.

Long Term Planning, which is me and Karen, and neither one of us have met.

We will move onto the next agenda item.

Agenda Item VI. [Discussion Regarding the Informational Town Hall Session Being Presented by the ICHTA Members at the Annual Nevada Statewide Conference on Ending Homelessness in August 2023.]

Chair Michele Fuller-Hallauer:
The next agenda item is for discussion regarding the informational town hall session being presented by the ICHTA members at the annual Nevada State Conference on ending Homelessness in August 2023, which is next week. Next Tuesday. Dr. Pam Juniel, Brooke Page and I will be doing a session at the Second Annual Statewide Homelessness Conference. We will be doing a plenary session. One of the goals of our session is to help folks walk away with an understanding of the Interagency Council on Homelessness to Housing, the structure, and the purpose. We want to engage the audience in the strategic plan and the development of the action plan. We want to inform or enhance future partnerships. We want to get an understanding of the pressing issues related to homelessness in the various communities across Nevada. We're going to use some of the slides from the presentations that I used from the dog and pony show that I did last year to introduce the strategic plan. We are also going use Kahoot; we're going to ask some actual questions to garner response from the audience to help us get a better understanding of what they feel prioritization is. We're going to ask folks to prioritize all eight strategic issues. We also are going to ask about things that are pressing within each community so that we can get a sense of what's important. We're going to get some people for your working groups. Hopefully we can walk away from there with you having not just two people, but ten people on each of your

working groups, as well as contacts and commitment. I want to find out from folks throughout the whole state if people are willing to be part of roundtable discussions to move forward with the development of the plan.

Anybody, feedback, or comments? This is your last chance for giving me input. Once, twice, done. Moving onto the next agenda item.

Agenda Item VII. [Discussion of Agenda Items for the Next Meeting on September 19, 2023]

Chair Michele Fuller-Hallauer:
Moving on to the next agenda item number seven. For information only, discussion of agenda items for the next meeting on September 19th. What do we want on our next agenda? Now this one I don't want silence. You don't need to unmute and talk.

Austin Pollard:
It might be worth having a discussion on some of the key points that we took away from the conference next week or something revolving around that.

Chair Michele Fuller-Hallauer:
Love it. So, report back the key points that members brough back from the State Conference.

Pamela Juniel:
As we bring those key points, let's see how they hit each of our champion areas so that we can add that to the components of our work moving forward.

Chair Michele Fuller-Hallauer:
Okay. The Southern Nevada CoC's census is being released this Thursday. Can we have the three CoC's bring their homeless census data to this group? We're going to get some information from our presentation. We probably should have an agenda item where we can report back the information that we gather. What else do we want?

Pamela Juniel:
I can at least provide a link to the video demo of the app that NDE is having built for homeless children and youth, if you'd like. That way we can see it and see how it works with each of our areas that we champion. I think it hits quite a few. I'll also give some updated information on the timelines.

Chair Michele Fuller-Hallauer:
We should have Sam put up the matrix and maybe fill in some areas or have it on her desktop, filling stuff in as we're reporting out, identifying where things go as we're getting putting information out so that the work is getting done. Then collectively we can assign where things go so it's being collected in the right place. Anything else for this item? Hearing none, seeing none, I'm going to go ahead and close this item.

We will go to our last agenda item for this meeting.

Agenda Item VIII: [General Public Comments]

Chair Michele Fuller-Hallauer:
No action may be taken upon a matter raised under this item for the agenda on until the matter itself has been specifically included in an agenda as an item upon which action may be taken. Comments will be limited to 3 minutes. If you're making a public comment via phone, please call 1-775-321-6111, ID number is 211732980558 pound. If you want to make public comment, please unmute yourself and state your name for the record.

Kelcy Meyer:
Hi, my name is Kelsey Meyer. I am with the Aging and Disability Services Division. I was going to make a comment about, I believe it was agenda item number 6 when you were discussing the increase of individuals with disabilities and you're seeing an increase in their population, their homelessness. I am the regional coordinator for aging and disability services. I cover the northern region, so I cover Carson, Douglas, Lyon County, Story County, and in Churchill County. We have two other regional coordinators, one in Clark County and one in Washoe County. Our main job is to identify barriers to services for individuals with disabilities and for seniors within the communities, and then to help make connections to ESD services or just connections between different community entities. I heard you mention that you were interested in maybe having somebody from DRC at the table to help with your case managers and how to work with individuals with disabilities. I just wanted to offer my contact information to be able to help you make those connections. I will coordinate with our clerk, county regional coordinator and see if we can't get something worked out. My contact information is kelcy@adsd.nv.gov.

Chair Michele Fuller-Hallauer:
I appreciate that. Thank you, Kelcy.

Any other public comment? Seeing none, hearing none, it is 2:51 p.m. on August 8th, 2023, and I will call this meeting adjourned. Thank you so much everyone. I appreciate you. Have a great day.

Agenda Item IX: [Adjournment: 2:51 PM]

RESPECTFULLY SUBMITTED:

Niani Cooper, Committee Moderator

APPROVED BY:

Michele Fuller-Hallauer, Chair

Date: August 14, 2023