

Project: Gateway Center at Gibson Health Hub

Meeting Date/Time: Thursday, June 10, 2021, 5:30 – 7:00 PM

Attendees: Online



GATEWAY CENTER COMMUNITY MEETINGS

The City of Albuquerque held two community meetings on June 10 and June 12, 2021, to receive input from the community regarding the Gateway Center at the Gibson Health Hub. The meetings were held per City Council Resolution R-21-141 (enacted on March 15, 2021), which required the City to hold two Community Input Sessions within 45 days.

The meetings were organized by the City of Albuquerque Family and Community Services Department. The first community meeting was held online, and input was documented using Google Jamboard. The second meeting was held in-person at the Gibson Medical Center. In each meeting, participants separated into five breakout groups that included a Facilitator, a Subject Matter Expert, and a Note-Taker. Meeting participants provided comments on three main topics: Safety; Entry and Exit; and Overnight Capacity. The following is documentation of the input provided by each group for the online meeting, which is then followed by the input provided from each group at the June 12th in-person meeting.

BREAKOUT ROOM 1

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- People should be able to stay there and not be kicked out at a certain time of day.
- Traffic control and mediation. People attending the center should be safe going in. A lot of racing up and down on Gibson. Increase in pedestrian traffic along Gibson.
- Safety is connected to the number of beds.
- Concern that the people in the shelter be safe.
- Make sure to have a Public Safety District like in Downtown - very successful program.
- Ratio of mental health providers and staff to the number of people getting services is important.
- Will there be a number for people to call to help homeless people on the street - contact number needed for people in need of services?
- Worried about burglaries, trash, needles. We have MATS, a lot of stuff in this neighborhood. We aren't the only neighborhood in town.
- Look at the concerns of everyone that lives near to GMC, especially along the San Mateo corridor.
- Call it what it is - a homeless center. How its run really matters. Example from Santa Fe cited - drug dealing outside the library.
- Will it matter if people are high, are people going to be protected?
- Already not a safe neighborhood - unsafe conditions. Dealing with existing encampments, sharps.

How will you know a safe environment has been achieved?

- Make it a safe walkway from the GMC to north side of Gibson.

- Keep our parks safe for everyone who use them. Feel and be safe.
- Mitigate existing conditions.

TOPIC 2: ENTRY AND EXITS

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Pedestrian safety - crossing at Gibson/San Mateo - a lot of action there. A lot of turning movements at this intersection.
- Safety issues outside the building - a lot of action in the parking area and on the streets. Addressing this would make it feel safer.
- Metal detectors? No weapons should be allowed in the building.
- People may not feel safe if they had to leave their "weapons" outside.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Clear delineation of space usage with signage.
- Should be orderly and people not just hanging out.

Operationally, how do you think that people should access a shelter bed?

- How will people know if its full - is there a spot open? Referral system with other providers.
- Should be easy for people - should be able to walk in without a bunch of hoops. Especially for people with substance abuse problems.
- Important to work with the court system - for the formerly incarcerated. People being able to be stable - become employable and feel better about themselves and achieve probation obligations.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Quality of care and oversight will fall to the wayside. Higher the count, the less care and oversight. Concern for the people that go there and concern that they won't go there out of fear.
- Will it be a big dorm space or separate rooms? Should have separate spaces. How many rooms were there when it was Lovelace Hospital?
- Not enough room.
- Will there be a cafeteria, places to hang out, library, computers, outdoor shaded space - or is it just a place to come to sleep and go away?
- Concern for the people in the neighborhood. Health hub and homeless shelter are two different things.
- Moving towards being a mega-shelter instead of focusing on a specific population. Turns into a different thing. Mixing populations (ages, issues, and challenges) - not good.

What can be done to address these concerns?

- If there's a healthcare option, they need to have their own room that they could lock. Needs really safe spaces.

- Ensure the space and the staffing is adequate - ratio between number of people and the care provided.
- We have to have the housing for people to transfer to – it's a housing crisis - invest in long term solutions for permanent housing.
- Should be a humane place where people are comfortable.
- People should be fed. Shouldn't be a warehouse.
- Heading Home - responsible approach - focuses on a particular population instead of the maximum number of beds.

BREAKOUT ROOM 2

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Good 24/7 security that is not APD - don't overload them.
- Care is taken with the physical space that controls and segregates different types of residents to ensure their safety.
- Controlled access to the facility. Not a walk-up facility. Includes screening, a referral shelter.
- Both the neighbors AND the residents feel safe. Themselves and their belongings.
- Will not have a soup kitchen and only provide meals to the residents.
- Accountability is important.
- Don't feel safe now, how will the neighbors feel safe in the future? Want to feel safe in our home, the neighborhood, parks, and shopping centers.
- Will have access (shuttle service?) to and from the other shelters and resources.
- A safety corridor to address community issues.
- Having Narcan available.
- A framework for community dispute resolution for the facility as issues come up.
- A better communication process - not neighborhood associations - that is a due process concern.
- Properties in the area are maintained and safe.
- Address the issues associated with the homeless but concerned with this location. Protect the investments that people have made in this beautiful part of the City.
- Crisis intervention is a component of the safety plan with the ability to address issues related to substance abuse and behavior health issues.
- Accountability is addressed with the safety plan. How will complaints be handled. There needs to be a process.
- Safety is looked at beyond the facility, but surrounding neighborhoods and commercial areas.
- Has controlled access and has a plan in place for those that show up without approval, off hours, etc.
- Protection for vulnerable residents from others. that the residents will be appropriately segregated and safe.
- Concerned with people meandering into the neighborhoods - Don't have a lot of people meandering through the neighborhood.

How will you know a safe environment has been achieved?

- Don't see groups of people hanging out drinking and doing drugs.

- No tent cities. Police respond quickly. No visible alcohol and drug use.
- Have vibrant businesses coming back and thriving in the community.
- People enjoying the park and everyone feels safe.
- Drive east on San Mateo and don't see bad things happening and have to wonder about drug use, needles, etc.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Clear differentiation with one entrance and exit that would be separate.
- One clear entry point and one exit. Could be close, but separate.
- Barriers that lead traffic to where we want them to go.
- Expand upon the existing security at the building now. Cameras, etc. Everyone is safe.
- Lighting at the entrance and exits.
- Security that screens what people bring into the facility.
- A cart corral or location that people can store their stuff while they are there.
- Screening is a part of the process both entry and selection.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Safe way to get in and out of the facility.
- Use the current entrance - it feels safe and open.
- Anyone entering the facility would be screened and referred to the facility. Referrals would be required.
- Aspect of having a separate secure entrance for the shelter could provide a welcoming entrance that is not like going into a jail.
- Respectful barriers for pedestrians. Effectively communicate those barriers where people can and should not go, but not look like a prison.
- Separating men, women, and families to ensure everyone feels safe - including LGBTQ community.
- Family based.

Operationally, how do you think that people should access a shelter bed?

- Provide health care services as an integral part of the services provided and be and feel safe.
- Pedestrian improvements at the intersection with San Mateo and Gibson are improved to ensure safety.
- Building layout facilitates storage for layouts, check in, storage, check out near transportation access points, transit, etc.
- Storage areas need to be secure and allow access. Needs to be safe.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Will the people living on the street want to go there? Concerned that they won't and we will still have people living on the street.
- Concern that after it opens there will still be people on the street.

- Don't want to see what is happening in the Wells Park neighborhood.
- Amount of social services that are needed available. Could be 24/7 needs.
- Keep Westside shelter open. If it closes, it will overburden the other City facilities and services.
- Need to make sure that the LGBTQ community's needs are addressed and that they are safe.
- 30 beds are great – 300 beds is overwhelming. We already have other things that we are managing with accountability regarding overwhelming the surrounding neighborhoods.
- Need a unified plan that limits the capacity to 30 beds or less with the possibility different standard for families.
- 100 or more overburdens communities especially with our community programs that provide services to the homeless. There are at least 10 service organizations with one mile of Gibson.
- Over 50 people isn't a community and people don't feel safe.
- 30 family units is a better way to look at it and should be considered.

What can be done to address these concerns?

- Recognize the difference between different segments of the homeless population.
- 24/7 Transportation is a critical aspect.
- People need a place to be and access to services. Services should be available 24/7. Criteria for entrance and a plan to track that.
- Work to provide mobile behavioral health services - 24/7.
- Federal COVID monies are an example of the problem delivering the services and money (only one a week) - have the process in place to deliver those services in a timely and efficient manner.
- Consider family constructs.
- Need to also address affordable housing available in Albuquerque and it should be a part of the plan. This is critical to the plan and providing solutions.
- City needs to provide additional accountability, incentives, and requirements on affordable housing.

Parking Lot

- Concerned that the neighbors aren't considered in this project's location.
- Where do the City officials live? Why isn't the Mayor on the call?
- Don't want it here. Need to address homeless holistically.
- Won't solve the problem of substance abuse.
- Funds are allocated, so it is a done deal.
- What is the criteria to get referred to this facility?
- City has disregarded the negative impact to property values. Not equitable.
- How is the County's tiny home village working? Is it full?

Final comments

- Valuable comments and frustrations have been expressed and that is appreciated.
- Can people attend both meetings? This should be allowed - believe the problem has been fixed.
- gatewayinput@cabq.gov is another vehicle to provide input after this meeting.

BREAKOUT ROOM 3

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Need more security in addition to what is there now.
- Concerned about the shuttle and transportation for individuals with mental health issues.
- Staff trained in de-escalation, especially for families to feel safe.
- Client safety important.
- Team of intake officers at front desk staff at entry to usher to people to services.
- De-escalation teams.
- Design building the for safety of residents. Need experienced staff when issues arise. Extra safety measures.
- Answers about numbers of people at the Gateway Health Hub will help understand safety.
- Anticipate Gateway Health Hub will make things worse.
- Need more police patrol and seeing presence of security professionals.
- Safety of clients and staff.
- Not dorm style.
- Concern with over-policing. The unhoused community is overpoliced as it is. The population is experienced with mistrust of police.
- More staff on site.
- Medical staff on site.
- Don't want a meal site. Services only for people living at the Gateway Health Hub.
- Should not be first come first serve. People should be referred to the Gateway Health Hub. Focus on what is offered.
- Shuttle service to take people to other services around the City. Must be run frequently and quick to access.
- Need 24-hour dispatch line to report unhoused individuals and encampments.

How will you know a safe environment has been achieved?

- Other businesses remain at the Gateway Health Hub and new businesses come in. If businesses leave, that would be a concern and sign it is not safe.
- Providers and administrators need to be safe.
- More patrols, more ways for individuals to get housing. No more trash. People taking up residence in your backyards. People having a place to go.
- Suggestion: Website with general demographic information, etc. Reports on efficacy.
- Gateway Health Hub may add to the experience of crime already experienced in the neighborhood.
- Police precinct on San Mateo and Kathryn. What happened?
- Neighborhoods want a legally binding Neighborhood Agreement.
- Transparency on how people are receiving treatment. How will city quantify?
- Rules inside the Gateway Health Hub should make folks feel comfortable and safe.
- Hearing from and listen to the unhoused. They know what they need. Listen to them.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Is the pedestrian bridge across Gibson adequate?
- Pedestrian bridge - is not safe because people hang out on the bridge. Needs monitoring and to be secured.
- Traffic study on Gibson. Concern about pedestrian safety.
- City wants safe transportation for people when they need to leave. Jobs, appointments, etc.
- Referral system and monitoring.
- Designated entrances for certain populations.
- Separate entrances for medical respite vs. other people that may be residents.
- Shuttle service and transit services in safe and controlled way.
- Want hours of operation for entry and exits.
- Albuquerque Community Safety Department will help with these issues.
- Unhoused are often victims of crime. It is the perpetrators that the NH is concerned about. Get residents in and out safely.
- Street outreach. Public Safety outreach needs to be adequately staffed and add Gibson Health Hub population as part of population of neighborhood.
- Where do people go if there is no room? It is better to have a referral system.
- Institute a priority system. High vulnerability populations should receive priority.
- What is the period between when there is check-in (bed) and they get services? Short timeframe would be best.
- Pathway Navigators can help with referrals. Keep communication open and clear with all organizations. Update all lists.
- Referral helps to ensure people are not turned away.
- Referrals give hope to families and individuals.
- Create a dashboard of what the Gateway Health Hub trying to achieve and what are the stats.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Number of beds is not most important, services are important.
- Need more information on community examples.
- A bed cap may result in vulnerable youth being turned away. Missed opportunity to help.
- Create an assessment to evaluate risk if an individual is turned away.
- HMIS System - Unhoused are entered into the system to keep track. Helps coordinate among agencies. Information is useful for referrals to housing.
- Reveal operating budget. Costs associated with serving different demographics. Would like data on emergency hotels.
- Fear there is not enough information or a plan for more than 100 people. Scale down since this is experimental. Not sure of safety for many people.
- Make appropriate placement for individuals that need a bed.
- Concern about conflicting messages from the City for what the Gateway Health Hub actually is. Emergency, overnight beds, or transitional housing?
- Surveys from Parkland Hills Neighborhood shows more comfort with larger numbers of families over single men.

- Support bed cap for shelter based on zoning.
- Fear that it will not be fully staffed – i.e., services, security, community safety.
- Want the data to inform the next steps for individuals that need services. (1 agreed)
- Create a committee to review and evaluate when staffing is in need.
- A lower bed capacity will lower the fears of residents.
- Have a bed capacity that is sustainable to provide services and move people into housing.
- That the Gateway Health Hub will have too few beds. 30 beds are too few for all the people/families that need the service.
- That there is enough ratio of staff to people with needs. The top priority is to provide services adequately and that should determine the number of beds.
- Southeast area has many services and shelters. I support fewer bed capacity in shelters across the City, depending on underlining zoning. For example, MX next to R is would allow less capacity. Gateway Health Hub is in this category.
- Fear is coming from unknown plans for the shelter.
- The City's plan seems to be backwards. It should be housing first then provide services.

Parking Lot

- What safety net is in the future if funding changes, or future administrations don't support?
- Maybe Family and Community Services could operate out of the Gateway Health Hub.
- Establish a Community Oversight Committee and Corrective Action Plan.
 - The Community Action Plan would establish guidelines and standards.
 - The Community Oversight Committee should have liaison for the providers in the building. All government entities should have a spot on the Committee. Include Gateway Graduates, success stories.

BREAKOUT ROOM 4

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Would like to know the implementation timeline of these services, as the problems tackled on this site are already an issue in the neighborhood.
- Would like to see an operations plan for the center.
- Sufficient funding to meet the needs of safety concerns at the Gateway Center.
- Young people would not see or feel deeply impacted by seeing unhoused individuals in large numbers outside the center when walking through the neighborhood.
- There will not be spillover from the Center into the surrounding neighborhood, and if an instance of this occurs it will be addressed promptly.
- Would like to see neighborhood safety initiatives around the surrounding schools.
- Services for behavioral health are already needed in the neighborhood.
- Creation of a Neighborhood Oversight Committee can put the surrounding community in partnership with the Gateway Center.
- Neighborhood Oversight Committee to have an ongoing dialogue that is able to establish benchmarks, i.e., monthly meetings to discuss Gateway operations.

How will you know a safe environment has been achieved?

- Linkage between the Gateway Center and other available services in the surrounding neighborhood.
- Need to ensure that there are appropriately trained individuals to engage unhoused folks and ensure that they are willing and able to receive help.
- Would like a plan from the operational specialist to determine if the internal security will influence safety outside the center.
- Quality assurance analysis of the services offered that demonstrates services are being properly utilized.
- Would like a plan from the operational specialist to determine if the internal security will influence safety outside the center.
- Quality assurance analysis of the services offered that demonstrates services are being properly utilized.
- Ensuring that the City has enough staff to appropriately handle any issues that occur as a result of the center, in a way that is timely by neighborhood determination.
- Impact on sense of self and well-being of kids in the surrounding neighborhood.
- Assurance that the shuttle will result in departure from the Center that is not just several blocks away or to another neighborhood.

What steps need to be taken to improve the safety of people inside and around the Gibson Health Hub?

- Community oversight of public safety personnel to ensure that they are following best practices.
- High priority for public safety personnel being accessible to the Gateway Center area.
- Continuous and more involved contact with law enforcement in the area due to the new population of the Gateway Center.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Ensure that directional signage is readable for all levels. Examples - sign associated with a colored lines on the floor etc.
- Have someone like a concierge to guide people through the site and ensure that everyone is treated with respect.
- Have a safe entry point for families and children.
- Safe and structured space for children at the Gateway Center while parents seek employment/education, or services at the Gateway Center. EX: San Diego shelter
- Well executed planning and operations process for entry and exit for the facility.
- Ensure that the intake process accounts for spillover into the neighborhood.
- Good parking, privacy, operational hours for the facility being clearly communicated.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Relationship of center to nearby parks, and potential increase in activity in those parks that discourages use by neighborhood residents.

- Ensuring that pedestrian entry around the center is safe and pre-planned to account for danger on major streets.
- Bus route on Gibson is not convenient - downtown route takes an hour and a half. Amend this route as part of the project.
- How can residents let facility staff know about issues with entry/exit (i.e., creation of encampments near the center)?
- Think about the neighbors and the businesses in the area.
- Increased staffing for public safety due to encampments in parks.

Operationally, how do you think that people should access a shelter bed?

- Clear communication regarding the Gateway program and entry into the facility for the surrounding community, so that people are not lingering in large groups.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Use examples from ongoing bed services to get an example of what issues are present with different numbers of beds.
- Accountability for how many people the number of beds attract and assessment of spillover effect through monitoring, and open conversation with the neighbors about these numbers.
- Hear from some of the partners who have overnight beds, use precedent from other partners on site at Gibson Medical Hub - Turquoise Lodge, Haven for Health, etc.
- Ensure that the operational plan speaks to the mission and goals of this hub, i.e., its role as transitional assistance. Arrive at a number that is appropriate for this concern.
- Ensure that the operational plan ensures the safety inside and outside the building in relation to the number of beds i.e., does not adversely impact quality of life in the community.
- Ensure that the balance between medical/non-medical beds is measured and accessible, and accountable to goals and mission of the center.
- Identify factors that lead to homelessness such as age, financial status, and domestic abuse, etc.
- Ensure that different demographics are handled appropriately, specifically who needs what and when, i.e., family and children.

What can be done to address these concerns?

- Design to meet the needs of people that will be seeking services at the center.
- Ensure that appropriate departments are tapped to address concerns about unhoused individuals and their relationship to the shelter.
- Case management to collect statistics.

Parking Lot

- Would like to see a legally binding Good Neighbor agreement.
- Concern about buildup of encampments near the Gateway Center.
- Storage for people's belongings.
- Make sure that community questions are answered regarding future operational plans and operation of the facility more generally.
- Establish trust between the City and the neighborhood.

- Provide an operational plan that neighbors can provide feedback on.
- Address affordable housing issues throughout the City, relationship to the center that puts people into permanent housing that is not just concentrated in the international district.
- Concern about migration from other cities to ABQ due to services for unhoused folks offered.
- Use the Gateway Center as a precedent for other homelessness initiatives within ABQ.
- Ensure there is a plan for where people go after they have stayed at the Gateway Center, and do not want that to be located in the neighborhood because it is already accommodating the facility.
- Ensure that the Gateway Center is a steppingstone for unhoused folks into housing long term.
- Want to be cognizant of not having people cycle in and out of the center repeatedly.
- Ensure that unhoused people are not just sent to the International District and put an undue burden in that neighborhood.
- There are many solutions to tackle homelessness and best practice examples that can be used for the Gateway Center.

BREAKOUT ROOM 5

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Clients may be vulnerable to violence, abuse from the general public.
- Potential outside spaces for those activities that aren't allowed inside the facility, i.e., smoking, etc.
- Area parks are being overrun by unhoused. These parks are being used as pick up points for the west side facility. Families can't use the parks due to needles, sexual harassment, violence, etc.
 - City is looking at moving those pick-up points.
- Appears that the more services that are being provided the more unhoused folks come to the area. Sometimes they don't actually take advantage of those services.
- Structural modification - Clients should not feel locked in or felt imprisoned.
- There are separate entrances for different services.
- Sanitation concerns - need even more than the 20 portable toilets already provided.
- Dedicated security officers on site 24/7 – 365 days per year.
- Overall Operations Plan - 3 main points. Still being developed.
- Acknowledgement of neighborhood feeling that this facility will bring additional crime to the area. Police response to this issue will be important.
- Concern that responses to the crime in the area will only increase with this facility and the neighborhood will backslide further with limited police support.
 - Albuquerque Community Safety program operational in August 2021 - non-armed response to calls.
- Appears that the City has already recognized that this facility will bring additional crime (with development of ACS facility at San Mateo and Kathryn).

How will you know a safe environment has been achieved?

- When families can go to the area parks and feel safe and not threatened.

What steps need to be taken to improve the safety of people inside and around the Gibson Health Hub?

- Will there be staff 24/7 to intake clients and get them into the treatment that they need?
 - Yes.
- Individualized service plan to determine needs and treatment options and services.
- Past State Police presence a couple years ago appeared to help things in the area. Encourage further collaboration between APD and State Police.
- Will there be separate areas based on level of need? Pre-screening or triage?
 - Entry point to assess the needs and get appropriate treatment.
- Public health issues, i.e., Covid positive, lice, bed bugs, etc. Response to these issues.
- Screening and potential quarantined. High intensity dryers to treat for bed bugs.
- Need to determine space needs for clients' storage, etc.
- Will there be staff to oversee residents at all times to feel safe and secure?
- Yes, not completely enclosed spaces but places for storage their belongings.
- Separate facilities for men and women.
- Issues around transgender and determining needs.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Security badging
- Proper storage
- Pets and service animals
- How will the interaction between the Gateway residents and Health Hub users be handled?
What do these spaces look like to eliminate conflicts?
 - Answer: There is an architect on board to design these spaces.
 - Answer: Distinct and clearly identifiable entrances.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Drag racing along Gibson, high speed traffic coming out of Kirtland AFB. How to regulate this issue without sending traffic into the surrounding neighborhoods?
 - Answer: Options are being explored in the action plan.
- Traffic calming requests have been denied in the past.
- The actual number of residents will be a determining factor in how to handle traffic.
- Entry points should accommodate shuttle services, vehicles, pedestrians.
- Traffic in the area makes pedestrian movement challenging and unsafe.

Operationally, how do you think that people should access a shelter bed?

- How to deal with walk ups who don't really qualify for services and are not taken in. De-escalation of potentially intense or violent situations.
- Understanding of the referral system. Evaluation of that referral to determine the best course of treatment.
- Potential shuttle service to take those who aren't accepted to other facilities to help with their issues.
- Providing a bus pass is not the solution.

- Perception of this facility is critical.
- This facility should not be a walk up (day) shelter.
- Don't want this to be a revolving door. Need to make a connection and determine treatment.
- Concern about congregation of groups if this is a walk-up facility.
- Public-private partnership with some of the lower rent hotels to provide shelter beds.
- Close proximity of liquor stores creates a conflict with this facility.
- Boundaries and structure for residents to be able to access treatment, doctor appointments, jobs, etc. Moving towards stability and exit strategy.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Questions regarding timing of the plan.
- Need to understand all of the issues and operations before understanding what those fears might actually be.
- Medical respite beds need to be considered separately from the 500 beds identified.
- Nothing now says that the number of beds could not be 500. Re-iterate that it is important to start small.
- Fear of unsustainable numbers of issues related to the understanding of the number of beds. Long term viability of transitioning out of facility is not sustainable with a higher number of beds.
- Want this to be one of many not the only one.
- This needs to be a piece of a comprehensive plan.
- This facility will not provide all of the beds needed for our entire community.
- Possibly start small to understand what those issues might be and be able to adjust over time.

Parking Lot

- Overflowing trash cans within parks on Tasty Tuesdays.
- Safe encampment areas appear to be a higher percentage in this area of the city.
- 28 such facilities are within a mile of the Gateway Center.

Project: Gateway Center at Gibson Health Hub

Meeting Date/Time: Saturday, June 12, 2021, 9:30 AM to 12:00 PM

Attendees: See attached sign-in sheets

BREAKOUT ROOM 1

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Concern regarding speed/crossing Gibson – pedestrian/transit riders.
- Team of intake officers at front desk.
- De-escalation team - 24/7 security-in an emergency situation and 24/7 dispatch for the neighborhood.
- Parks need to be safe for children, extend into the community (Bullhead Park).
- Plan for people who are rejected, overflow, they need to be safe (as does neighborhood).
- Transparent sharing of data don't rely on just neighborhood associations.
- Case management needed – budget.
- Safety in bathrooms.
- Bike rack!
- Smaller facilities – where are the other facilities?
- What is the catchment area? How will people get referral here?
- Budget should be sufficient for 24/7 security.
- More tiny homes.
- Concentrate on a specific population. Women and children at the Gateway Center.
- Budgeting, allocating funds (participatory budgeting).
- Volunteer mentors in community.
- Time limit should be established for staying in the Gateway Center.

How will you know a safe environment has been achieved?

- Neighborhoods being listened to and getting information.
- Make sure LGBTQ needs are addressed.
- Each City Council District to address the issue.
- Learn from other cities.
- Getting information out. The City of Albuquerque website is hard to navigate.

What steps need to be taken to improve the safety of people inside and around the Gibson Health Hub?

- Community public safety program – Kathryn and San Mateo.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Talk to the unhoused about what they need to feel safe at entry and exits.

- Higher priority for women and children than single men. Also need separate access and separate spaces.
- Shuttle service 24-hours per day.
- Referrals from other parts of the City.
- Get the information out about the shuttle services. Neighborhood circulars?
- Work with existing providers in Trumbull Village, God's Kitchen. Sources of information.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Referral network.
- Have a triage system – refer to the right facility/services in multiple locations.
- Vetted neighborhood volunteers as trained mentors.
- Outreach / intake offsite.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- If there is a small number of beds, people will get turned away.
- Will there be enough social workers and staff service providers to match the number of beds?
- Anything beyond 150 beds (max) is unmanageable.
- The District 6 Executive Board recommends 80-100 people, start small. (Dr. Peter Belletto, President District 6 Neighborhood Association)
- Pilot program – fewer than 50.
- If rollout isn't successful, the homeless population will be blamed.

What can be done to address these concerns?

- Focus on the people who want the help.
- Make sure people have access to services and are where they need to go.
- Limit number of beds to Davis' IDO amendment.
- Create an Executive Board.

Parking Lot

- Neighborhood Associations should not be the only way to communicate. Direct mailings and newspapers. The affected area is between Lomas, I-25, and Kirtland AFB.
- Have information at facilitated meetings for conditional use.
- Message board onsite.
- Put meeting notes on Albuquerque City Council website.
- Bulletin boards in parks and streets for notices.

BREAKOUT ROOM 2

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Area is not safe now.
- Unfair question.
- Now-robberies, lack of response, released of repeat offenders, car theft, needles. (3 agreed)
- Access is controlled. Times not at all hours.
- Was safe when Loveless was operating.
- Walkers – negative, all hours, break-ins, bathroom, etc.
- Substance abuse – won't want to be here. (1 agreed)
- A place where the unhoused have a safe and compassionate solution.
- Trees, lighting, clean.
- Provide help to curtail crime, drug abuse, etc.

How will you know a safe environment has been achieved?

What steps need to be taken to improve the safety of people inside and around the Gibson Health Hub?

- Safe for the residents too.
- 24/7 security.
- Will Gateway Center be a wet vs dry shelter?
- How are drop-offs that don't want to stay handled?
- What happens to banned individuals?
- If full, then what?
- Not allowed to hang out if not a resident.
- Issues with day shelter in Wells Park.
- Address people on the street that don't want to come to the shelter?
- People receiving services are in the street, parks, in our neighborhood.
- Not look like a shelter.
- Adequate staff and support?
- Budget monies are there.
- Communication between tenants, services, and shelter.
- Don't see homeless on the street, camping, enforce rules we have.
- Unhoused moved outside the City.
- Limit number of clients. Not only one place. Micro-hubs spread out. (1 agreed)
- Dedicated employees – not APD – to do outreach to support and make sure they get services and a place to go that is safe.
- Smaller, more focused.
- 24/7 contact if problems, not all, specific to this area.
- Lighting.
- Not seeing calls for service, 911, 311, etc. can be a metric for safety.
- No gunshots.

- Secure – fenced.
- Security for surrounding businesses and neighborhoods.
- Veterans are helpful.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Welcoming not a prison.
- Trauma informed – does not retrigger.
- Want access, but needs to be controlled – balance with emergency drop-off.
- What happens if they don't want to stay?
- Don't want to see people waiting to get in.
- Safe storage for vehicles and stuff.
- Sober facility.
- Want services -not forced to be here-not an alternative to fail.
- Self-referral.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Well administered/managed.
- Think about long term solutions/care.
- Ability to deal with unique and special circumstances.
- Good feeling when you enter – calming, clean, inviting.
- Ways for residents, community residents, and businesses, to provide feedback, and suggestions.
- Men and women separate. What about couples with and without children?
- Safety
- What do the rooms look like? Why is Gateway Center better than their existing situation?
- Provide support to get jobs.
- Dignified place to be i.e.; bathrooms, safe, showers, privacy.

Operationally, how do you think that people should access a shelter bed?

- Self or agency referral – not a drop off.
- Winter/emergency needs also need to be addressed.
- Small shelters.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Consider families.
- 100 – 150 beds.
- Commit to centers around town.
- Tied to funding and resources.
- Building is sized for many – 30 is not enough.

- 50 people – like a small number.
- Pilot period – test metrics/evaluation.
- Accountability if it doesn't work.

Parking Lot

- How many beds at the Turquoise Lodge?
- Shelters in every part of town.
- Financial, economic incentives to businesses impacted.
- How does this facility address the root causes?
- Focus on transition to permanent housing – metrics.
- Track and limit recidivism.
- Life skills – stop cycle of homelessness.
- Neighborhood has fought back but feel like back to square one.
- Need to choose to be sheltered.
- Security.

BREAKOUT ROOM 3

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Limit access to site to only people receiving services.
- Have a specialized social worker address issues, not APD.
- After review of City job postings for security at the site, the salary offered is not enough to attract applicants.
- People can stay at shelter 24-7, do not have to find somewhere to stay.
- Offer peer support and counseling for residents.
- Gateway needs an entrance and exit strategy so that people are not just let out back onto surrounding neighborhood streets.
- Homeless are magnets for crime.
- Unhoused are not a monolith. Requires personalized solutions.
- Do not want the area to change and be like Downtown around HopeWorks. No encampments in parks and unsafe streets.
- APD involvement is important. Add a substation in the area for safety and crime prevention.
- Safety on personal property and prevention of trespassers.
- There is not enough help for property owners and residents that experience issues.
- I do not want unhoused in this area. It is better if they are outside of the City and neighborhoods.
- Concern about a “ring of unhoused” in the area. If the Gateway Center is effective, it may attract others from around the City into the neighborhoods.
- Do not want a concentration of unhoused population in the area.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- To attract tenants, the Gateway Center needs to have clear guidelines for wayfinding, entries, and exits.
- Clean up of site, streets – add janitorial staff.
- More lighting on site.
- Additional security personnel.
- Require badges for entry.
- Clear separation of facilities.
- Clear access points.
- Include emergency entrance and exits.
- Different entrances and exits at night.
- Require referrals from other agencies.
- Shuttle service to and from the Gateway Center.
- Interface with existing service providers such as Veterans Administration and mental health providers.
- Pre-screen residents.
- Quid/pro quo with residents – structure give and take to improve their situations.
- Targeted population for Gateway Center, i.e., non-violent, students, veterans.
- Secure transportation to and from the Gateway Center for appointments, jobs, etc.
- Secure entrances.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- The City should review models or other successful programs.
- Concern that Gateway Center will replace the westside shelter if it closes.
- Beds could increase later.
- Neighborhood needs continued engagement mechanism to have recourse if the Gateway Center increases more beds.
- The Gateway Center will not handle the amount of people that need it.
- More beds for families feel safer than for singles.
- Administrative costs will inform how many beds.
- The size of the facility is important. The City needs to get the word out that it is not the whole facility.
- Limitation of 30 beds is manageable, 175 is not.
- Start with 30 beds to reassure neighbors, then maybe expand.
- Start small then review budget to increase beds.
- Limit number of beds based on zoning. Support Pat Davis amendment.
- What is the sustainable approach?
- Beds should not be determined by building size, but the availability to provide services.

Parking Lot

- There needs to be a comprehensive strategy to address all issues needed.
- Liquor store in the area is too close to schools.
- Reinvestment of the City to communities to clean up parks, streets, etc. Needs to be sustainable funding.
- 911 hold times are too long.
- City needs more neighborhood communication to obtain all voices.
- Outside neighborhoods have opinions about the area.
- Improvements are needed to get more neighbor access to the meetings.
- Afraid it is too late and the City has made decision without neighborhood input.
- Neighborhood Associations should not be the gatekeepers of the information. Direct communication to neighbors important.
- Outreach should be on the City.

BREAKOUT ROOM 4

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- Which population is getting served? ID, Downtown, Gibson, etc.
- Earning trust, City's credibility on projects.
- Traffic on Gibson – residents of the area and clients receiving services.
- Unsafe for pedestrians o.
- How will people receiving services arrive?
- Safety of clients.
- Large sex offender population. Protect children and families from sex offenders.
- Programmatic safety of clients being served.
- Neighborhood residents are concerned about their personal safety, homes, and property.
- Concerns about clients of Gateway Center walking through neighborhoods.
- Strong partnerships with other providers in the area i.e., Veterans Administration.
- Having unarmed personnel handling crises.
- De-escalation.
- Many organizations within the area that can work or partner together to address needs.
- Communicate with the VA to protect veteran's safety.
- Rebranding and positive messaging of who the homeless population is.
- There is an existing servicer in District 6, which people are unaware exists.
- Services already exist in the area, such as First Nations, VA.
- Protect unhoused from violence.
- Unarmed response to issues.
- Use Albuquerque Community Safety vs. APD for unhoused.
- Safety is a key service for clients. How will they be engaged in establishing rules and making changes as issues come up?

How will you know a safe environment has been achieved?

What steps need to be taken to improve the safety of people inside and around the Gibson Health Hub?

- Large volume of police calls to the facility.
- Police force is overwhelmed.
- Are we providing enough support to the police force?
 - Labor force capacity.
 - Response times to calls.
 - Types of calls.
- Have a capable staff/experts.
- Staffing ratio – appropriate numbers of staffing.
- Safety of children attending area schools. Reporting of children approached on/off school property.
- Realistic stats of crime in the area and accurate reporting.
- People using the facility will have the knowledge of being in the facility.
- What does safety look like for clients/people receiving services.
- Building relationships with others.
- Consistent 2-way communication with neighborhood associations and neighborhood watches.
- Ask customers to identify metrics of safety.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Security
- Access
- How are people arriving?
 - Public transportation.
 - Shuttle service.
- How will people be able to bring their belongings onto the property?
 - Examples of storage.
- Will the Gateway Center service the immediate area or the whole City?
- Is this a night shelter or day service center?
 - People will stay overnight and receive services. It is not a meal site; it is not a day shelter.
- Compassion Center is a day shelter – people can leave their belongings there.
- Create an asset map of services in the area. It can create an understanding of what is available.
- It may alleviate concerns if clients know where they can safely store their belongings.
- Transport children who are unhoused to schools.
- Use assigned “navigators” for clients of Gateway and others.
- Use Psycho-Social Rehabilitation for housed and unhoused neighbors who could use it.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Fear of encampments.
- Understand entry and exits in the design of building.
- Dedicated indoor outdoor spaces.
- Avoid having walk-ins because of traffic safety.
- Separate entry for customers who have substance abuse with current residents who are receiving services.
- Keep women and men separate.
- Separate for non-binary people.
- Entrance for couples.
- Separate space for those who are dealing with substance abuse.
- Separation section for people with pets.
- Clean up of needles by residents.

Operationally, how do you think that people should access a shelter bed?

- Referral
- Walk-ins
- Case management is important. Clients should agree to be part of case management to establish progression in services.
- Protect those in recovery.
- Safe injection use sites so people don't have to leave to use.
- Project Zero is an example.
- Holistic model of providing services.
- Detox and sobering beds.
- Treatment.
- Different methods for detox. Use First Nations example.
- Include gardening and exercise spaces.
- Outdoor sleep spaces for those who are not ready to come inside.
- Traffic calming on Louisiana, San Pedro, Truman Gate, Zuni, and Gibson.
- 90-day model is not a bad idea. May need some flexibility when things take longer.
- Provide medical and non-medical services for people (Soteria House, detox).

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- The neighborhood quality of life is impacted by those who sleep outside. More beds are needed!
- More people who can sleep off the streets the better.
- Mayor Keller's platform was to distribute facilities across the City, scattered site model. Residents want to support unhoused people, but what about the rest of the City residents? Residents want it to be balanced and fair. Don't want to be the City's solution! This area has a history of being tolerant and open, but here is a limit.
- More support services in the community.

- Don't want to turn people away, but also want them in other parts of the City.
- Enough beds – take a count very 2 years in each quadrant or by Council District.
- Place services where the problems area.
- More than 4 shelters in the area.
- 382 beds.
- As many beds as can be well staffed and works with space best practices.
- Avoid the death spiral of trying to do more with the same resources.
- Do not limit to 30 beds in such a large facility.
- Willing to do needle pick-up in Tanoan?
- Serve only this quadrant, not the whole City.
- Protect children from viewing usually private functions.

Parking Lot

- Communicate with the neighborhoods better.
- Publicize the meetings better.
- Low-barrier shelter on Tramway is a great idea
- Buy-in with existing service providers to increase the effectiveness of the Gibson Health Hub.
- The San Pedro ART stop is not open yet. Will be needed for access to Gibson Health Hub.
- ART cause a loss of credibility.
- GHH could house public health groups.
- Add workforce training with CNM to Gibson Health Hub.

BREAKOUT ROOM 5

TOPIC 1: SAFETY

What does safety at the Gibson Health Hub look like to you?

- No one sleeping in parks.
- Zero car break-ins.
- Zero increase in property crime.
- Zero complaints from children traveling to and from school.
- Health HUB = Customer satisfaction.
- Clear delineation of staff.
- Visibility of security in/out.
- Daycare of children.
- Structural Modifications
 - Renovation that encourages activity – not congregation.
 - Lights around the building.
 - Renovations to create environment that encourages activities to enhance programs, skills/services and foster independence.
- Operations
 - Transportation from the Center, what is next?
 - Number of individuals possibly capped e.g. 50-100.

- Structured activity of services.
- Start/require programs no later than 9:00 AM.
- Clear navigation to services (lines on the floor, signage).
- Food for individuals in the program only.
- Shelter by referral.
- No soup kitchen.
- Reasonable case manager loads.
- 24-hour non-city security. APD is too busy.
- On-site crisis management
 - Define spaces to give feeling of more safety for them and their belongings to reduce crisis intervention.
 - Zero daytime congregation of three or more people for more than one hour.
 - Zero increase in crime (drugs, cars, property). Baseline pre/post test.
 - Businesses continue to locate here.
 - Litter, cleanliness.
 - Parents, students = no complaints.
 - Increased police patrol.
 - No tents within half mile.

How will you know a safe environment has been achieved?

- How to measure safety
 - Breaking stigma
 - Invite public to volunteer.
 - Engage public in activities (promote togetherness).
 - Community buy-in.
 - Businesses continue to locate here.

What steps need to be taken to improve the safety of people inside and around the Gibson Health Hub?

- What daytime activities will be offered to clients (as opposed to groups roaming the surround community)?
- More plugs/advertising around the services that will be provided or connected to.
- Focus group for services providers to help figure out how to meet customers now and maybe ongoing.

TOPIC 2: ENTRY AND EXIT

For Health Hub customers, what do you think is needed to safely enter and exit the facility?

- Staffing
 - IDs for staff.
 - Way for staff to easily identify who is a client.
- Operations
 - Monitored entrance.
 - Greeted with courtesy.

- Structured activities for anyone here.
- Clear ways to direct/navigate programs and services that are sensitive to cultural/educational level needs.

What are some factors to think about when establishing specific entry and exit points for the Gateway Center within the Gibson Health Hub?

- Building Design
 - Signs in multiple languages
 - Modern finishes
 - Up to date/current
 - Provides individuals with value and pride to be here.
 - Clean / finished – looks more like a hotel.
 - Can't be intimidating.
- Outdoor Spaces
 - Client spaces for any pets
 - Kid's playgrounds
 - Include space for outdoor programming, green spaces,
 - Cultivation = ownership
 - Consider if programming could be “viewable” by neighborhood.
- Operations
 - Ability of EMS, fire, and police to refer and transport individuals to the HUB.
 - Community paramedics to follow up with individuals after they leave the HUB.
 - Having security walk around like here, can make people feel uncomfortable or safe depending on the person.

Operationally, how do you think that people should access a shelter bed?

- Entry System
 - Separation for businesses vs. people for shelter services.
 - Separate entrance depending on required services.
- Gain Access
 - Through a referral, intake not at this location.
 - Provide transportation to shelter from somewhere. Possibly 24-hour service. Extensive transport.
 - Day care activities for homeless children.
 - Will children be attending local schools while in program?
 - Will there be occupational, or work therapies offered?
 - What is the difference between a homeless shelter and the Gateway Center?
 - Build it, they will come.

TOPIC 3: OVERNIGHT CAPACITY

What are your fears and concerns about the number of beds?

- Building Environment
 - Clear identification they are allowed here.
 - Design entrances / exits for designated populations.

- The number of beds is not as important as the ratio of person to case workers available to provide appropriate services.
- Referral
 - Increased floating case managers.
 - Peer support.
 - Maybe look at number of units instead of “beds” for families. Maybe more acceptable.
 - Absolute necessity is case workers to people.

What can be done to address these concerns?

- Facilitate where to redirect an individual if they show up and can't get service after capacity is reached.
- What if 1,500 people show up?
- Shear number of people in the space.
- If this location is intake and people are turned away, they could go into neighborhoods and cause issues.
- Can't force individuals to participate and stay in activities.
- Finite funding – needs to balance of funding to number being serviced.
- Address way to limit the cycle of individuals circulating through group homes.
- How to ensure long-term placement.

Parking Lot

- Provide veterinarian services (fleas, rabies, etc.)
- If Gateway is not a “day shelter” what will individuals do during the day? Won't they tend to walk the surrounding neighborhoods?
- Will Health Hub customers be able to show some sort of ID to come and go? Will there be guards at entry points?
- Aren't most unhoused families eligible for aid to families with dependent children? Won't those payment provide for shelter and food? How are families without housing?

**Gateway at Gibson Medical Hub
Community Input Session June 12, 2021**

Name	Phone	Email
Merna Brostoff	(505) 440 - 3976	merna621@gmail.com
CW Book	(505) 268 - 5346	CWBOOK@SPINN.NET
Richard Ward	(317) 965 - 0172	rward@Tyrus.edu
Ryan Bisio	(484) 764 - 0352	elizaranbisio@gmail.com
Christina Martin	(505) 507 - 9686	phinayphinn@gmail.com
Eliza Martin	(505) 659 - 8180	eliza.martin@yahoo.com
Melinda Frame	(718) 541 - 0266	melinda.frame@gmail.com
Patrice Fasano	(505) 270 - 1169	pennyfasano@gmail.com
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .

**Gateway at Gibson Medical Hub
Community Input Session June 12, 2021**

Name	Phone	Email
Daniel Vargas	505) 589-0620	dan Var 1975 @ICloud.Com @_____.
Donna Strong	(505) 255-1473	1mstrong1954 @ yahoo.com
KATE MATTHEWS	(505) 353-2403	kate.sonora @ gmail.com
CANDY NARTONIS	(617) 851-8151	candynartonis@gmail.com
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.
	() _____ - _____	@ _____.

**Gateway at Gibson Medical Hub
Community Input Session June 12, 2021**

Name	Phone	Email
Taylor Cook	(817) 896 - 7618	taylor.cook @ gmail . com
Savet Simon	(817) 239 - 0229	PHNACommunity@ PHNAC smaf . com
Mary Collins	(505) 204 - 4392	mrycollins @ hotmail . com
Bernadette Hardy	(915) 887 - 7140	Hardy-bernadette @ yahoo . com
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____

**Gateway at Gibson Medical Hub
Community Input Session June 12, 2021**

Name	Phone	Email
Maria Chavez	(504) 417 - 0296	Miagec @ dol .com
Grace Bousch	() _____ - _____	@ _____ . _____
Ilse Biel	(505) 507 - 4940	ilsebiel @ icloud .com
Mara Hoffman	(505) 399 - 6100	weemais1 @ gmail .com
Margaret Ward	(505) 803 - 5232	margaret.ward @ sbglobal .net
Rachel Baca	(505) 563 - 0156	siesta2na.president@ gmail .com
Ken Sherrell	(505) 266 - 1291	kensherrell@msa.com
Bill White	(505) 306 - 3120	whitebillygoat @ gmail .com
Kathleen Gysi	(505) 231 - 7616	kgysi @ unam .edu
Vera Watson	(505) 401 - 3753	vera.e.watson@ gmail .com
MAGI EZZARD	⁵⁰⁵ () 507 - 6216	abofthanksgivingron@yahoo.com
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____
	() _____ - _____	@ _____ . _____

**Gateway at Gibson Medical Hub
Community Input Session June 12, 2021**

Name	Phone	Email
David Montoya	(303) 999 - 9701	davidmontoya476 @ Gmail.
Barbara Dodge	() -	bdodge123 @ hotmail.
Natalie Vargas	(505) 589 - 1518	nvargas8175 @ icloud.com
Enrique	() -	@ .
Robin Elkin	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .
	() -	@ .

Please us give emails!

242

Gateway at Gibson Medical Hub
Community Input Session June 12, 2021

Name	Phone	Email
Doreen McKnight	() ____ - ____	doreenmcknightm @ gmail . com
Ruth Haest	() ____ - ____	rhaest @ unm . edu
Iris Metzger	(505) 440-8351	abqcervantes@gmail.com
Juan Peña	() ____ - ____	Penajm @ unm . edu
STEVE SACCO	() 620 - 9108	@ ____ . ____
Craig Eburdach	() ____ - ____	CPE SOS @ gmail . com
Mona Sherrell	() ____ - ____	mcsherrell @ msn . com
Scott Robinson	(505) 417-0750	scotarobinson @ gmail . com
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____
	() ____ - ____	@ ____ . ____