Gateway Center at Gibson Health Hub
Administrative Policies

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Introduction

The City of Albuquerque acquired Gibson Health Hub in April 2021 with a vision to provide an anchor facility to fill healthcare and social service gaps. The Gibson Health Hub will provide a wide array of services that promote health, healing and recovery, building on the historical uses of the facility to provide essential services such as primary medical care, inpatient and outpatient behavioral health treatment and other services. The vision also includes adding services through a new Gateway Center to help fill community gaps for shelter with person-centered case management services for people without homes.

This document provides an overview of administrative policies that provides a view of daily functions of the two major components of the Gateway Center - the Gateway Shelter and Gateway Engagement Center. This document is a preliminary from which a later set of standard operating procedures will be developed with specific guidelines for staff to operate a safe, welcoming and orderly location. The administrative policies presented in this document are based on many years of direct experience, national best practices, and recent innovations field-tested by the City and community non-profit partners to operate congregate and non-congregate shelters with case management and housing programs.

Clarifying Terms

The **Gibson Health Hub (GHH)** refers to the entire 572,000 square foot facility and will include both current and new health providers that serve both Gateway Center and non-Gateway Center populations.

The **Gateway Center** is an element of the Gibson Health Hub and will occupy a portion of facility to serve unhoused populations with temporary living areas and support services through two main components, an Engagement Center and Gateway Shelter.

The **Engagement Center** will help connect Gateway Shelter guests to resources and services needed to exit to permanent housing and maintain housing. The Engagement Center will also connect people who come to Gibson Health Hub seeking help to needed resources and services.

The **Gateway Shelter** will provide low barrier, trauma-informed shelter that meets people where they are at with a person-centered approach to develop a plan that focuses on a successful exit to permanent housing. The Gateway Shelter will provide distinct and secure living areas for families with children, adults (men, women, and non-binary) as well as couples.

The **Gateway Center Operations Plan** provides information about the scope of the project on how it relates to the community externally.
The *Gateway Center Administrative Policies* provide detail about the internal day-to-day operations.

**Trauma-Informed Design** is an evolving concept that intentionally considers the effects of the physical interior environment on persons who have experienced trauma. Trauma-informed design principles focus on space perception that inspires a feeling of safety and dignity in the design of interior physical environment including: space planning and layouts, materials (furnishings, fixtures, and equipment), lighting, color, removal of adverse stimuli, wayfinding, design details and enhancements (art, plants, signage). In addition, the needs of particular subpopulations of homeless individuals are considered.¹ This design principle aims to promote successful access to support services by eliminating or mitigating elements in the environment that could trigger or contribute to trauma.


**Person-Centered Approach** is an approach founded by the influential psychologist, Carl R. Rogers, Ph.D. that acknowledges that each individual has within him or herself vast resources for self-understanding, for altering the self-concept basic attitudes, and his or her self-directed behavior - and that these resources can be tapped if only a definable climate of facilitative psychological attitudes can be provided.³ A person-centered case management approach ensures that the person who has experienced homelessness has a major say in identifying goals and service needs, and that there is shared accountability. The goal of case management is to empower people, draw on their strengths and capabilities, and promote an improved quality of life by facilitating timely access to the necessary supports, thus reducing the risk of homelessness and/or enhancing housing stability.⁴

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² Substance Abuse and Mental Health Services Administration. SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014
Gateway Center Mission and Principles

Gateway Center Mission
The mission of the Gateway Center is to provide a safe and welcoming place that provides a low-barrier, trauma-informed shelter along with trauma-informed services to meet people where they are at, using a person-centered approach to support individual paths to housing stability.

Gateway Center Principles
The design of the Gateway Center will be trauma-informed to reinforce a safe and welcoming atmosphere and be ADA compliant.

Gateway Center programming will incorporate a person-centered, trauma-informed approach that is equitable, culturally and spiritually accommodating, and supportive of LGBTQ+, people of color and people living with disabilities. Programs will embody a person-centered approach to support connections to community, and attain housing and behavioral health stability so that homelessness is a brief, rare, one-time experience.

The Gateway Center will provide multiple opportunities for each participant to develop an exit strategy such as to supportive housing, treatment, or another shelter.

The Gateway Center will be a low barrier shelter that follows the Housing First principles to address immediate and long-term housing needs. As a low-barrier and inclusive shelter, the Gateway Center will accept unhoused people who may have complex histories, including a criminal history.

The Gateway Center will leverage existing services and develop partnerships for referrals into the community to foster collaboration and not competition. This includes creating space within the Gateway Center for other community partners to connect with guests and provide services, such as satellite office space.

The Gateway Center will operate with a harm reduction philosophy to address substance use disorders. Guests do not need to be clean and sober to access the Engagement Center or Shelter, but they cannot use drugs on site.
Gateway Center Administrative Structure

The City of Albuquerque’s Department of Family and Community Services (DFCS) will provide administrative oversight for the Gibson Health Hub and the Gateway Center. The City Department of Municipal Development (DMD) will oversee operation and maintenance of the entire Gibson Health Hub facility. The Department leaders will huddle daily and coordinate their work through the GHH Operations Manager.

Administrative oversight of Gateway services will be conducted by City employees, such as the DFCS Deputy Director for Homeless Policy and Solutions, the Gateway Administrator, the Gateway System Analyst, the GHH Gateway Community Outreach Coordinator, and the Social Services Coordinator (see Figure 1 below for an illustration of the structure).

Direct services will be provided through contracts through the City’s procurement process with oversight by DFCS staff. This structure builds on the existing service model, in which the City provides direct and indirect oversight of services conducted through social service and professional-technical contracts with local non-profit agencies procured through the City’s bidding process. By locating oversight staff at the facility, the City will be able to exercise continued quality assurance of service provision and collaboration.

The physical space of the Gibson Health Hub facility will be operated and maintained by DMD staff similar to the day-to-day building operation and maintenance of other City-owned facilities, contracting for specialized services as needed through a standard procurement process. The administrative oversight of the Gibson Health Hub tenants and project management of the build-out is overseen by DFCS and DMD staff.

Key Roles

The FCS Gateway Center Administrator will provide development, oversight and administration of programs and services. This individual will oversee service providers and other City staff to ensure that programs and services operate as intended to move guests forward on their paths to housing and health stability. The Administrator plays a key role to ensure collaboration among service providers and various activities conducted in the Gateway Engagement Center and Gateway Shelter and will be responsible for coordinating day-to-day operations with the organizations selected to operate the Gateway Center to support a smooth and user-friendly experience by guests.

An onsite Gateway Community Outreach Coordinator will coordinate with outreach teams active in the community that support unhoused populations, including Albuquerque Community Safety teams and outreach teams operated by local non-profit agencies. This individual will also focus on ensuring that teams provide positive engagement with individuals who are reluctant to access shelter or have high barriers to permanent housing, including those...
who are living in the International District. This will likely involve seeking to understand the reasons for their reluctance and, if possible, addressing those concerns.

The Gateway Systems Analyst will be responsible for evaluation of Gateway services and to ensure that effective and efficient systems are in place to implement and evaluate service delivery, including the evaluation of services to inform improved practices as programs and services phase in, and the development of trauma-informed HIPAA compliant data systems. The Analyst will work with the DFCS Senior Policy Advisor to measure and monitor neighborhood impact. Together with the Gateway Center Administrator, the Gateway System Analyst will work with the organizations operating the Gateway Center to develop and implement a Data and Quality Assurance Plan.

Direct services will be implemented by local non-profit entities and will be selected through City-issued competitive request for proposals (RFP). The current vision includes a model in which one or more organizations are selected to operate the Gateway Shelter and Engagement Center to provide culturally competent services that address distinct needs of subpopulations.

City-employed team leads will coordinate on a constant basis with agencies providing the support services included in Figure 1.
Gateway Engagement Center

Purpose
The Gateway Engagement Center will help connect Gateway Shelter guests to resources and services needed to exit to permanent housing and maintain housing. The Engagement Center will also connect people who come to Gibson Health Hub seeking help to needed resources and services.

Access to and Use of the Engagement Center
The Engagement Center will host local service providers from the community, in order to help Gateway Shelter guests strengthen their existing connections with providers and to help facilitate new connections to other services. Partner agencies at the Engagement Center will help Gateway Shelter guests establish medical and behavioral health care, obtain benefits such as Medicaid and Supplemental Nutrition Assistance Program (SNAP), obtain employment and educational services and support, in addition to other resources and supports. Service providers may opt to have a main or satellite office within the Engagement Center, and there will also be flexible office space for outreach staff from various agencies to meet with guests on site. Guests will be connected to the Engagement Center through the case management staff at the Shelter.

The Gibson Health Hub will be a central point for medical, behavioral health and wellness services for the community. The Engagement Center will serve those who present seeking help. The Gateway Engagement Center will establish rules and parameters to manage expectations about what is (and is not) offered and how to best access services.

Skilled staff will engage with people seeking services. Sample approaches include:

- Engaging in conversation to support a feeling of safety and build rapport;
- Problem-solving together using best-practice strategies including Diversion that prevents homelessness by helping to identify immediate alternate housing arrangements and, if necessary, connecting people with services and financial assistance to help them return to permanent housing;
- If shelter is the most appropriate solution, assessing a match to Gateway or other shelters, bed availability, and facilitating a warm hand-off;
- Conducting an assessment to identify existing service connections and working together to develop and support next steps; and/or
- Offering engagement to connect with services. Guests who choose not to engage will be offered transportation options and asked to leave with the option to return when ready to access services.
The Gateway Engagement Center will not be a “day shelter,” meaning it will not provide options for drop-in where people without homes may spend part of their day (such as facilities operated by other community agencies).

The Engagement Center will provide restrooms and water (including bottle refill stations) and may provide locked charging stations during its operating hours.

Operating Hours
The Engagement Center will operate daily from 8:00am - 5:00pm. The days and hours will be assessed to determine if they meet guest need and adjustments will be made as needed. First responder drop-off for the Shelter will be available 24 hours a day, 7 days a week.
Gateway Shelter

Gateway Shelter Intake Policy and Process

The process to access a Gateway Shelter bed would be through community agencies that work with the unhoused population. Service agencies access online forms to conduct initial pre-admission and screening process to assess if the guest fits Gateway Shelter criteria (for instance, can take care of daily living tasks). The goal is to have an online system that would provide current bed availability for the populations that the Shelter serves.

The standard referral process is through a community agency. Community agencies will be provided with a system to enter basic information that communicates with the Gateway Center database in a manner that protects access to personal data. To make the connection as smooth as possible, and to determine whether appropriate shelter and/or services are available for the guest, community agencies will have the option to conduct an initial screening. If a bed is available and the prospective guest agrees to comply with the terms of the Gateway Shelter Guest Agreement, the community agency will schedule an intake appointment and arrange transportation to the Gateway Center. The Gateway intake process will continue where the referring agency left off.

Intake Details

- An intake and orientation policy and procedure will be established in partnership with the organization(s) operating the Gateway Shelter.
- During the initial phase, the Gateway Shelter will conduct intakes daily between 8:00am – 8:00pm for most community partner referrals.
- The Gateway Center Shelter will conduct intakes 24 hours a day, 7 days a week for referrals from hospitals, first responders and law enforcement. Physical space will be created to receive referrals from first responders (e.g., AFR, ACS), law enforcement and hospitals outside of the regular 8am – 8pm intake hours. Gateway Center staff will conduct a person-centered assessment the following morning to connect the individual or family to needed resources. Transportation will be provided if needed.
- New guests will be asked to provide basic identifying information, such as name and date of birth for all household members but will not be required to provide proof of identification.
- New guests will receive an orientation to the Gateway Shelter and will be asked to sign a Guest Agreement that addresses respectful interaction with the staff, other guests, the physical space and surrounding neighborhoods. (See Appendix for sample agreement deployed at Wellness Hotels.)
- Guest Rights & Responsibilities will be posted.
• Pets will be welcome. Guests will sign a Pet Agreement upon entry and be responsible to take care of their exercise, feeding and pick up their waste in designated outdoor areas.
• Weapons will not be allowed in the facility. Guest will sign an acknowledgement of the weapons policy upon entry.
• Medications will be stored in a safe location for guest access.
• The priority for the first 24-48 hours at the Gateway Center is to allow new residents to get oriented, to rest, take care of basic needs like food, hygiene and laundry, and create a sense of safety.
• New residents will be offered a safe place to store their belongings after entering the Gateway Center. Guest items that exceed the storage space in each cubicle/room will be located in a separate secure area. Guests can access their items during designated hours with staff.
• All personal belongings will be heat-treated upon entry for pest control.

Operational Policies and Procedures
Gateway Center will develop policies and procedures to guide staff on daily operations. The detailed policies and procedures and training protocols will be developed in partnership with organizations under contract to provide services at the Gateway Engagement Center and Gateway Shelter. Examples of policy and procedure topics that could be included in a staff guidance manual may include:

• Occupancy Eligibility and Duration of Stay
• Guest Agreement Terms
• De-Escalation Protocols
• Responding to Difficult Behaviors
• Dispute resolution
• Guest Requests, Disturbances and Incident Reporting
• Drug and Alcohol Policy
• Sex Offender Notification Policy
• Suspension and Termination of Services
• Record keeping and retention

Critical incident policies and procedures may include:

• Emergency Procedures
• Fire Procedure
• Emergency Evacuation Plan
• Infectious Disease Outbreak Policy and Procedure
• First Aid Policy and Procedure
• Naloxone Policy & Procedure
• Threat and Assault to Staff and Guests Policy and Procedure

For illustration purposes, a limited sample of policy/procedures developed for the City of Albuquerque’s Wellness Motels is included in the appendix.

Phasing and Bed Capacity
The Gateway Center will be implemented in phases for target populations and services as illustrated in Figure 2 below. Each phase will be evaluated to inform next phase of implementation:

- The Gateway Shelter will ramp up in phases to serve approximately 25 families and 100 adults on a nightly basis\(^5\). The Engagement Center and person-centered case management services will initiate implementation to coincide with the shelter coming online. The first phase operating start date aims to start winter 2022.

- The implementation and outcomes of each phase will be evaluated to improve current operations and inform rollout of subsequent phases. Quantitative and qualitative data will be collected through the implementation process assess program progress and how to improve continued operations.

- The proportion of beds anticipated to serve men and women is based on current male to female ratios at the Westside Emergency Housing Center (WEHC), with approximately 70% of the shelter beds for men (70 out of 100) and 30% of bed for women (30 out of 100). This ratio is consistent with national trends.

The architectural and construction team will develop a trauma-informed layout that fosters a sense of community and pride among shelter residents. The City is working with the architect to determine ways to maintain safe spaces and physical separation between families, women, and men, with the goal of establishing separate entrances if feasible. The City and design team have visited shelters and other facilities here in Albuquerque and in a number of other locations - including San Antonio, San Diego, Salt Lake City, Seattle, Vancouver, Phoenix, Tucson, Denver and Las Cruces - to develop best practices.

Sleeping Areas
Sleeping areas will be designed to reflect best practice and trauma informed designs. Guests will be assigned to a specific sleeping area and bed during their stay to provide stability. Current design considerations include single beds rather than bunk beds, and a reduced number of beds

\(^5\) Medically-based services in the Gibson Health Hub are separate from the Gateway Shelter.
per room. These design considerations will provide an improved atmosphere as compared with the common congregate shelter design that locate multiple bunk beds in a large room. Other design considerations to increase the sense of dignity includes the possibility of low partitions between beds to provide a sense of personal space.

Quiet times will be established to provide guests with opportunity to full rest. Guests will have access to a secure locker area to store personal items located near their sleeping area. There will be recuperative spaces for guests who are ill, to help promote healing and recovery and to reduce the spread of infection.

Sleeping areas for different populations will be located in separate areas and possibly separate floors of the facility. Security personnel and electronic badges will ensure that guest areas are kept private and secure from residents on other floors and non-residents. In the development of these floor plans, the City and design team will bear in mind the special needs of people experiencing domestic violence and other safety threats as well as the principles of trauma-informed design.

**Resource Rooms and Service Offices**

Each Gateway Shelter population area will be provided with a multi-purpose resource room that can provide areas for group or individual meetings as well as computers to seek employment and register for documents needed to obtain housing and other services. The resources brought into the room may include art therapy, financial literacy, support groups, skill-building and training activities, etc. Site operations staff will monitor activities and continued guest safety.

Person-centered case management will be available to all sheltered populations, consisting of case managers, peer support workers, and housing navigators, located with offices located strategically on shelter floors to allow for access, privacy, safety and efficiency.

Social service agencies will also be provided with space to meet with guests in private areas to work on their individual goals.

**Program Model**

The Gateway Shelter will incorporate best-practice philosophies into administrative policies including Housing First, which is a low-barrier approach that allows anyone experiencing homelessness to access shelter without prerequisites, regardless of their background or current

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6 Housing First is guided by the belief that people need basic necessities like food and a place to live before attending to other issues, such as getting a job, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life. For further information, see [https://endhomelessness.org](https://endhomelessness.org)
level of sobriety and that recognizes that issues that may have contributed to a person or family’s homelessness can best be addressed once they are permanently housed. A main tenet of the Gateway Shelter Administrative Policies is to provide guests with opportunities to create a housing exit plan and to connect with services in the community that can be sustained when people leave the shelter. Housing navigation services will be available onsite. Administrative policies will align the approach between Gateway staff and other social service providers (e.g., case managers, outreach workers, housing navigators and peer support workers) to connect guests with community-based medical and behavioral health providers (for instance, the medical home\(^7\) model for primary care that is patient-centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety). Promoting long-term housing and health stability involves a warm handoff and connection to community agencies to support Gateway Shelter guests after they exit.

**Length of Stay**
To reinforce the shelter as a temporary living situation, the stay will be time-limited. Local and national best practice have demonstrated the efficacy of limiting shelter stays to focus services on assisting people to create a plan to access services and permanent housing options as quickly as possible. This approach is currently implemented locally at a Wellness Hotel and other community shelters.

The goal of the Gateway Shelter is to help guests transition to a safe, stable exit destination within 90 days.

Gateway Center staff will use best practices, such as motivational interviewing, to engage guests at entry and throughout their stay and to assist guests with setting and achieving their stated goals to achieve housing and behavioral health stability. Gateway Shelter staff will regularly meet with guests to support their progress, and will assess overall progress at least every 30 and 60 days.

Guests that are engaged in exit planning may be allowed to stay longer than 90 days for certain reasons (e.g. actively engaged in treatment, or they have a housing voucher but are still looking for an apartment).

In general, guests may stay at the Gateway Shelter for 90 days within every 365 days. Exceptions may be made under certain circumstances; the City in partnership with the organization(s) operating the Gateway Center will establish an exception policy.

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\(^7\) For further information, see https://www.pcpcc.org/about/medical-home
Estimated Turnover
Once phase-in is fully implemented, and given the implementation of a 90-day stay, it is estimated that available beds would turn over four times during the course of a year.

Using these assumptions, the Gateway Shelter serving families that can serve 25 families at a time, could serve approximately 100 families over the course of a year.

Once phase-in has been fully implemented, the same assumptions could be applied to turnover of adult populations. As stated above, the estimated allocation of 100 beds to serve at one time would, in simple terms, provide shelter to 30 adult women and 70 adult men (assuming that couples without children and people who do not identify with a binary gender are included in this total). With a turnover of four times over the course of the year, an estimated 120 women and 280 men would be served in a year after full implementation.

Housing Supply
The City is committed to funding the additional permanent supportive housing and rapid rehousing needed to ensure Gateway Center guests are able to exit to permanent housing. The City has grown and continues to grow its supply of supportive housing vouchers and affordable housing units.

Gateway Shelter Services
The Gateway Shelter will be a low barrier emergency shelter that uses a harm reduction philosophy. Some households have a long history of homelessness or have cycled in and out of homelessness, while others may be newly homeless. Some will have significant behavioral health issues or significant barriers to obtaining permanent housing, while others will have fewer barriers.

All Gateway Shelter guests will have access to person-centered peer support and case management services while staying at the Gateway Center. A guiding principle for Gateway services is to build and maintain a sustainable connection to community health and social service agencies (i.e., medical home and case management through community-based providers). If a person is not already connected with a local agency, then the staff can help connect them with an agency inside or outside the GHH facility. As needed, staff can provide a warm handoff and offer transportation to other sites that can provide available shelter or services.

Onsite services may include those outlined in the Coordinated Community-Wide Framework On Homelessness developed with the Homelessness Coordinating Council such as:

- Individualized support to target needs/needs assessment
• Storage space
• Housing coordinator, pathway to housing
• Support applying for disability benefits (e.g., SOAR representatives)
• Employment and education support
• Certified peer support workers, guest advocates, community health workers
• Skill building opportunities
• Healthcare personnel
• Child development support services

Gateway Center staff will regularly meet with guests to support their progress, and will assess overall progress at least every 30 and 60 days.

Gateway Shelter guests will have access to Housing Specialists while staying at the Gateway Center. Housing Specialists will help guests develop and implement a plan to exit to safe stable housing with 90 days.

The primary focus of services will be to help individuals and families develop a plan to exit to a safe, stable destination within 90 days. Peer support and case management staff will coordinate with the housing specialists and community partners, help guests enroll in benefits, secure documents needed for housing and income, and connect guests to resources needed for long term stability. Case management staff will assist families with young children in enrolling in school, accessing Title 1 benefits, establishing high quality early childhood development programs, child care and youth programming.

Short-term behavioral health services will also be offered on site. There will be on-site crisis intervention and de-escalation teams.

The City will work with the organization(s) operating the Gateway Shelter to establish a clear referral system with other services located in the Gibson Health Hub, including:

• Turquoise Lodge
• Haven Behavioral Health (in-patient and out-patient)
• NM Department of Vocational Rehabilitation

The Gateway Shelter will connect guests to resources and supports that they need to maintain housing, increase their income and that promote mental, emotional and physical well-being. For each household, this may include establishing a medical home, obtaining substance use or mental health treatment, employment and educational programs and legal services. This includes creating space within the Gateway Center for other community partners to connect with guests and provide services, such as satellite office space.
The Gateway Center will establish partnerships, including clear referral mechanics, with external services, including but not limited to:

- Intensive Case Management
- Behavioral health services
- CARE campus (crisis, substance abuse)
- Educational resources
- Job resources
- Counseling
- Substance abuse treatment
- Domestic violence services
- Legal resources
- Veterans Administration services
- Resources for spiritual wellness, such as mindfulness classes, yoga, etc.

A Resource Center will be open for extended hours each day and provide access to computers and printers. Staff will be available to help guests complete applications for housing, employment and benefits, and to assist with resumés, interview prep and other employment supports.

Services to support families with be provided, including early childhood development services with drop-in hours, parenting classes and individual coaching/support for parents.

**Exit Strategies**

The goal of the Gateway Shelter is to help guests transition to a safe and stable exit destination within 90 days. This could include permanent housing, family/friends, a recovery program or other option, and connection to needed community resources.

All Gateway Shelter guests will have the opportunity to meet with a case manager and begin developing a guest centered exit plan within 48 hours of entering the Gateway Center.

The Gateway Shelter case managers will work with each individual or family to develop person-centered goals for an exit to a safe, stable destination, to identify barriers to achieving those goals, and strategies for addressing those barriers. For guests able to pay for housing on their own, case managers will assist guests with identifying appropriate apartment options and completing rental applications, including assistance with rental application fees and security deposits.

For guests that need subsidized and/or supportive housing, case manager staff will assist guests with completing the appropriate applications. This will include completing the VI-SPDAT for the Coordinated Entry System.
For guests that need residential behavioral health care, case management staff will assist with connecting guests to behavioral health facilities, including in patient substance abuse treatment.

For guests who do not complete or implement an exit plan, Gateway Center staff will connect them to another appropriate exit destination which may include the Westside Emergency Housing Center.

**Meals**

A nutritious breakfast, lunch and dinner will be provided to Gateway Shelters guests. Snacks and sack lunches will be available. The Gateway Center will accommodate the needs of guests with special dietary needs for health, religious or other reasons. The Gateway Center will provide baby formula and pet food as needed for guests.

Meals will be served in a common dining area at set times for different populations. Meals will be for Gateway Center guests only. The Gateway Center will not be a meal site that serves the general community.

Guests will receive assistance from case managers to apply for food related benefits, including WIC, SNAP and APS free or reduced-price meals.

Any personal food will be stored in a central location and in a way that prevents insects or other pests.

The kitchen area will have its own delivery port and access apart from the GHH and Gateway Center.

**Other amenities**

Laundry facilities will be available in/near the living area for each population segment (e.g., families, adult men, adult women). A protocol will be established to ensure guests have access to the laundry facilities.

Resource centers with computers will be available to guests. A protocol will be established to ensure appropriate computer use.

Bathrooms and showers will be available for Gateway Center guests.

TV will be available in the common areas. A protocol will be established to ensure appropriate use of the TV.

The Gateway Center will have a library. A protocol will be established to ensure appropriate use of the library.
All populations at the Gateway Center will have access to an outdoor space with shade and amenities such as raised garden beds for Gateway guest use.

Guests will have access to a safe place to store belongings. A policy on abandoned personal belongings will be developed.

Water bottle filling stations, locked charging stations and wireless internet will be available.

Gateway Center residents will be able to receive mail at the Gateway Center. A procedure for handling residents’ mail will be developed.

Pets will be allowed at the Gateway Center. All guests with pets will need to sign an agreement, agreeing to take care of their pet while at the Gateway Center. Coordination will occur with the City’s Animal Welfare Dept. to assist with healthy pet practices (e.g. vaccinations). The outdoor spaces will be designed to accommodate pets.

Gateway Center amenities will serve guests staying at the Gateway Center. The Gateway Center will not be a “drop in” or “day shelter” location for people without homes who are not staying at the Gateway Center.

Guest Input
Mechanisms to solicit and implement guest input and suggestions will be implemented. These will include:

- Suggestion box
- Guest Ombudsman (designated staff position)
- Weekly guest meetings (Attendance encouraged but optional)
- Guest Advisory Council
- Quarterly guest surveys
- Dispute Resolution
APPENDIX A – Staffing Plan

Single Adult Shelters-Men, women and non-binary adults

● Director of adult shelter operations for all 1:100
● Program Director for shelters - 3:100
● Donation/volunteer coordinator – 1:100
● HMIS data manager – 1:100
● Supervisors – One would be a lead supervisor who handles HR and staff scheduling – 1:25
● Shelter residential staff (front door, intake and floaters) 4:100
  ○ 6am-4pm – 1:33
  ○ 4pm-10pm – (these are usually the most active times) – 1:25
  ○ 10pm-6am – 1:50
  ○ Ratio including supervisor = 1:50
● Diversion/Rapid Exit Specialists to ensure 7-day 9am-5pm coverage – 1:50
● Resource Center coordinators - ensure 7-day 9am-9pm coverage computer lab in each shelter same 1:33
● Housing Navigators - 1:15
● Case management - 1:15
● Employment Specialist -1:50
● Peer specialists – 1:15
● Ombud’s officer – 1:100

Family Shelter

● Program director – 1:25
● Donation/volunteer coordinator – 1:25
● 1 HMIS data manager (share with adult shelter)
● Supervisors – One would be a lead supervisor who handles HR and staff scheduling (front door, intake, and floaters) – 2:25
  ○ 6am-4pm – 2:25
  ○ 4pm-10pm – 3:25 (these are usually the most active times)
  ○ 10pm-6am – 2:25
● Program services manager (supervises case managers, coordinates visiting organizations) – 1:25
● Diversion/Rapid Exit Specialists to ensure 7-day 9-5 coverage – 2:25
● Resource Center coordinators - ensure 7-day 9-9 coverage – 3:25
● Housing Navigators – 1:15
● Case management – 1:15
● Peer specialists – 1:15
● Employment Specialist -1:50
● Child & youth services coordinator – 1:25
● Ombud’s officer (share with adult shelter)