





Homeless Services System 11:00 – 12:30 December 1st, 2020

Minutes

Meeting Participation Principles:

- Past Progress Many diverse, and respected voices have contributed to where we are today.
- Preparation All background materials, minutes and project updates should be read, prior to meetings.
- Contribution Every voice is elicited, uninterrupted, and heard.
- Distraction Mute cell phones, avoid side-conversations, stay on-topic.
- Transparency Acknowledge mistakes, provide upward feedback, seek differing opinions.

Co-Chairs: Quinn Donnay (DFCS), Commissioner Charlene Pyskoty (Bernalillo County), Rodney McNease (UNM) Attendees: Lisa Huval (FCS), Laura Norman (CABQ consultant), Cate Reeves (NMPCA), Nicole Taylor (CABQ City Council Policy Analyst), Deiandra Cole (Downtown Block by Block Ambassadors), Margarita Chavez Sanchez (BernCo), Marit Tully (Near North Valley NA), Christina Apodaca (Santa Barbara Martineztown NA), Beth Brownwell (Stronghurst NA), Doreen McKnight (Wells Park NA), Khadijah Bottom (South San Pedro NA)

Individual:	Discussion/Action
Welcome and	1) Quinn Donnay opened the meeting by welcoming participants, then
Introductions, approval of	Commissioner Pyskoty moved into approval of minutes. Minutes that were tabled
minutes	from 10.20.20 for additional edits were approved, as were minutes from
	11.17.20. Introductions followed.
HCC Update, Next Steps	2) Quinn Donnay explained that today's work will build on that of last meeting,
Quinn Donnay	where lead agencies/entities were identified for each strategy. Next, the
	challenge is to identify action steps for each high impact strategy and sub-
	strategy. A matrix was used to synthesize the information and create an easier
	tool with which to move through discussion.
	Strategy: EMERGENCY SHELTER FOR SINGLE MEN
	Within is the sub-strategy of Architectural Design that is Trauma Informed and
	includes many elements recognizing the needs of different populations. The
	action steps for the identified lead agency/entity (CITY) to take are:
	 Provide list of elements in the matrix to the architect so these can begin
	to be integrated into design concepts. How will the spaces fit these
	needs?
	• Architect should talk directly with service providers now to research how
	these needs can translate in design concepts.

 Architect should talk directly with neighborhood representatives to see how their neighborhood mitigation impact ideas can be integrated into design concepts.

Clarification from Lisa Huval was given regarding timing of the shelter construction once location is determined and design is done. There will not be a fast-track – the City procedures that are set in terms of timing and approvals will be followed. So, timeline in terms of discussion in this matrix of strategies and action steps doesn't include the timeline to bring the shelter operational, at this point. Also clarified that the architect has already been chosen by the City via RFP last fall; no specific drawings are being done without a known site(s), but this committee's work will help inform the design and guide the project conceptually. The group recognized that establishing next steps would be easier if site(s) were known, in terms of acreage and location, but work to move forward the plan for services can be done remaining flexible to that issue.

Access to Basic Needs Including 24/7 beds meals/food, bathroom, shower and laundry. *Action steps* for lead entity (CITY) are same as described above. Plus:

- Define 24/7 access and how that can happen safely and be designed effectively, to include researching what other communities are doing and bringing back examples.
- Request ideal recommended property size from architect based on the services identified
- Engage with persons experiencing homelessness via service providers such as AHCH to gather their input on services/needs

Behavioral Health Services includes many services and lead entity is COUNTY. How does this sub-strategy begin to be operationalized, recognizing there are many unknowns in today's environment (such as Covid, economic downturn). And, this is not about how to fund and who to fund yet. Per Margarita Chavez Sanchez, referencing the County's existing behavioral health services, Intensive Case Management has a ratio of roughly 10 to 1. This service typically is for a longer period of time, so will this service/this staff provide services to people also when they are no longer on site at shelters? Peer Support (who she can see potentially holding the dual role of Client Advocate also), is a ratio of roughly 20 to 1 and would be more of a direct, on-site service delivery. It is a trauma informed approach to have a small number of people working with a client/guest. This builds better rapport and eliminates the need to tell one's story over and over. Community case managers and peer support in their programs are doing risk assessments now, and transition plans also if needed. Cross training could be done for example, so that SOAR services (outreach workers specializing in navigation of Social Security benefit enrollment) could be provided by more than one staffer or category of staffer. This allows for continued development of rapport between one staffer and a client/guest.

Margarita's/the County's case manager job description could be altered a bit as needed to reflect the different positions. She said that the City should have some job descriptions in house for intensive case managers, since the City funds this at CARE campus. And UNM also has job descriptions available.

Action Step for lead entity (COUNTY w/ CITY):

- Quinn Donnay to send her notes from this segment of meeting to ensure everything was captured accurately for the matrix, and Margarita Chavez Sanchez will fill in any holes.
- Job descriptions will be gathered and compiled by Quinn Donnay

The challenge of having enough staff was mentioned, as Deiandra Cole shared that a major complaint she hears from people without homes is that they cannot get in touch with their case manager. Discussion continued around the qualifications for the various positions followed including dialogue on educational requirements. Commissioner Pyskoty supported that finding enough licensed, qualified providers in behavioral health is an ongoing issue. Marit Tully confirmed that the team being envisioned for shelter services would be different kinds of people with different skills. Promotora model, similar to Peer Support, that includes a state certification program was another job category offered for consideration by Nicole Taylor.

Beth Brownwell asked about a centralized system for keeping track of shelter residents recognizing privacy may be an issue; would be a trauma informed approach not having clients/guests repeat their stories often. HMIS (homeless management information system) was mentioned and confirmed as an existing tool that will be used.

Albuquerque Community Safety First Responder Drop Off Point: Action Step for lead entity (CITY)–

• Talk with the newly forming department within the City and learn their process and plans; see how this Committee's plans fit into their process.

Medical Respite: Very complex element, requiring a high level of staffing. City has been in contact with service provider AHCH which has a strong medical respite vision. *Action Step* for lead entity (CITY):

• Talk with UNM and Rodney McNease to learn more specifically what would be needed for a medical respite (25 bed).

Medical Support: Medication Management on site and adequate personnel on site. *Action step* for lead entity (UNM):

• Quinn Donnay will ask Rodney McNease who had to leave this meeting what the action step is.

Specific Positions: Housing Coordinator and SOAR Representative. (Will add this to the email follow up Quinn Donnay is doing with Margarita Chavez Sanchez who had to leave the meeting) Lisa Huval said that at one of the City's Wellness Motels currently in operation due to Covid, there are housing coordinator and service coordinator positions. One of the goals of the wellness motel is to help people exit into permanent housing.

Action Step for lead entity (CITY/COUNTY):

• Learn from the wellness motel positions and see if this work/these positions shape staffing and services in shelter services going forward

	There was question on whether follow up will be part of the shelter after the
	guest/client has left which is an item for continued discussion; also there was a
	request to include pathway navigators in these ongoing dialogues.
	Behavioral Health Crisis Triage: Quinn Donnay will ask Rodney McNease and
	Margarita Chavez Sanchez who both had to leave the meeting what the action step
	for lead entity (UNM/COUNTY):
	 Ask what their process is – how BH Crisis Triage fits in with this committee's work
	Transportation : Lead entity (CITY/COUNTY/UNM) What is transportation pattern for the WEHC and how can we get more bus passes.
	Quinn Donnay will send out matrix with Action Steps to Committee before the end of the week.
	EMERGENCY SHELTER FOR FAMILIES WITH CHILDREN is the next major Strategy to
	review – however, it is mostly repeats of the above, so did not review this section item by item.
	EMERGENCY SHELTER FOR YOUNG ADULTS AGES 18 TO 25 – Quinn Donnay said that
	this Strategy should be moved over to the committee working on Youth Housing, rather than this committee. <i>No action items for this committee</i> .
	Next meeting will focus on Strategies to Mitigate Neighborhood Impact. Quinn
	Donnay asked the neighborhood representatives to look closely at this section of the
	matrix she will send out later this week in preparation.
	Evaluation : Evaluate impacts of shelters within 5 miles of proposed location. <i>Action Step</i> for lead entity (CITY):
	Quinn Donnay to ask Rodney McNease whether UNM will be willing to
	provide some of this evaluation.
	Marit Tully asked for clarification regarding whether 3 different shelters are definitely
	being considered. Lisa Huval confirmed that the assumption is 3 different, with the
	community already offering strong input in the last year that a large single site shelter
	was not desirable. This committee will await the HCC Facilities Committee's
	completion of its work and identification of locations.
	Deianda Cole asked whether input from persons who are homeless is being
	considered. There was input gathered via focus groups previously, but it is time at this
	stage of the process to again engage them for insight. Will enter this in action steps
	above for Access to Basic Needs.
Next Meeting:	• Dec. 15th, 2020
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Core Documents:

CABQ: Focus Group – People With Lived Experience, Gateway Center Site Ranking Report, Gateway Center Online Survey Report, Gateway Center Public Input Session, Changing the Story document, Assessing Shelter Capacity Report

(Barbara Poppe and Stephen Metreaux report), Gateway Concepts document, Medical Respite Community Needs Assessment

UNM: UNM Hospitals 2020 Community Health Needs Assessment

BernCo: Bernalillo County Healthcare Task Force Recommendations: 2014