



# WASHOE COUNTY VULNERABLE POPULATION & HOMELESSNESS STRATEGY

HOMELESS  
HOPELESS

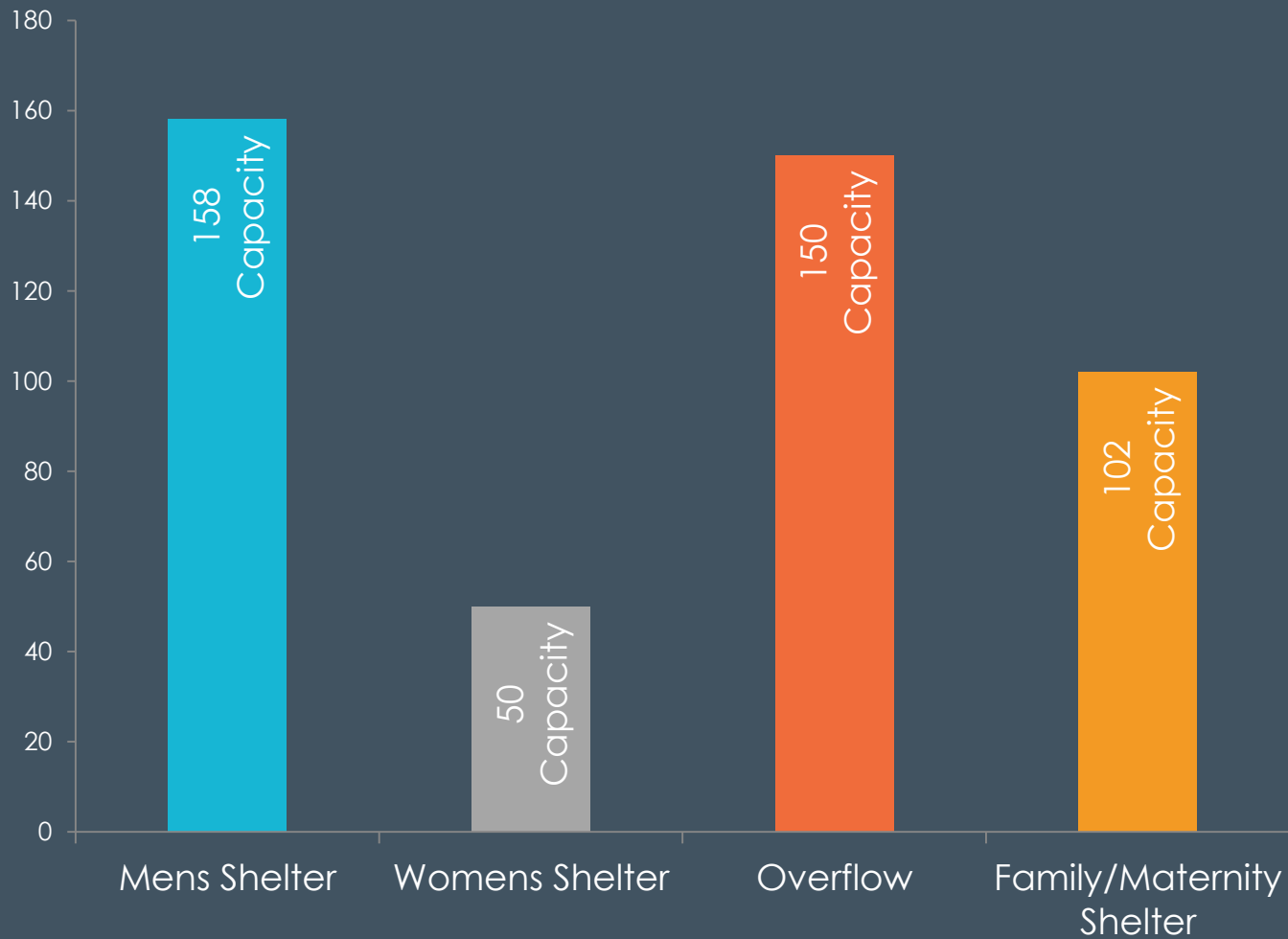




We are  
homeless  
not invisible.



# CURRENT STRUCTURE



Graph is total capacity of shelters broken into each category. Overflow is men & women; primarily men. Family/Maternity Shelter usually houses around 85 people.

# COMMUNITY ASSISTANCE CENTER

The Community Assistance Center (CAC) provides services to assist individuals who are homeless with resources and case management. HSA provides 2 million dollars in funding for the CAC.

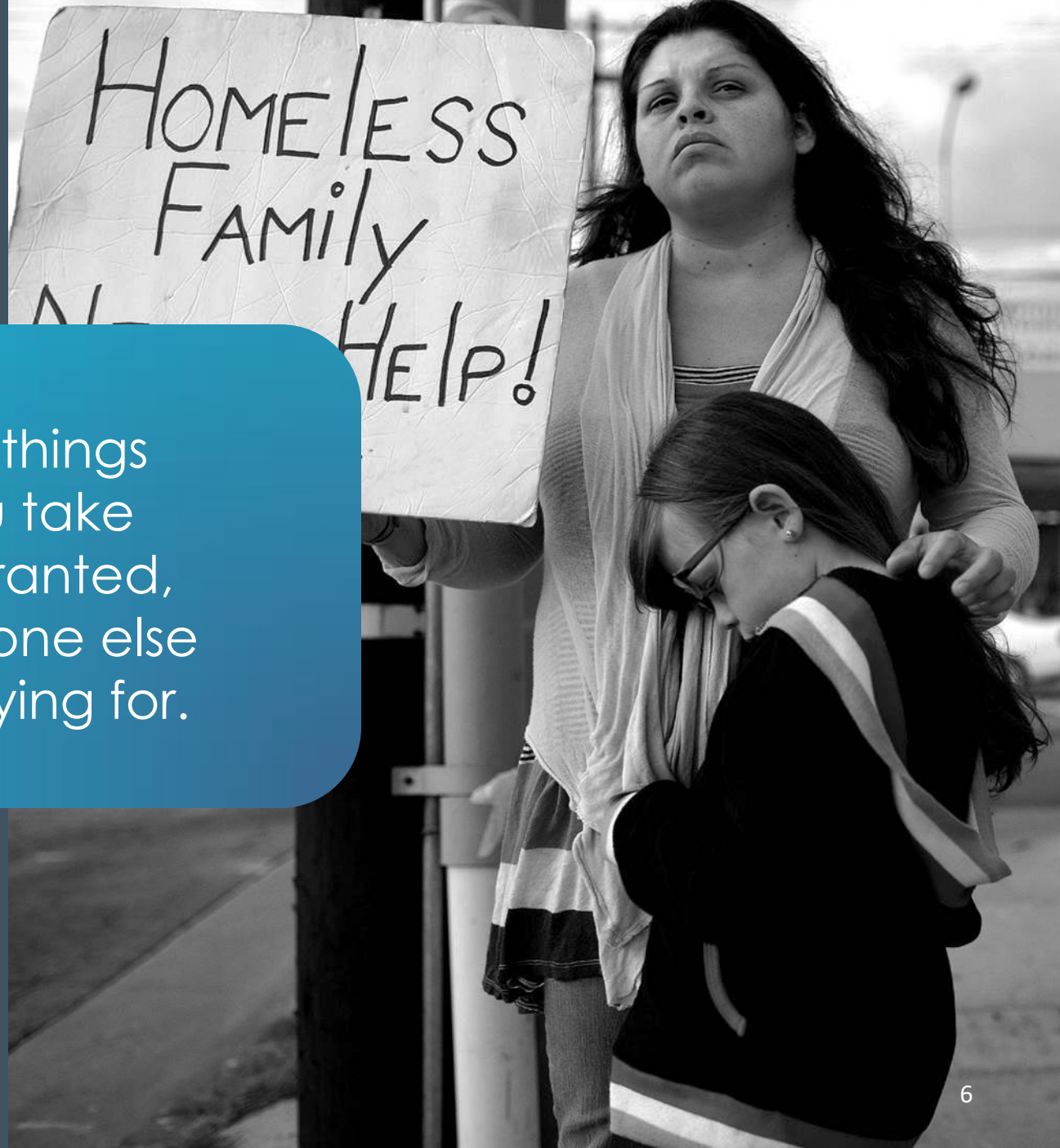
The Community Assistance Center is made up of three shelters:

- Men's Shelter
- Women's Shelter
- Family Shelter
- Triage Center
- Children In Transition Office



# CAC CAMPUS PLAYGROUND





The things  
you take  
for granted,  
someone else  
is praying for.

# REASONS THAT LEAD TO RESIDENTS' HOMELESSNESS



Cost of housing



Lack of income/ loss of employment



Health, mental & addiction issues



Evicted/ kicked out/ end of relationship/  
domestic violence circumstances



No family/ friend support system



Transient/ runaway

# WHAT RESIDENTS' NEED TO LIVE INDEPENDENTLY



Housing



Employment



Medical/ mental health assistance



Transportation



Program/ service availability



Vocational rehabilitation



# CROSSROADS

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

The goal of Crossroads is to prevent relapses into homelessness and substance abuse, and to reduce public costs associated with jail, hospital and other emergency services.





“

We have come dangerously close to accepting the homeless population as a problem that we just cannot solve.

# CURRENT CHALLENGES/ NEW OPPORTUNITIES



Current Shelter does not bill Medicaid services



Lack of substance abuse and mental health services



Minimal health & dental access



Low incentive to make positive decisions and work towards independence



SNAP benefits continue to be provided while living at the shelter



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



Ongoing drug use on campus

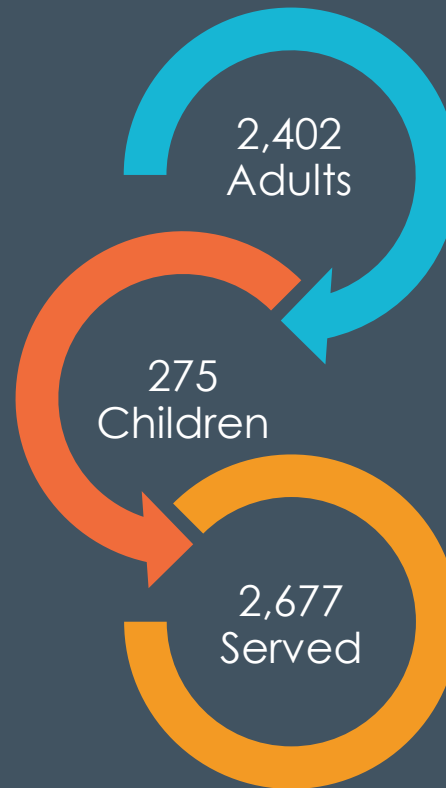
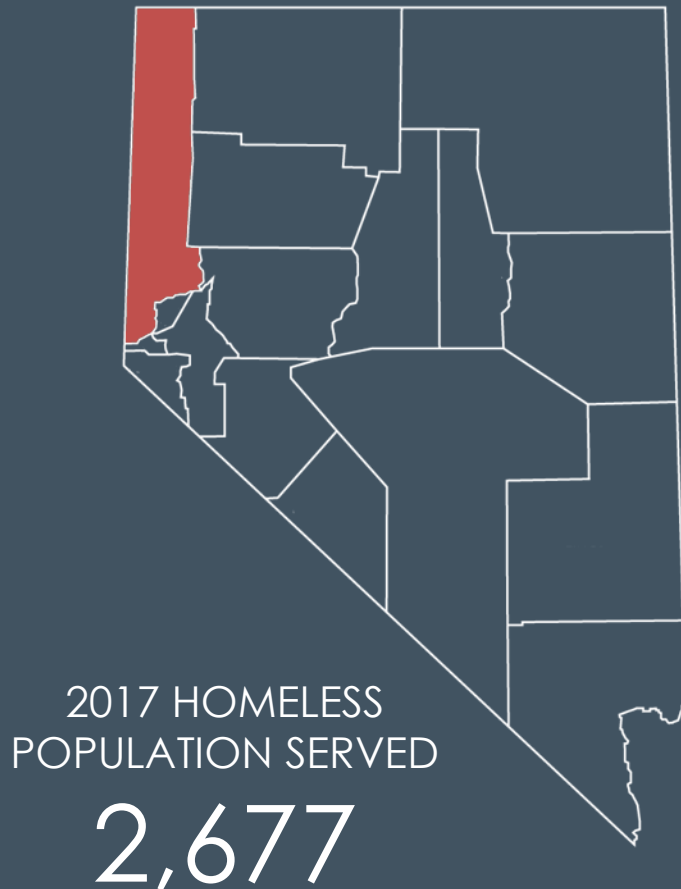


Co-mingling several populations leads to an increase in incidences and safety concerns for residents. The shelter is the #1 response location for MOST and REMSA.



Sex trafficking

# CAC SERVICES LEVELS/DEMOGRAPHIC

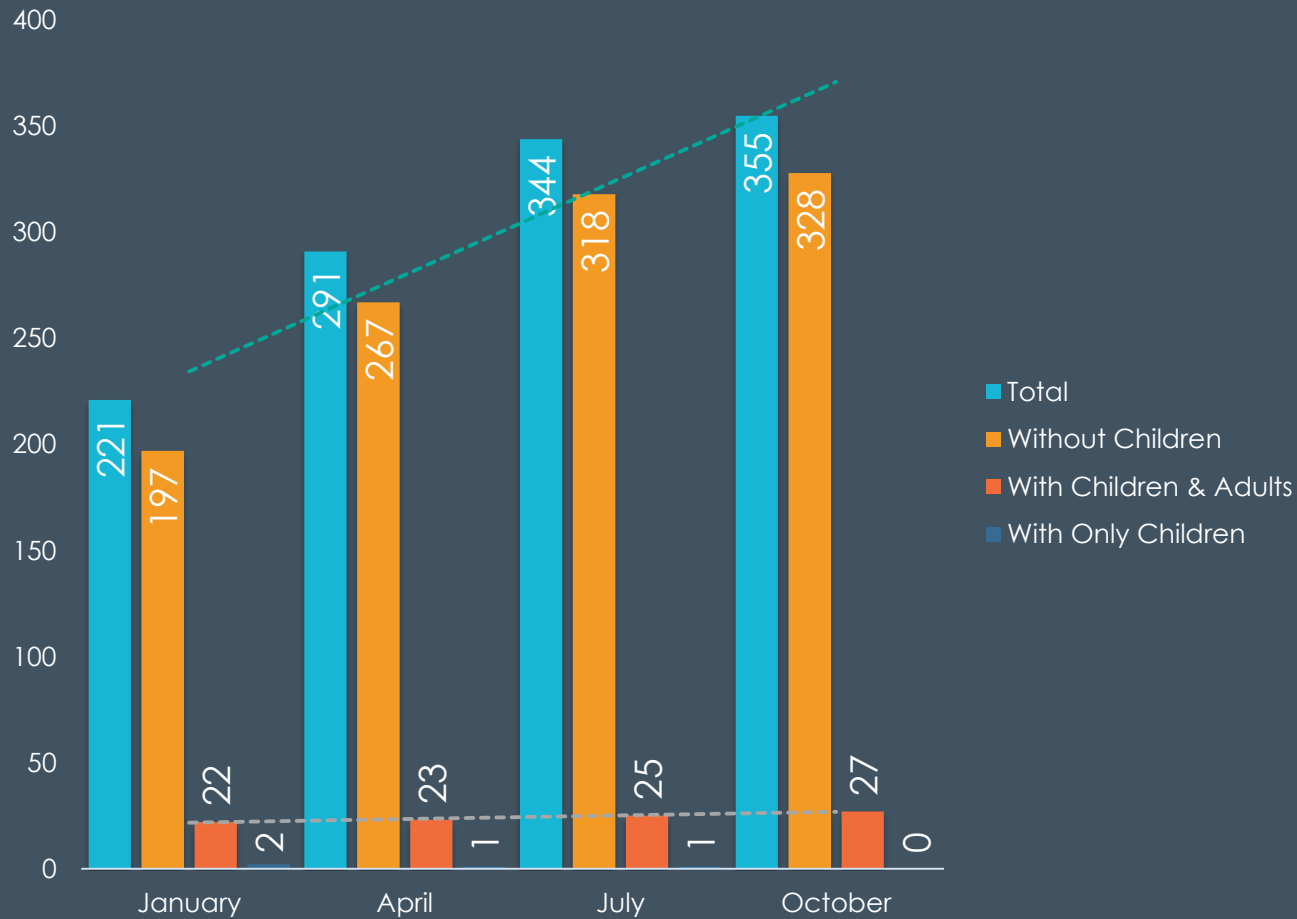



- 69% Men (1,662)
- 30% Women<sup>1</sup> (727)
- 32% 45-54 years old (671)
- 16% of women with children (118)
- 57% Male (157)
- 43% Female (118)
- 3% alone in shelter (8)
- 42% < 5 years old (116)
- 12% are Seniors<sup>2</sup> (331)
- 2,357 Households
- ≈24 households with children served each month
- 65% stay ≤30 days (1,744)

<sup>1</sup> The remaining 1% are Trans.

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

# HOUSEHOLDS SERVED



60% 

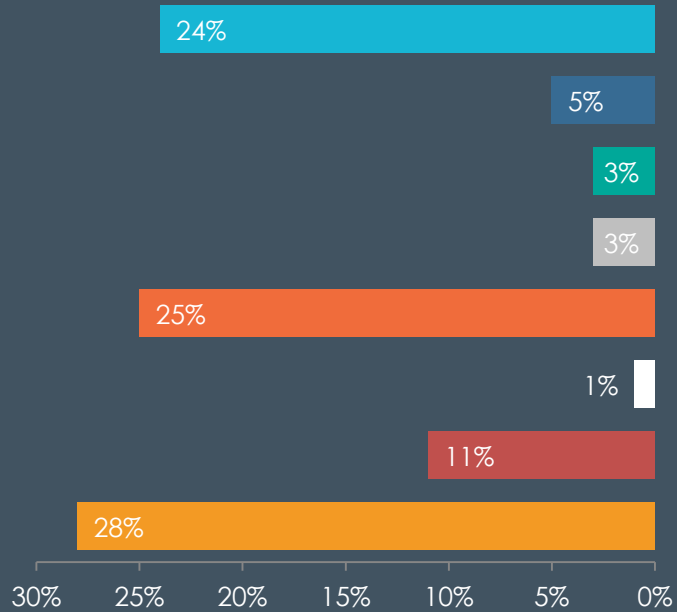
Increase from  
January – October 2017

Graph is based off Point-in-Time calculations of households served; report was ran the last Wednesday of each referenced month.

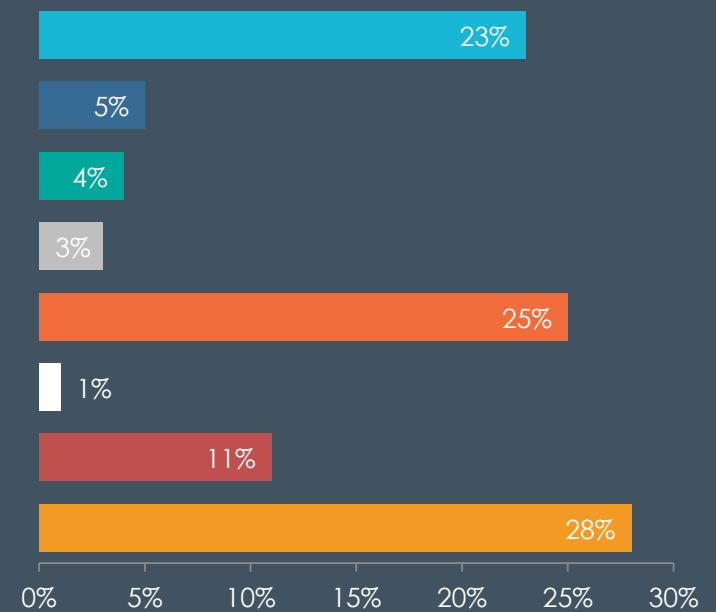
Source: HUD Annual Performance Report; NV-501 Volunteers of America (VOA); 01/01/2017-12/31/2017

# PHYSICAL & MENTAL HEALTH CONDITIONS

## CONDITIONS AT START



## CONDITIONS AT EXIT



**67%** had 2 or more conditions from Start to Exit

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

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

# CAC ENTER & EXIT STATISTICS

## LIVING SITUATION

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



## EXIT DESTINATION

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



## NON-CASH BENEFITS

- 55% receive >1 source
- 44% receive NO benefits



## LENGTH OF STAY

- 65% ≤ 30 days
- 11% ≥ 91 days<sup>3</sup>



## INCOME

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



## HEALTH CARE

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



<sup>3</sup> 90 days is the maximum amount of days that clients can stay. However, due to extenuating circumstances, clients may have that time extended.

“

Maybe home is nothing but two arms holding you tight when you're at your worst.





# NNAMHS CAMPUS PROPOSAL

## PHASE 1

### 8 CENTRAL HOMELESS FAMILIES

AT CAC: 21 ROOMS

UTILIZING EXISTING STAFF

- 2 HSA CASE MANAGERS
- 1 VOA SHELTER MANAGER
- 6 VOA FTE'S
- 6 VOA PT'S

### 8 SOUTH HOMELESS WOMEN

AT CAC: 50 BEDS

UTILIZING EXISTING STAFF

- 1 VOA CASE MANAGER
- 1 VOA SHELTER MANAGER
- 6 VOA FTE'S
- 6 VOA PT'S

### 8 C HOMELESS FAMILIES

AT CAC: 6 ROOMS

UTILIZING EXISTING STAFF

- FAMILY STAFFING/CASE MANAGEMENT

### 604 HOMELESS POST PARTUM

AT CAC: 12 ROOMS

UTILIZING EXISTING STAFF

- VOA FAMILY STAFFING/CASE MANAGEMENT

### SRC HOMELESS SHELTER LEARNING CENTER

AT CAC: 40 CHILDREN

UTILIZING EXISTING STAFF

- STAFFED THROUGH BOYS & GIRLS CLUB

## PHASE 2

### ENLIVEN SENIOR DAYBREAK

AT 9TH: 22 CLIENTS

UTILIZING EXISTING STAFF

- RELOCATE ALL SENIOR SERVICES STAFF

### 601 INDEPENDENT LIVING/ SUBSTANCE ABUSE

AT CAC: 50 BEDS

NEEDS SIGNIFICANT REHAB

### MOBILE PANTRY TO INCREASE FOOD SECURITY & SELF SUFFICIENCY

## PHASE 3

### KITCHEN SENIOR NUTRITION

AT 9TH: 22 CLIENTS

UTILIZING EXISTING STAFF

- RELOCATE ALL STAFF

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

REQUIRES REHAB TO PROVIDE LONG TERM HOUSING

## ADDITIONAL ITEMS NEEDED

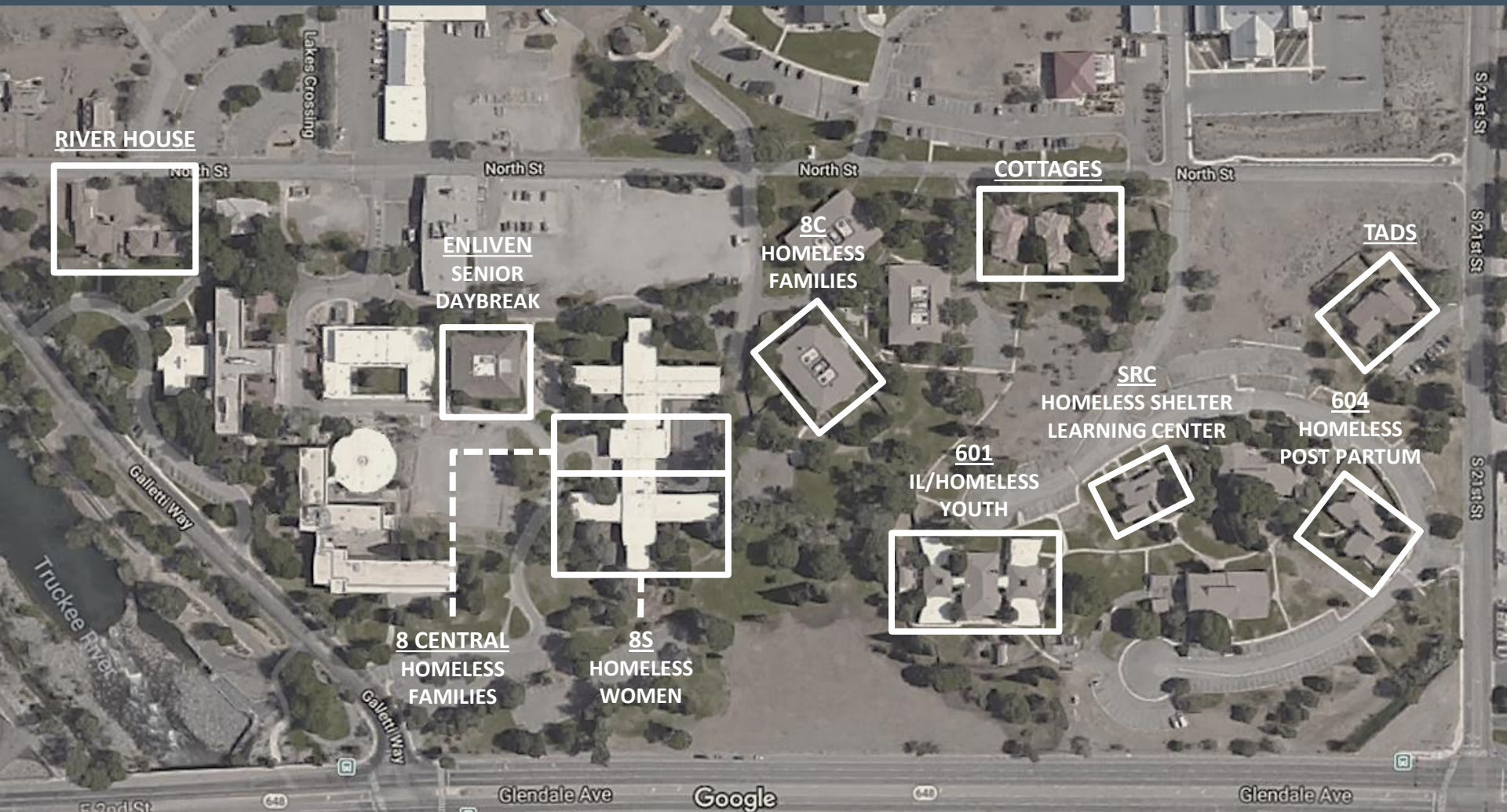
SECURITY

FOOD & SNAP BENEFITS

LAUNDRY

MAINTENANCE

# NNAMHS CAMPUS PARCEL MAP





“

The greatest cruelty  
is our casual  
blindness to the  
despair of others.

# DAYBREAK

The Daybreak program is a licensed adult day program offered at the Washoe County Senior Center on 9th Street, in Reno. Daybreak provides a safe and secure environment for cognitively or physically impaired adults. Services are designed to provide social and health assistance; as well as, community support to adults who need supervision and supportive care outside of the home, and serves as an alternative to institutional care. The Daybreak program also offers respite for caregivers, allowing seniors to age in place- promoting healthy caregiving.

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



# EXPECTED OUTCOMES/ GOALS

1

Separate populations at Community Assistance Center

- Relocate women, children and families



2

Implement a targeted approach for programming of the male population focused on their unique needs and access to resources



- Eliminate overflow
- Reduce visibility of homelessness downtown



Expand Crossroads Program success

3



Utilize NNAMHS campus availability

- Consolidate HSA resources on campus
- River House / TADS currently at NNAMHS

4



“

I always wondered why somebody didn't do something about homelessness, then I realized I AM somebody.

# GOALS & RESIDENTS' PLANS



Access to mental health and substance abuse resources



Decrease admission to jail and emergency room stays



Preservation of families to prevent foster care placements



Be self supporting and have a productive life



Get an education



Maintain stability



Find and keep employment



Help others in same circumstances



Reconnect with family/friends

“

I was homeless  
and you gave me  
shelter!





# YOU ARE NOT FORGOTTEN

?

Questions?