

*City of Las Vegas*

# **Homes For Homeless Nevadans 10 Year Plan to Reduce Homelessness**

*In partnership with the Southern Nevada Regional Homeless and Housing Plan*



March 2006

*Prepared by:*

City of Las Vegas

Neighborhood Services Department

10-Year Planning Committee



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## **Acknowledgements**

### **Mayor**

Oscar B. Goodman

### **City Council**

Mayor Pro-Tem Gary Reese, Ward 3

Larry Brown, Ward 4

Lawrence Weekly, Ward 5

Steve Wolfson, Ward 2

Lois Tarkanian, Ward 1

Steven D. Ross, Ward 6

### **City Manager**

Dr. Douglas Selby

### **Deputy City Manager**

Steve Houchens

Elizabeth "Betsy" Fretwell

### **Neighborhood Services**

Orlando Sanchez, Director

Stephen Harsin, Deputy Director

Dr. Lisa Morris, Neighborhood Initiatives Manager

Devin Smith, Neighborhood Response Manager

Stephen Harsin Acting Manager, Development Division

### **Planning Committee**

Trina Robinson, Project Manager

Leonard Dixon, Project Team Member

Anne Kilponen, Project Team Member

Frank Reynolds, Project Team Member

Franklin Simpson, Project Team Member

### **Southern Nevada Regional Planning Coalition's Committee on Homelessness Ten – Year Planning Committee**

City of Las Vegas

Clark County

City of North Las Vegas

City of Henderson

City of Boulder City

Southern Nevada Adult Mental Health

U.S. Veterans Administration

### **Southern Nevada Regional Homeless Coordinator**

Shannon West, MSW

### **Graphic Artist**

Michael Campbell

# Executive Summary

## Introduction

**H**omelessness affects all facets of the community; it cuts across race, ethnicity, age, culture, and education lines. Nevertheless, homelessness is most likely to affect low income vulnerable populations who, more often times than not, lack safe, affordable housing, earn low or extremely low wages, and have limited access to health care. Other factors affecting those living in poverty include domestic violence, mental illness, addictions, and release from correctional and medical institutions without adequate services and support. All of these factors could result in a loss or inability to attain housing.

Homelessness is a complex social problem for which there are no simple solutions. In 1999, Mayor Oscar B. Goodman called for a coordinated regional approach to address homelessness. In response, elected officials from neighboring cities heeded his call. Since that time, the cities of Las Vegas, Boulder City, Henderson, North Las Vegas, and Clark County have been addressing homelessness from a regional perspective.

On September 25, 2003 the Southern Nevada Regional Planning Coalition (SNRPC) established the Committee on Homelessness (CoH), an inclusive, problem solving network of over a dozen public and private organizations who are all concerned with reducing homelessness in Las Vegas. The CoH consists of representatives from local government, Clark County School District, State of Nevada, Law Enforcement, and area service providers, working in tandem to ensure that there are adequate resources and supportive services available to assist those most in need in Southern Nevada.

On a national level, the United States Interagency Council on Homelessness (ICH) presented a challenge to states, counties, and cities across the country to do something different to address the problem of chronic homelessness. The city of Las Vegas responded to the challenge by introducing ICH's planning process to the Southern Nevada region. Subsequently, in 2005, the city of Las Vegas played a major role in assisting its regional partners in the development of the Southern Nevada Regional Homeless and Housing Plan, which serves as a road map for addressing the needs of the homeless citizens throughout Southern Nevada. While this was no small task, the region has to come together under one common goal – to reduce homelessness in the Southern Nevada region.

Moreover, the city of Las Vegas went beyond the national challenge by developing its own plan to not only address chronic homelessness but extended its efforts to serve persons experiencing temporary and episodic homelessness. The city of Las Vegas Homes for Homeless Nevadans plan was developed in collaboration with the Southern Nevada Regional Housing and Homeless Plan. This plan serves two purposes: to outline ideas that will guide the city of Las Vegas in reducing and ending homelessness, and to support the Southern Nevada Regional Homeless and Housing Plan. The success of the city's plan depends on the ability of local government along with regional participation and collaboration to mobilize, coordinate, re-examine, and provide the financial and human resources needed to reduce and end homelessness.

Homelessness is a profound social problem. Some of the challenges include the lack and availability of affordable housing, mental health services, and treatment for substance abusers. These factors coupled with high rates of individuals and families living in poverty and increased discharges from correctional facilities contribute to the number of individuals experiencing or facing homelessness.

Although there are programs available that provide emergency services, outreach, and housing opportunities, the number of persons experiencing homeless has been on the rise. In 2004, in Southern Nevada, which includes unincorporated Clark County and the cities of Las Vegas, Boulder City, Henderson and North Las Vegas, there were an estimated 7,877 persons experiencing homelessness but in 2005, a preliminary report revealed that the population had increased to more than 10,000 valley-wide.

For many of these individuals, housing is seen as luxury and in some cases unattainable. Most suffer from multiple problems that include severe mental illness, substance abuse, and domestic violence. Many lack the resources and necessary skills to attain self-sufficiency on their own. The city of Las Vegas' goal in collaboration with its regional partners is to provide comprehensive care and housing opportunities whenever possible.

A minute sector of the homeless population is the chronically homeless. Chronically homeless people are defined as unaccompanied individuals with a disabling condition who have either been continuously homeless for one year or more or have had at least four (4) episodes of homelessness in the past three (3) years. While the chronically homeless only represent 10% of the homeless population, they consume over 50% of the resources, ranging from emergency medical services, detoxification facilities, correctional institutions, and mental health services.

This is in stark contrast to those who are temporarily and episodically homeless. Individuals and/or families that experience temporary homelessness are person(s) who experience only one spell of homeless, which is usually short and who are not seen again by the homeless assistance system. Episodically homeless are individuals and/or families who use the social service system with intermittent frequency, but usually for short periods of time. Given the severity of the issues surrounding homelessness, it is imperative that the city of Las Vegas as well as its regional partners seek innovative ways of preventing and reducing episodic, temporary and chronic homelessness. One of the most effective solutions to reduce homelessness is to provide affordable housing with the support that makes self-sufficiency attainable and sustainable. To accomplish these efforts, the city of Las Vegas is committed to:

1. Preventing homelessness whenever possible.
2. Working in concert with regional partners to rapidly re-house people when homelessness can not be prevented.
3. Providing services that promote housing stability and self sufficiency.
4. Developing an interagency continuum of care to streamline and increase opportunities for housing and supportive services whenever possible.
5. Providing ongoing support of regional homeless efforts and initiatives.

## Ownership

Homelessness in Southern Nevada is a community wide problem. There is not one city, county or community that has not been affected by this issue. Under current law, the state and county are responsible for most of the homeless services in Southern Nevada. The city of Las Vegas has looked at its departments and programs to identify ways in which it can contribute towards regional goals to minimize homelessness and outline specific objectives and tasks that correlate with regional goals.

The city of Las Vegas is unable to pursue all of the regional objectives since some are outside the scope of the city's program and staffing. Specifically, the city of Las Vegas is not a stand alone service provider and can not provide mental health services, medical dental and vision care, or substance abuse services. Objectives identified with an asterisk are regional efforts supported by the city of Las Vegas but beyond the scope of the city's programs and staffing. However, the city of Las Vegas will support regional efforts of the Southern Nevada Regional Planning Coalition's Committee on Homelessness' commitment to address these issues while evaluating its internal policies to support, enhance and expand its internal continuum of care. Furthermore, the city of Las Vegas will continue to work with its regional partners to ensure that the regional plan is implemented.

## The Ten – Year Plan Overview

Mayor Oscar B. Goodman in conjunction with the Southern Nevada Regional Planning Coalition's Committee on Homelessness recognized the need to establish a plan to attend to the needs of the homeless population. At the regional level, local government, civic groups, and community leaders served together to develop the Southern Nevada Regional Homeless and Housing plan. In tandem, the city of Las Vegas worked side-by-side with regional partners to develop its Ten -Year Plan. The city of Las Vegas planning team was tasked to:

1. Gather input from stakeholders, homeless, formerly homeless, and community members.
2. Identify existing and current needs, strategies and practices to competently address homelessness in the city of Las Vegas.
3. Assist in the development of a regional plan to reduce homelessness in Southern Nevada.
4. Review "best practices" from other cities and determine what works best.
5. Develop a jurisdictional ten year plan to reduce chronic, temporary, and episodic homelessness.

The city of Las Vegas' Homes for Homeless Nevadans plan is a part of a national movement that is dedicated to reducing chronic homelessness. However, the city of Las Vegas' homeless plan addresses the needs of all segments of the homeless population, the chronic, temporary, and episodic. Focusing on all three populations while addressing the needs of individuals and families at-risk of becoming homeless provides a comprehensive and coordinated approach towards reducing incidences of individuals and families either entering the cycle of homelessness, living on the streets, in cars, emergency shelters, and other alternative forms of shelter.

Implementing the goals and actions of this plan will require a financial commitment but the short term cost will be far less than the cost of addressing homelessness through public emergency systems and correctional institutions. The overall objective of the plan is to reduce the incidences and length of homelessness among individuals, unaccompanied youth, and families living in the city of Las Vegas.

## Strategies

Reducing and ending homelessness requires participation from all stakeholders ranging from local government, service providers, community leaders and members, mental health and correctional facilities, and the individual or family experiencing homelessness. This plan will help facilitate participation while promoting higher levels of responsibility and accountability for those at risk or currently experiencing homelessness. The following are strategies that offer a comprehensive and different approach to addressing the homeless issue.

### 1. Promote Interagency Coordination of Human Service Delivery Programs

Currently, several city departments provide information and referral services for individuals seeking assistance rent, utility, supportive services or basic information. In an effort to reduce interagency fragmentation, an internal continuum will be developed to assist residents of the city of Las Vegas attain and/or maintain self sufficiency. The purpose of creating an internal continuum is to provide seamless service delivery to city residents who are at risk or currently experiencing homelessness. The desired outcome will be a reduction in the number of individuals or families entering the cycle of homelessness and the length of time spent homeless.

The city of Las Vegas allocates federal funds and offers programs to those at-risk of becoming homeless in addition to the chronic, episodic and temporarily homeless. The city of Las Vegas programs and services include: Municipal Court's Alternative Sentencing and Education Division, Chronic Inebriate Program, Emergency Housing Assistance Program (EHAP), Educational and Vocational Opportunities Leading to Valuable Experience (EVOLVE), Municipal Court's Homeless Assistance Program, HOPE Court, Senior Services, and Victims Advocate Program. Strategies for interagency coordination include:

1. Developing an internal continuum of care with all human service delivery programs.
2. Developing Communication Protocols for homeless crisis.
3. Re-evaluating the city's general and federal funded service provider contracts that can further leverage dollars and resources.

## **2. Increase the Availability of Stable and Sustainable Housing**

The most critical issue facing homeless people is the lack of stable and sustainable housing. It is vital that housing be among the first and foremost issues addressed. Adopting a housing first approach is essential in helping a homeless individual or family gain a sense of normalcy. If a household is able to obtain stable appropriate, permanent housing, then the issues of mental illness, chemical addictions, education, and employment become more manageable. The housing strategy includes the following steps:

1. Creating a regional strategy for developing low-income housing.
2. Placing 900 chronic, temporary and/or episodic individuals/families in housing over ten years.
3. Supporting and increasing housing options for homeless persons utilizing emergency shelter.
4. Promoting valley-wide acquisition, rehabilitation, or new construction of permanent affordable housing.
5. Promoting the sustainability of existing housing stock.
6. Supporting the access and creating stable housing options for clients participating in city of Las Vegas programs.
7. Promoting the use of a master leasing and utility program.

## **3. Enhance Coordination between Non-Profit Organizations and Government**

Homelessness is a complicated issue that cannot be solved by one municipality or agency. Although there are no easy solutions, the need for service providers and other community based organizations to coordinate and collaborate in seeking solutions is paramount. While improving, the existing homeless service delivery system has been criticized as duplicative, ineffective, slow to respond, and fragmented. The city planning team, regional partners, service providers, homeless and formerly homeless individuals held a series of focus groups to address this and other issues. This resulted in a consensus that service coordination at the local government and service provider level could be improved. Coordination strategies include the following steps:

1. Promoting diversification of funding sources.
2. Developing higher performance standards for funded entities.
3. Creating of intergovernmental partnerships.
4. Promoting of enhanced collaborations.
5. Ensuring vendor accountability for funded services.
6. Improving communication among governmental and non-profit entities.
7. Increasing education regarding homeless issues

## **4. Prevent Individuals and Families from Becoming Homeless**

Homeless prevention is any action that prevents an individual or family from losing their housing. Providing services and assistance that contributes to housing stability, such as assistance with rent, mortgage payments, or utility bills are effective preventive measures. Early intervention can prevent homelessness through education, guidance, and cooperation with landlords to avoid evictions. The city of Las Vegas administers homeless intervention and prevention programs to assist individuals and families attain and maintain self sufficiency. Current rent, mortgage, and utility assistance programs include the Emergency Housing Assistance Program (EHAP), Tenant Based Rental Assistance (TBRA), and Emergency Shelter Grants (ESG). Through the administration of these programs, the city of Las Vegas is "closing the front door" to homelessness. Prevention strategies include the following steps:

1. Providing flexible payment and funding standards to assist at-risk households.
2. Preventing 1,000 individuals or families from entering the cycle of homelessness over ten years.
3. Identifying households at risk for homelessness and link with responsible service provider.
4. Continuing programs and services that support housing stability, such as rent and utility assistance.
5. Raising education and awareness of early warning signs that lead to homelessness.
6. Breaking the cycle of recurrent homelessness through intensive case management and supportive housing.
7. Evaluating and measuring which programs and strategies are effective in preventing and reducing homelessness.

## **5. Provide Seamless Client Services through Effective Partnerships**

In 2004, Nevada Partnership for Homeless Youth was designated as the lead agency to develop and implement the Homeless Management Information System (HMIS). HMIS is a web based system that provides a database of homeless information. Housing, shelter, service providers, local government, and other agencies working with the homeless can share client data and develop joint case plans in confidential and private settings. HMIS is designed to improve seamless service delivery and coordination. HMIS also provides a medium to assess client needs, service efficacy and accountability. Seamless client service strategies include the following steps:

1. Using HMIS to improve client service delivery between homeless service providers.
2. Using HMIS to link housing resources and availability.
3. Continuing support and use of seamless service delivery programs and services.
4. Supporting implementation of shared technology.

## **6. Foster Self-Sufficiency through access to Education, Training, and Employment Opportunities**

Lack of employment, income and economic stability are often reported as major causes of homelessness. Although many homeless people report income from sources such as social security, veterans pensions or day labor work, countless employment opportunities are short lived and are inadequate for individuals wishing to transition to self-sufficiency. Assisting homelessness persons attain self sufficiency through education, training, and employment opportunities will, over time, offset expenditures related to providing supportive housing and other homeless services. Through the EVOLVE Center, homeless individuals, chronic inebriates, and ex-offenders are provided employment readiness courses, job search assistance, and job retention services. Education, training and employment strategies include the following steps:

1. Expanding existing employment and education programs to serve the episodic and temporarily homeless.
2. Enhancing pre-employment and basic skills services.
3. Supporting adult and alternative education and employment services.
4. Establishing income management and financial guardianship programs and services.
5. Revising intake and discharge services to assess employability, education, and training.

## **7. Facilitate the Transition from Homelessness through Intensive Case Management**

A vital component for reducing and ending homelessness is a system that provides coordinated and ongoing case management. From a regional perspective, case management services, while improved, remain fragmented and at times overburdened. A homeless person encounters numerous case managers from different agencies while attempting to become self-sufficient. At times this brings about fragmented services as well as frustration for the individual or family. The ten year plan will enhance case management opportunities for individuals and families that are served through the city of Las Vegas' human services delivery programs. Currently, through the EVOLVE Center, homeless, chronic inebriates, ex-offenders and their families eligible for program services are afforded both moderate and intensive case management services for a minimum of 18-months. Transition strategies include the following steps:

1. Utilizing the Homeless Management Information System (HMIS).
2. Improving coordination of case management services.
3. Improving the quality and accuracy of information and referral services.
4. Developing partnerships with agencies providing credit repair, debt management, and budget programs.
5. Developing alternative service delivery schedules.
6. Promoting case management outside of traditional setting and service hours.



## **8. Increase Access to Medical, Dental and Vision Care Services \***

Homeless people frequently experience loss of teeth and poor vision due to lack of access to dental and vision services. Both of these conditions can result in reduced employability and the lack of proper dental care can bring about other health problems. While these services fall under the auspices of state and county care, the city of Las Vegas will support regional efforts to ensure medical, dental, and vision care services are available and accessible to homeless individuals and families. Strategies to accomplish this goal include:

1. Providing support services sensitive to the needs of medically frail homeless individuals.
2. Pursuing partnerships and funding for dental and vision services.
3. Supporting coordination of discharge planning and follow-up care between hospitals and homeless services.
4. Leveraging funding opportunities to provide services for HIV/AIDS homeless individuals.

## **9. Ensure the Availability of Basic Needs Services\***

Homeless people generally have difficulty meeting their basic needs. Basic needs include access to showers, restroom facilities, laundry facilities, and general medical care. This has a detrimental effect on their physical and mental health which reduces their ability to secure employment and transition from homelessness to self-sufficiency. Several programs have been implemented at both the city and regional level to assist in meeting those needs.

Through regional health and safety interventions, chronically homeless individuals and/or families are provided an opportunity to transition to affordable housing with wraparound services. In addition, the city of Las Vegas along with its regional partners provides inclement weather shelter services to homeless individuals and/or families desiring to escape the elements during extreme summer and winter months. Homeless, chronic inebriate, and ex-offenders who participate in city programs are benefiting from services developed and provided through the EVOLVE Center's resource network. Basic needs strategies include the following steps:

1. Supporting access to transitional supportive housing opportunities for clients in city programs.
2. Supporting housing and services with preference to homeless special needs populations.
3. Identifying additional transitional supportive housing units.
4. Supporting programs that enable basic hygiene, adequate diet, and activities of daily living.

## **10. Improve Availability of Mental Health Services\***

Southern Nevada Adult Mental Health (SNAMHS) is responsible for mental health care for the indigent and provides a 24-hour crisis center, inpatient, and outpatient services. Although the state of Nevada is responsible for providing mental health services, the city's primary role has been to financially support mental health services. Mental Health strategies include the following steps:

1. Ensuring financial support is available for the mental health triage center.
2. Identifying additional funding for individuals served by the mental health system.
3. Identifying funding for housing individuals served by the mental health system.

## **11. Improve Availability of Substance Abuse Treatment Programs\***

In Southern Nevada, there are currently 330 in-patient beds dedicated for substance abuse treatment. While services may benefit housed individuals, it is problematic for the homeless. Once discharged from a treatment facility, most return back to the streets or shelters and experience high rates of recidivism. The city of Las Vegas is working with its regional partners to develop a comprehensive regional discharge plan. While homeless individuals, chronic inebriates, and ex-offenders participating in city programs provided at the EVOLVE Center receive substance abuse treatment coupled with intensive case management, there is a need to increase the level of services to ensure that these individuals remain on a path towards self sufficiency. These services afford the individual an opportunity to regain a sense of normalcy. Substance abuse strategies include the following steps:

1. Increasing access and availability to substance abuse programs for individuals participating in city programs.
2. Supporting seamless services between treatment programs and housing providers.

## Conclusion

Homelessness is a significant problem in the city of Las Vegas and throughout the region. While there are no simple solutions to the complexity of homelessness, one agency or jurisdiction cannot solve it alone. Civic leader, faith based organizations, service providers, businesses and consumers, and neighborhoods must work together to assist those who want to help themselves. Although the national movement focuses on ending chronic homelessness, the city of Las Vegas has gone beyond the national call to focus on individuals and families that are chronically, episodically or temporarily homeless.

The Homes for Homeless Nevadans Plan is a significant step forward in enhancing existing homeless services and finding new innovative ways to reduce homelessness. This plan provides the framework for reducing and ending homelessness. More importantly, it will reduce incidences of homelessness. Increasing opportunities for permanent housing combined with case management and supportive services, homeless individuals and families can regain a sense of normalcy and permanent self sufficiency.

The city of Las Vegas recognizes the need for a comprehensive, coordinated, and continuous effort to reduce homelessness. Developing an interagency continuum is just one small step that will reap momentous benefits not only for homeless individuals and families but to the city as well. As with the Southern Nevada Regional Homeless and Housing Plan, Homes for Homeless Nevadans will be a living document that will change as policies, directions, and administrations change. Modifications to the plan will also be made in response to the success or failure of individual or collective strategies, local and/or regional priorities, or other dynamics that change implementation of homeless services.

Through this process, the planning committee witnessed the spirit of Las Vegas at its best. Hundreds of dedicated individuals took part in hearty solution focused discussions to reduce and end homelessness in the city of Las Vegas. Community leaders, homeless and formerly homeless, service providers, business leaders, and community members all worked together to develop these strategies. Thanks to their input and recommendations, especially from the homeless in this community, the road map is off to a good start and will only improve as the city moves forward to strategically address this issue. By continuing to work together, the city and this community will significantly reduce homelessness in ten years.

## Background and Planning Process

### Federal Priority

Congress established the Interagency Council on Homelessness (ICH) in 1987 with the passage of the Stewart B. McKinney Homeless Assistance Act. ICH is responsible for providing Federal leadership for activities to assist homeless families and individuals. With direction from President George W. Bush, ICH supports and encourages the development of local ten-year plans to end chronic homelessness. By mid-2005 more than 120 cities had committed to developing ten-year plans. With an adopted 10-year plan, cities can compete more effectively for federal grants to address local homeless issues.

The Council's Executive Director Phillip Mangano visited the city of Las Vegas in June and August of 2004 to encourage the city and county to develop plans to reduce homelessness. Mr. Mangano explained the Federal government's focus on ending chronic homelessness. Chronic homeless are individuals with a disabling condition who have been homeless for at least one year or who have had four or more episodes of homelessness within three years. The chronic homeless consist of 10% of the population, but they consume over 50% of the homeless resources based on Federal documentation.

### Regional Planning Process

The Southern Nevada Regional Planning Coalition's Committee on Homelessness (SNRPC CoH) agreed to develop a multi-jurisdictional plan for reducing homelessness. The city of Las Vegas participated with Clark County, the city of Henderson, the city of North Las Vegas along with representatives from various service agencies and community members to form valley-wide goals and objectives. Subsequently, this information was used to develop the Southern Nevada Regional Homeless and Housing plan which was adopted in July 2005 by the SNRPC CoH. This plan serves as a regional roadmap for developing homeless initiatives throughout Southern Nevada.

### City Planning Process

At the City Council meeting on August 4, 2004, the Neighborhood Services Department proposed developing the Homes for Homeless Nevadans Plan that would guide the city's efforts to prevent and minimize homelessness. The city's plan expands upon Federal guidelines by incorporating strategies for the temporary and episodic homeless in addition to tackling the impediments to housing the chronic homeless. The episodic homeless are those who use the social service system with intermittent frequency, usually for short periods. The temporary homeless have only one experience of homelessness.

### Potential Challenges and Obstacles to Implementation

A number of challenges or obstacles may impede the city's ability to fulfill all of the goals of this plan. Several of those challenges are listed below:

- Construction costs rise between the time funds are applied for and allocated.
- Clark County housing vouchers are substantially less than market rates for rental units.
- The conversion of apartments to condominiums throughout the valley is reducing the supply of rental housing stock and forcing rental rates to rise.
- Chronically homeless individuals who have problems with addiction or mental illness sometimes opt to live in unstructured environments and refuse assistance.

### Desired Outcomes

Over the next 10 years, the city will work towards the following outcomes:

- Reduced number of households entering the cycle of homelessness.
- Higher levels of service and customer satisfaction for clients participating in city programs.
- Reduced recidivism rates for ex-felons and chronic inebriates participating in the EVOLVE program and homeless individuals in the municipal court system.
- Increased rates of placement into permanent housing for homeless clients participating in city programs.
- Reduced duplication of services among government entities and non-profit organizations.
- Greater capacity building with partner organizations
- Lower cost and enhanced service delivery for government and service providers.
- Increased perception among the homeless that services are available to assist them.
- Increased employability, job readiness, job placement and retention for at-risk individuals.
- Increased inventory of affordable housing in the Las Vegas valley.
- Perceived improvement in their living situation among formerly homeless individuals.
- Reduced number of homeless crisis situations and homeless interventions.

## Who Experiences Homelessness

Homelessness does not discriminate. Millions of people experience homelessness each year. Families with children, elderly, youth, and single adults of all races, creeds, and socioeconomic backgrounds have suffered from the devastating effects of homelessness. While the background of people experiencing homelessness varies, there are three general characterizations of homelessness – chronic homelessness, episodic homelessness, and temporary homelessness.

### Chronic Homelessness

Chronic homelessness refers to an extended episode of homelessness. People who experience chronic homelessness are more likely to have a disabling condition, mental illness and sometimes co-occurring with substance abuse, unstable employment, and histories of incarceration or hospitalization.

### Episodic Homelessness

Episodic homelessness refers to recurrent periods of homelessness. People who experience episodic homelessness are typically younger and use the homeless services delivery system more sporadically. They often have chemical addictions and cycle in and out of homeless shelters.

### Temporary Homelessness

Temporary homelessness refers to a single episode of homelessness that is typically in short duration. Persons who experience temporary homelessness use homeless resources for brief periods, in times of economic hardship and temporary housing loss.

## The Plan and the Population

Although the federal directive is geared toward developing plans to end chronic homelessness, the city of Las Vegas has expanded the federal priority to include the chronic, episodic, and temporary homeless populations. Widespread homelessness throughout Southern Nevada has been caused by a number of factors: lack of mental health services, increased use of illegal substances, affordable housing has become scarcer for those with fixed incomes; wages have not kept pace with the cost of housing, especially for those living at or below the poverty level. In addition, services including health care and quality affordable daycare are increasingly difficult to find. These factors alone point to the need of serving chronic, episodic, and temporary homeless on an equal footing. Focusing the majority of resources on one population could result in unintentionally shifting the episodic or temporary into chronic homelessness. To address these and other issues, the city of Las Vegas and regional partners have identified housing and supportive services opportunities in an effort to remove barriers to stability and self sufficiency.

## Focus Groups and Gaps Analysis

Representatives from the cities of Las Vegas, North Las Vegas, Boulder City, Henderson, and Clark County conducted focus groups with various stakeholders to identify shortfalls in existing services, community needs, and strategies. Over 200 people participated in the focus groups. In addition, survey information was collected at the 2004 Annual Stand Down for the Homeless. Focus group participants identified unmet needs, duplication of services, and processes that needed re-tooling to better assist individuals and families at risk or currently experiencing homeless obtain stable affordable housing.

Stakeholders included members from the general public, social service providers, business leaders and financial institutions, federal, state, and local government agencies, public safety representatives, faith-based organizations, educational institutions, and health officials. Feedback from homeless subpopulations included the chronic homeless, domestic violence victims, homeless youth, homeless veterans, ex-offenders, homeless with mental health and substance abuse problems, homeless participating in self-sufficiency programs, and homeless in living unstructured environments. The result of these dialogues manifested into the creation of the Gaps Analysis (see Appendix D). The Gaps Analysis will serve as a regional guide to revamp and create housing and supportive services programs.

## Housing and Supportive Services Opportunities

In Southern Nevada, there are numerous programs and services designed to serve individuals and families at-risk of becoming homeless or currently experiencing homeless. Homeless programs and services range from emergency, temporary and permanent shelter and housing opportunities to prevention, outreach and supportive services. These homeless prevention and intervention programs and services are designed to assist individuals and families attain and maintain self-sufficiency.

### Emergency Shelter

Emergency shelter has been defined by Southern Nevada as those units which provide basic life-sustaining services. Emergency shelter beds have time limits and are usually offered in a congregant manner. There are more than a dozen emergency shelters providing temporary shelter and care for individuals and families experiencing homelessness. The Southern Nevada Regional Planning Coalition's Committee on Homelessness, as part of its Inclement Weather Shelter Program, provides financial assistance to emergency shelters in order to make seasonal and overflow beds available when extreme weather conditions occur during summer and winter months. This emergency shelter chart reflects temporary emergency shelter bed spaces accessible for overnight sheltering.

| Provider                             | Usage Type     | Target Population | 2005 Year-Round Units/Beds |             |                 |                  | 2005 Other Beds |           |
|--------------------------------------|----------------|-------------------|----------------------------|-------------|-----------------|------------------|-----------------|-----------|
|                                      |                |                   | Family Units               | Family Beds | Individual Beds | Year-Round Total | Seasonal        | Overflow  |
| Girls & Boys Town                    | Free beds      | YFM               | 0                          | 0           | 16              | 16               | 0               | 6         |
| Catholic Charities                   | Free beds      | SM                | 0                          | 0           | 0               | 0                | 200             | 30        |
| Catholic Charities                   | Pay beds       | SM                | 0                          | 0           | 200             | 200              | 0               | 0         |
| Catholic Charities                   | RWP            | SM                | 0                          | 0           | 414             | 414              | 0               | 0         |
| Center for Independent Living        | Free beds      | YFM               | 0                          | 0           | 36              | 36               | 6               | 0         |
| Interfaith Hospitality Network       | Program beds   | FC                | 0                          | 14          | 0               | 14               | 0               | 0         |
| Interfaith Hospitality Network       | Ashleigh House | FC                | 0                          | 5           | 0               | 5                | 0               | 0         |
| Henderson Allied Community Advocates | Motel Voucher  | M                 | 0                          | 0           | 0               | 0                | 0               | 7         |
| LV Rescue Mission                    | Free beds      | M                 | 0                          | 26          | 58              | 84               | 0               | 0         |
| LV Rescue Mission                    | Program beds   | SM/SF             | 0                          | 0           | 118             | 118              | 0               | 0         |
| Safe Nest/TADC                       | Free beds      | DV                | 0                          | 103         | 0               | 103              | 0               | 0         |
| Safe House                           | Free beds      | DV                | 0                          | 52          | 0               | 52               | 0               | 0         |
| Salvation Army                       | Free beds      | SM                | 0                          | 0           | 130             | 130              | 40              | 0         |
| Salvation Army                       | Pay beds       | SM                | 0                          | 0           | 62              | 62               | 0               | 0         |
| The Shade Tree                       | Free beds      | SF/FC             | 0                          | 124         | 116             | 240              | 50              | 40        |
| WestCare Nevada                      | CTC-Detox      | SMF               | 0                          | 0           | 50              | 50               | 0               | 0         |
| WestCare Nevada                      | Stepping St    | YFM               | 0                          | 20          | 0               | 20               | 0               | 8         |
| <b>TOTAL</b>                         |                |                   | <b>0</b>                   | <b>344</b>  | <b>1200</b>     | <b>1544</b>      | <b>296</b>      | <b>91</b> |

Key: SM= Only Single Males (18 yrs or older); SMI=Severely Mentally Ill; SF= Only Single Females (18 yrs or older); FC= Only Families with Children; YM= Only Unaccompanied Young Males (18 yrs or older); YF= Only Unaccompanied Young Females (18 yrs or older); YFM=Only Unaccompanied Youth; M=Mixed Population; SMF=Only Single Male and Female VETS-Veterans

### Transitional Shelter

Homeless transitional shelter programs generally differ from emergency shelter programs. Emergency shelter is temporary and more congregant in design, while transitional shelter serves targeted subpopulations, tailoring services to meet that population's need. The subpopulation served is provided appropriate housing for its individual or family's need. Case management services are provided, as are other direct services to remove obstacles individuals or families experience when attempting to return to self-sufficiency. There are currently thirteen agencies providing homeless specific transitional shelter throughout Southern Nevada as outlined in the chart noted below.

| Provider                             | Facility                            | Target Population | 2005 Year-Round Units/Beds |             |                 |                  |
|--------------------------------------|-------------------------------------|-------------------|----------------------------|-------------|-----------------|------------------|
|                                      |                                     |                   | Family Units               | Family Beds | Individual Beds | Year-Round Total |
| Catholic Charities                   | Crossroad and Marion                | SM                |                            |             | 24              | 24               |
| Catholic Charities                   | St. Vincent HELP                    | SMF               |                            |             | 120             | 120              |
| Catholic Charities                   | HOME TBRA                           | M                 |                            | 58          |                 | 58               |
| Economic Opportunity Board           | Project HOME                        | FC                | 9                          | 21          |                 | 21               |
| Economic Opportunity Board           | Treatment Center                    | M                 |                            |             | 10              | 10               |
| Golden Rule                          | Parson's Place                      | SMF               |                            |             | 57              | 57               |
| Henderson Allied Community Advocates | HOME TBRA                           | M                 | 4                          | 3           | 4               | 7                |
| HELP of So. Nevada                   | HOME TBRA                           | FC                |                            | 81          | 20              | 101              |
| HELP Las Vegas                       | Bonanza View                        | SFM               |                            |             | 75              | 75               |
| The Key Foundation                   | Housing for Veterans                | SM/VETS           |                            |             | 23              | 23               |
| Salvation Army                       | Safe Haven                          | SMF/SMI           |                            |             | 25              | 25               |
| Salvation Army                       | Path and Pathways                   | SMF/SMI           |                            |             | 77              | 77               |
| Salvation Army                       | Vocational Training/Dorm            | SFM               |                            |             | 45              | 45               |
| The Shade Tree                       | 3 <sup>rd</sup> Floor -Transitional | SF/FC             |                            | 84          | 40              | 124              |
| SAFE House                           | House 1 and 2                       | FC/DV             | 6                          | 12          |                 | 12               |
| US Veterans                          | Meadows Inn                         | SM/VETS           |                            |             | 208             | 208              |
| US Veterans                          | Alcohol and Drug Treatment          | SM/VETS           |                            |             | 30              | 30               |
| WestCare                             | Healthy Families                    | FC                |                            | 25          | 35              | 60               |
| WestCare                             | Young Faces                         | YFM               |                            |             | 20              | 20               |
| WestCare                             | HSR Transitional                    | YFM               |                            |             | 46              | 46               |
| WestCare                             | CTC-Detox                           | M                 |                            |             | 50              | 50               |
| Women's Development Center           | Middlesex                           | FC                | 23                         | 88          |                 | 88               |
| Women's Development Center           | Elderly Women                       | FC                |                            |             | 4               | 4                |
| Women's' Development Center          | HOME TBRA                           | FC                | 10                         | 60          |                 | 60               |
| <b>TOTAL</b>                         |                                     |                   | <b>52</b>                  | <b>432</b>  | <b>913</b>      | <b>1,345</b>     |

Key: SM= Only Single Males (18 yrs or older); SMI=Severely Mentally Ill; SF= Only Single Females (18 yrs or older); FC= Only Families with Children; YM= Only Unaccompanied Young Males (18 yrs or older); YF= Only unaccompanied; Young Females (18 yrs or older); YFM=Only Unaccompanied Youth; M=Mixed Population; SMF=Only Single Male and Female; VETS-Veterans

### Permanent Supportive Housing

Permanent Supportive Housing services reflected in this housing activity chart reflect units specifically targeting formerly homeless or those units supported with McKinney-Vento Act funds. Individuals and/or families are provided affordable rent as well as onsite supportive services in the form of case management, group therapy, and/or assistance with daily activities of living. There are nearly 1,000 permanent supportive housing units that specifically target the homeless population.

| Provider                     | Facility               | Target Population | 2005 Year Round Unit/ Beds |             |                   |              | Total Year Round |
|------------------------------|------------------------|-------------------|----------------------------|-------------|-------------------|--------------|------------------|
|                              |                        |                   | Family Units               | Family Beds | Individuals Units | Chronic Only |                  |
| Clark County Social Services | CHAD/Shelter Plus Care | M/HIV             | 8                          | 18          | 13                |              | 31               |
| So. Nv. Adult Mental Health  | Shelter Plus Care      | M/SMI             | 34                         | 78          | 160               |              | 238              |
| So. Nv. Adult Mental Health  | SLA                    | SMF/SMI           | 12                         | 28          | 133               |              | 161              |
| So. Nv. Adult Mental Health  | Group Homes            | SMF/SMI           |                            |             | 434               |              | 434              |
| So. Nv. Adult Mental Health  | HOME/TBRA              | SMF/SMI           |                            |             | 75                | 75           | 75               |
| US Veterans                  | PH                     | SM/Vets           |                            |             | 5                 |              | 5                |
| <b>Total</b>                 |                        |                   | <b>54</b>                  | <b>124</b>  | <b>820</b>        | <b>75</b>    | <b>944</b>       |

Key: SM= Only Single Males (18 yrs or older); SMI=Severely Mentally Ill; SMF=Only Single Male and Female; VETS-Veterans; M=Mixed Population

### Supportive Services

Supportive Services is a fundamental component of homeless prevention and intervention. Supportive services throughout Southern Nevada are provided at the street outreach and service agency level. Services such as case management, life skills training, substance abuse treatment, mental health services, employment and financial services, education, childcare, and transportation are provided in order to assist individual/and or families transition from the streets, shelters or other alternative forms of housing into safe, affordable permanent housing.

### Homeless Prevention Services

Individuals and/ or families living at or below the poverty level live on the brink of homelessness every day where a crisis or circumstance can eventually lead to homelessness. Homelessness can be prevented with a combination of an adequate supply of affordable permanent housing, case management, and funding sources to meet service and housing needs. In Southern Nevada, nearly two dozen social service agencies offer homeless prevention services to Individuals and/or families at risk of becoming homeless. Prevention services include rent, mortgage, and utility assistance. Other services include short-term multi-month rental assistance, housing services for domestic violence victims, long term rental assistance in addition to housing opportunities for persons discharged from correctional and mental health institutions. Additionally, many local churches and synagogues assist their congregants with rental assistance to prevent homelessness. Some faith based organizations have created social service agencies to respond more effectively to the needs of its members and community-at-large.

## Outreach Services

Providing an effective and coordinated approach to outreach is a crucial component of this plan. Chronic and episodic homeless individuals and families are recurrent consumers of homeless services. Through effective street level engagement, combined with appropriate services, the length of time an individual and/or family remains in the cycle of homelessness can be significantly reduced. Outreach service provider teams are often the first and only point of contact for many these individuals and/or families. In Southern Nevada, outreach services are conducted at a street and serviced based level. These teams provide support services such as housing assistance, crisis intervention, intensive case management, medical care, mental health, and substance services to those experiencing homelessness.

Street-based out reach teams actively seek out service-resistant persons staying in wash areas, vacant lots, abandoned buildings, and other unsuitable places to provide crisis intervention, case management, assessment, and monitoring of service plans. Street based outreach teams consist of non-profit service providers, law enforcement, mental health and substance abuse personnel.

Service-based outreach teams respond to hospitals, jails, local businesses or emergency shelters to assist with crisis intervention, assessment and placement of individuals and/or families in appropriate housing or services. Others have designated particular staff to assist homeless individuals apply and receive services or benefits. Service based teams consist of representatives from mental health, public and private youth agencies, social services and social security administration.

Successfully utilizing and referring individuals and families to these types housing programs and supportive services opportunities will reduce the number of individuals entering the cycle of homelessness and shorten the length of time spent homeless. Given the severity of the issues surrounding homelessness, it is imperative that the city of Las Vegas as well as its regional partners seek innovative ways of preventing and reducing episodic, temporary and chronic homelessness. One of the most effective solutions to reduce homelessness is to provide affordable housing with the support that makes self-sufficiency attainable and sustainable. To accomplish these efforts, the city of Las Vegas is committed to:

1. Preventing homelessness whenever possible.
2. Working in concert with regional partners to rapidly re-house people when homelessness can not be prevented.
3. Providing services that promote housing stability and self sufficiency.
4. Developing an interagency continuum of care to streamline and increase opportunities for housing and supportive services whenever possible.
5. Providing ongoing support of regional homeless efforts and initiatives.

## Programs and Services

The city of Las Vegas has played a major role in providing programs and services for individuals and/or families at-risk of homelessness or currently experiencing homelessness. City program and services include emergency rent and utility assistance, affordable housing opportunities, employment services for ex-offenders, homeless intervention, senior services, housing rehabilitation, specialized court services, community outreach, engagement, and capacity building. The city of Las Vegas' human services delivery system's primary goal is to assist its residents in attaining and maintaining self sufficiency, in order to create safe, healthy, livable, and sustainable neighborhoods and communities.

In addition, the city of Las Vegas is a principal partner in finding innovate ways to reduce homelessness throughout Southern Nevada. As a member of the Southern Nevada Regional Planning Coalition's Committee on Homelessness, the city supports homeless intervention and prevention efforts through policy development and financial support. Efforts at both the city and regional level have resulted in reduced incidences of homelessness, length of time individuals and families stay homeless and increased numbers of city residents attaining and maintaining self sufficiency. Highlights of city of Las Vegas programs, services, and accomplishments at both the city and regional level are as follows.



## City of Las Vegas Programs and Services

### Affordable Housing Opportunities

From 2002 to present, more than 200,000 homeless and non-homeless persons with special needs were assisted through the following programs funded by the city of Las Vegas. In addition, 1,569 units of new construction and 705 existing homes/units receiving benefits from the grant funds/private activity bonds allocations.

1. Housing Opportunities for Persons with Aids (HOPWA) – Housing rehabilitation, new construction, rental assistance, and supportive services.
2. Home Investment Partnership (HOME) – Housing rehabilitation, acquisition, tenant based rental assistance, homebuyer assistance.
3. 18 % Redevelopment Set Aside for Affordable Housing- to increase, improve and preserve the number of dwelling units throughout the community for low-income households.
4. Private Activity Bond Volume Cap – multi-family and single family housing development.
5. Low Income Housing Trust Fund – Down payment assistance, homeowner rehabilitation, and emergency assistance for households at risk of being homeless.

### Educational and Vocational Opportunities Leading to Valuable Experience (EVOLVE)

The Educational and Vocational Opportunities Leading to Valuable Experience (EVOLVE) program offers pre and post release employment services that includes mentoring, job readiness courses, resume writing, job search assistance, job placement and retention services. The program also provides intensive case management, housing opportunities, life skills, and supportive services for ex-offenders.

### Emergency Housing Assistance Program (EHAP)

The Emergency Housing Assistance Program (EHAP) is a homeless prevention and intervention program that provides a one time only rent and utility assistance payment for individuals and families currently experiencing homelessness or those at risk of becoming homeless. Households are also provided, supportive services, information and referral services, financial and case management assistance.

### Chronic Inebriate Program (CIP)

The Chronic Inebriate Program is an interagency problem-solving program designed to reduce the “revolving door” chronic, homeless and public inebriates revolve in and out of by way of detoxification centers, county jails, local emergency rooms and the streets. Clients served through CIP come from three points of entry: Municipal Court, EVOLVE and homeless intervention services. Services include intensive inpatient and outpatient case, management, substance abuse treatment, employment and job readiness/retention services.

### West Care Community Triage Center

Partially funded by the city of Las Vegas, West Care Community Triage Center provides a safe therapeutic environment for those in need of mental health and substance abuse services. Services include, homeless outreach, case management, crisis stabilization, intake, assessments, in addition to drug and alcohol detoxification.

### City of Las Vegas Municipal Court Homeless Assistance Program (HAP)

The City of Las Vegas Municipal Court Homeless Assistance Program (HAP) is a collaborative effort involving local agencies that provide services to the homeless. The intent of the program is to identify individuals who are successfully participating in special rehabilitation programs, and to assist them with any pending court matters without having to go to court. HAP is a case management program and is only available for clients who are currently enrolled in a social service program for the homeless.

### City of Las Vegas Municipal Court Alternative Sentencing and Education Division (ASED)

The Municipal Court's Alternative Sentencing and Education Division (ASED) offers a variety of services ranging from domestic violence classes to work programs for individuals that come in contact with the city of Las Vegas judicial system. ASED's provision of court-mandated programs and classes are as follows: community service, domestic violence, driving under the influence (DUI) Educational Classes, the evaluation center, first offender prostitution, impulse control, extended impulse control program, petit larceny, pre-sentencing investigation, substance abuse and traffic school.

### Victims Advocate Program

The Victims Advocate Program is offered through the City Attorney's office, provides services for persons affected by domestic violence. Victims Advocates provide referrals, answer questions, communicate with the prosecutor and accompany the victim or witness to court.

## **City of Las Vegas Programs and Services (Continued)**

### **Senior Services**

The Departments of Neighborhood and Leisure Services offer a wide variety of human service delivery programs for senior citizens residing within the city of Las Vegas. Programs and services include the Senior Citizens Law Project, Jude 22 Food Party, utility tax rebates, educational and information seminars, social and recreational opportunities along with financial assistance services.

### **Habitual Offender Program (HOPE)**

The HOPE program is a specialized court program designed to focus on habitual offenders. The court works hand-in-hand with the Las Vegas Metropolitan Police Department, the City Attorney and Transitional Living Center (TLC) in efforts to reform chronic offenders to enable them to become productive members of society.

### **Fertitta Community Assistance Center**

Partially funded by the city of Las Vegas, the Fertitta Community Assistance Center is a 7,000-square-foot one-stop comprehensive service delivery center designed to serve the homeless and those at risk of homelessness. The center provides multiple services and programs under one roof for women and children, veterans, seniors, individuals and families.

## **Regional Programs and Services**

### **Inclement Weather Shelter Program**

The Inclement Weather Shelter Program is a regional program supported and funded by the cities of Las Vegas, North Las Vegas, Boulder City, Henderson and Clark County. The purpose of the Inclement Weather Shelter Program is to provide additional emergency shelter beds and off site lodging during extreme summer and winter months

### **Health and Safety Interventions**

Health and Safety Interventions is a collaborative effort created by the Southern Nevada Regional Planning Coalition's Committee on Homelessness and members consist of local government representative, service provider and law enforcement officials. The purpose of Health and Safety Interventions is to provide intensive street level intervention and services to chronic homeless individuals residing in encampments.

### **Southern Nevada Regional Homeless and Housing Plan**

The Southern Nevada Regional Homeless and Housing Plan, adopted in July 2005, is a collaborate plan developed by cities of Las Vegas, North Las Vegas, Boulder City, Henderson and Clark County to address the needs of individuals and families at-risk of becoming homeless or currently experiencing homelessness.

### **Southern Nevada Regional Homeless Trust Fund**

The Southern Nevada Regional Homeless Trust fund was established in 2005 for the purposes of the funding homeless initiatives and actives including transitional and permanent supportive housing. The strategy is includes garnering corporate and other private support to fund these efforts.

### **Homeless Management Information System (HMIS)**

The Homeless Management Information System (HMIS) is a regional program supported and funded by the cities of Las Vegas, North Las Vegas, Boulder City, Henderson, and Clark County. HMIS is used to collect data on homeless persons who use service program. Utilization of HMIS provides the region with a consist means to identify service needs, barriers to accessing service. HMIS provides a tool to tracks service demands and trends. In addition, HMIS improves case management services and provides seamless service delivery for individuals and/or families at-risk or currently experiencing homelessness.

### **Chronic Homeless Intervention - AB580**

In 2005, Southern Nevada received \$4 million in state funding designated for crisis intervention and intensive case management for the chronically homeless. Several local service providers in Southern Nevada established a consortium to provide services that include street assessments, immediate access to housing, mental health services, intensive case management, substance abuse treatment, coordinated outreach and education, and supportive services.

### **Office of Southern Nevada Regional Homeless Coordinator**

The Office of the Southern Nevada Regional homeless coordinator was established by the Southern Nevada Regional Planning Coalition's Committee on Homelessness. This office is fully funded by the cities of Las Vegas, North Las Vegas, Boulder City, Henderson, and Clark County for the purposes hiring a regional coordinator to streamline homeless services and to be a centralized point of contact for regional homeless issues.

## **Regional Programs and Services (continued)**

### **Southern Nevada Continuum of Care**

The Southern Nevada Continuum of Care is a regional collaboration designed to assist service providers in securing federal dollars for homeless intervention, prevention and supportive service delivery. Southern Nevada was fully funded in 2004 for \$5.9 M and 2005 for \$5.4M respectively.

These programs and services are just a few examples of the commitment to helping individuals and families most in need. While the city of Las Vegas and its regional partners are committed to reducing homeless in Southern Nevada, more work needs to be done. The city of Las Vegas and its regional partners have recognized the need for more coordinated service delivery and improve daily on providing coordinated service and care.

## **Ownership**

Homelessness in Southern Nevada is a community wide problem. There is not one city, county or community that has not been affected by this issue. Under current law, the state and county are responsible for most of the homeless services in Southern Nevada. The city of Las Vegas has looked at its departments and programs to identify ways in which it can contribute towards regional goals to minimize homelessness and outline specific objectives and tasks that correlate with regional goals.

The city of Las Vegas is unable to pursue all of the regional objectives since some are outside the scope of the city's program and staffing. Specifically, the city of Las Vegas is not a stand alone service provider and can not provide mental health services, medical dental and vision care, or substance abuse services. Objectives identified with an \*asterisk are regional efforts supported by the city of Las Vegas but beyond the scope of the city's programs and staffing. However, the city of Las Vegas will support regional efforts of the Southern Nevada Regional Planning Coalition's Committee on Homelessness' commitment to address these issues while evaluating its internal policies to support, enhance and expand its internal continuum of care. Furthermore, the city of Las Vegas will continue to work with its regional partners to ensure that the regional plan is implemented.

# Ten – Year Plan

## Introduction

**H**omelessness affects all facets of the community; it cuts across race, ethnicity, age, culture, and education lines. Nevertheless, homelessness is most likely to affect low income, vulnerable populations who, more often times than not, lack safe, affordable housing, earn low or extremely low wages, and have limited access to health care. Other factors affecting those living in poverty include domestic violence, mental illness, addictions, and release from correctional and medical institutions without adequate services and support. All of these factors could result in a loss or inability to attain housing.

Homelessness is a complex social problem for which there are no simple solutions. In 1999, Mayor Oscar B. Goodman called for a coordinated regional approach to address homelessness. In response, elected officials from neighboring cities and agencies throughout the valley heeded his call and formed the Southern Nevada Homeless Task Force. Since that time, the city of Las Vegas along with its regional partners: Clark County, cities of Boulder, Henderson, and North Las Vegas, as well as representatives from the Clark County School District, State of Nevada, Law Enforcement, and area Service Providers have been making strides to ensure that there are resources and supportive services available to assist those most in need.

On any given night, in the city of Las Vegas, hundreds of people sleep in emergency shelters, on the streets, in drainage ditches, in cars, or doubled up with friends and relatives. In 2004, the city of Las Vegas, in cooperation with its regional partners conducted focus groups with homeless and formerly homeless either living in permanent, transitional, or unstructured environments. These households reported varied reasons for entering and or remaining in the cycle of homelessness. Lack of affordable housing, loss of employment, family estrangement, mental illness, substance abuse (alcohol or drugs), extremely low income, and domestic violence were cited as primary reasons they entered or were unable to improve their living conditions.

The Homes for Homeless Nevadans plan will serve two purposes: to outline ideas that will guide the city of Las Vegas in reducing and ending homelessness and to support the region in the implementation of the Southern Nevada Regional Homeless and Housing Plan. The success of the city's plan depends on the ability of local government, along with regional participation and collaboration, to mobilize, coordinate, re-examine, and provide financial and human resources needed to reduce and end homelessness.

The Homes for Homeless Nevadans Plan is a significant step forward in enhancing existing homeless services and finding new and innovative ways to reduce homelessness. This plan provides the framework for reducing and ending homelessness. More importantly, it will reduce incidences of homelessness. Increasing opportunities for permanent housing combined with case management and supportive services, homeless individuals and families can regain a sense of normalcy and permanent self-sufficiency.

The city of Las Vegas recognizes the need for a comprehensive, coordinated, and continuous effort to reduce homelessness. Developing an interagency continuum is just one small step that will reap momentous benefits not only for homeless individuals and families but to the city as well. As with the Southern Nevada Regional Homeless and Housing Plan, Homes for Homeless Nevadans will be a living document that will change as policies, directions, and administrations change. Modifications to the plan will also be made in response to the success or failure of individual or collective strategies, local and/or regional priorities, or other dynamics that change implementation of homeless services. The city of Las Vegas planning team worked in conjunction with regional partners, community members, homeless and formerly homeless individuals and families to identify existing services, gaps in service and solution focused strategies to reduce homelessness. The planning team was charged to:

1. Gather input from stakeholders, homeless, formerly homeless, and community members.
2. Identify existing and current needs, strategies and practices to competently address homelessness in the city of Las Vegas.
3. Assist in the development of a regional plan to reduce homelessness in Southern Nevada.
4. Develop a jurisdictional ten year plan to reduce chronic, temporary, and episodic homelessness.

The city of Las Vegas' Homes for Homeless Nevadans plan is a part of a national movement that is dedicated to reducing chronic homelessness. However, the city of Las Vegas' homeless plan addresses the needs of all segments of the homeless population, the chronic, temporary, and episodic. Focusing on all three populations while addressing the needs of individuals and families at-risk of becoming homeless, is a comprehensive and coordinated approach towards reducing incidences of individuals and families entering into the cycle of homelessness, living on the streets, in cars, emergency shelters, and other alternative forms of shelter.

In modifying the national chronic homeless model to meet local government needs it is anticipated that the number of individuals and/or families in danger of becoming chronically homeless is expected to decrease; the number of individuals or families entering the cycle of homelessness will decrease; and the length of time the individual or family experiences homelessness will also decrease. Implementing the plan will require the city of Las Vegas to assess its current resources and prioritize human service delivery spending based on the intended goals of this plan.

Reducing and ending homelessness requires participation from all stakeholders ranging from local government, service providers, community leaders and members, mental health and correctional facilities, and the individual or family experiencing homelessness. This plan will help facilitate participation while promoting higher levels of responsibility and accountability for individuals and families at-risk or currently experiencing homelessness.

# Strategies

## 1. Promote Interagency Coordination of Human Service Delivery Programs

Currently, several city departments provide information and referral services for individuals seeking assistance with rent, utility, supportive services or basic information. In an effort to reduce interagency fragmentation, an internal continuum will be developed to assist residents of the city of Las Vegas to attain and/or maintain self-sufficiency. The purpose of creating an internal continuum is to provide seamless service delivery to city residents who are at-risk or currently experiencing homelessness. The desired outcome will be a reduction in the number of individuals or families entering the cycle of homelessness and the length of time spent homeless.

The city of Las Vegas allocates federal funds and offers programs to those at-risk of becoming homeless in addition to the chronic, episodic and temporarily homeless. The city of Las Vegas programs and services include: Municipal Court's Alternative Sentencing and Education Division (ASED), Chronic Inebriate Program (CIP), Emergency Housing Assistance Program (EHAP), Educational and Vocational Opportunities Leading to Valuable Experience (EVOLVE), Municipal Court's Homeless Assistance Program (HAP), HOPE Court, Senior Services, and Victims Advocate Program. Strategies for interagency coordination include:

1. Developing an internal continuum of care with all human service delivery programs.
2. Developing Communication Protocols for homeless crisis.
3. Re-evaluating the city's general and federal funded service provider contracts that can further leverage dollars and resources.

## 2. Increase the Availability of Stable and Sustainable Housing

The most critical issue facing homeless people is the lack of stable and sustainable housing. It is vital that housing be among the first and foremost issues addressed. Adopting a housing first approach is essential in helping a homeless individual or family gain a sense of normalcy. If a household is able to obtain stable, appropriate, permanent housing, then the issues of mental illness, chemical addictions, education, and employment become more manageable. The housing strategy includes the following steps:

1. Creating a regional strategy for developing low-income housing.
2. Placing 900 chronic, temporary and/or episodic individuals/families in housing over ten years.
3. Supporting and increasing housing options for homeless persons utilizing emergency shelter.
4. Promoting valley-wide acquisition, rehabilitation, or new construction of permanent affordable housing.
5. Promoting the sustainability of existing housing stock.
6. Supporting the access and creating stable housing options for clients participating in city of Las Vegas programs.
7. Promoting the use of a master leasing and utility program.

## 3. Enhance Coordination between Non-Profit Organizations and Government

Homelessness is a complicated issue that cannot be solved by one municipality or agency. Although there are no easy solutions, the need for service providers and other community based organizations to coordinate and collaborate in seeking solutions is paramount. While improving, the existing homeless service delivery system has been criticized as duplicative, ineffective, slow to respond, and fragmented. The city planning team, regional partners, service providers, homeless and formerly homeless individuals held a series of focus groups to address this and other issues. This resulted in a consensus that service coordination at the local government and service provider level could be improved. Coordination strategies include the following steps:

1. Promoting diversification of funding sources.
2. Developing higher performance standards for funded entities.
3. Creating intergovernmental partnerships.
4. Promoting enhanced collaborations.
5. Ensuring vendor accountability for funded services.
6. Improving communication among governmental and non-profit entities.
7. Increasing education regarding homeless issues.

## 4. Prevent Individuals and Families from Becoming Homeless

Homeless prevention is any action that prevents an individual or family from losing their housing. Providing services and assistance that contributes to housing stability, such as assistance with rent, mortgage payments, or utility bills are effective preventive measures. Early intervention can prevent homelessness through education, guidance, and cooperation with landlords to avoid evictions. The city of Las Vegas administers homeless intervention and prevention programs to assist individuals and families attain and maintain self-sufficiency. Current rent, mortgage, and utility assistance programs include, the Emergency Housing Assistance Program (EHAP), Tenant Based Rental Assistance (TBRA), and Emergency Shelter Grants (ESG). Through the administration of these programs, the city of Las Vegas is "closing the front door" to homelessness. Prevention strategies include the following steps:

1. Providing flexible payment and funding standards to assist at-risk households.
2. Preventing 1,000 individuals or families from entering the cycle of homelessness over ten years.
3. Identifying households at risk for homelessness and link with responsible service provider.
4. Continuing programs and services that support housing stability, such as rent and utility assistance.
5. Raising education and awareness of early warning signs that lead to homelessness.
6. Breaking the cycle of recurrent homelessness through intensive case management and supportive housing.
7. Evaluating and measuring which programs and strategies are effective in preventing and reducing homelessness.

## **5. Provide Seamless Client Services through Effective Partnerships**

In 2004, Nevada Partnership for Homeless Youth was designated as the lead agency to develop and implement the Homeless Management Information System (HMIS). HMIS is a web-based system that provides a database of homeless information. Housing, shelter, service providers, local government, and other agencies working with the homeless can share client data and develop joint case plans in confidential and private settings. HMIS is designed to improve seamless service delivery and coordination. HMIS also provides a medium to assess client needs, service efficacy and accountability. Seamless client service strategies include the following steps:

1. Using HMIS to improve client service delivery between homeless service providers.
2. Using HMIS to link housing resources and availability.
3. Continuing support and use of seamless service delivery programs and services.
4. Supporting implementation of shared technology.

## **6. Foster Self-Sufficiency through access to Education, Training, and Employment Opportunities**

Lack of employment, income and economic stability are often reported as major causes of homelessness. Although many homeless people report income from sources such as social security, veterans pensions or day labor work, countless employment opportunities are short-lived and are inadequate for individuals wishing to transition to self-sufficiency. Assisting homeless persons attain self-sufficiency through education, training, and employment opportunities will, over time, offset expenditures related to providing supportive housing and other homeless services. Through the EVOLVE Center, homeless individuals, chronic inebriates, and ex-offenders are provided employment readiness courses, job search assistance, and job retention services. Education, training and employment strategies include the following steps:

1. Expanding existing employment and education programs to serve the episodic and temporarily homeless.
2. Enhancing pre-employment and basic skills services.
3. Supporting adult and alternative education and employment services.
4. Establishing income management and financial guardianship programs and services.
5. Revising intake and discharge services to assess employability, education, and training.

## **7. Facilitate the Transition from Homelessness through Intensive Case Management**

A vital component for reducing and ending homelessness is a system that provides coordinated and ongoing case management. From a regional perspective, case management services, while improved, remain fragmented and at times overburdened. A homeless person encounters numerous case managers from different agencies while attempting to become self-sufficient. At times this brings about fragmented services as well as frustration for the individual or family. The ten year plan will enhance case management opportunities for individuals and families that are served through the city of Las Vegas' human services delivery programs. Currently, through the EVOLVE Center, homeless, chronic inebriates, ex-offenders and their families eligible for program services are afforded both moderate and intensive case management services for a minimum of 18-months. Transition strategies include the following steps:

1. Utilizing the Homeless Management Information System (HMIS).
2. Improving coordination of case management services.
3. Improving the quality and accuracy of information and referral services.
4. Developing partnerships with agencies providing credit repair, debt management, and budget programs.
5. Developing alternative service delivery schedules.
6. Promoting case management outside of traditional setting and service hours.

#### **8. Increase Access to Medical, Dental and Vision Care Services \***

Homeless people frequently experience loss of teeth and poor vision due to lack of access to dental and vision services. Both of these conditions can result in reduced employability and the lack of proper dental care can bring about other health problems. While these services fall under the auspices of state and county care, the city of Las Vegas will support regional efforts to ensure medical, dental, and vision care services are available and accessible to homeless individuals and families. Strategies to accomplish this goal include:

1. Providing support services sensitive to the needs of medically frail homeless individuals.
2. Pursuing partnerships and funding for dental and vision services.
3. Supporting coordination of discharge planning and follow-up care between hospitals and homeless services.
4. Leveraging funding opportunities to provide services for HIV/AIDS homeless individuals.

#### **9. Ensure the Availability of Basic Needs Services\***

Homeless people generally have difficulty meeting their basic needs. Basic needs include access to showers, restroom facilities, laundry facilities, and general medical care. This has a detrimental effect on their physical and mental health which reduces their ability to secure employment and transition from homelessness to self-sufficiency. Several programs have been implemented at both the city and regional level to assist in meeting those needs.

Through regional health and safety interventions, chronically homeless individuals and/or families are provided an opportunity to transition to affordable housing with wraparound services. In addition, the city of Las Vegas along with its regional partners provides inclement weather shelter services to homeless individuals and/or families desiring to escape the elements during extreme summer and winter months. Homeless, chronic inebriate, and ex-offenders who participate in city programs are benefiting from services developed and provided through the EVOLVE Center's resource network. Basic needs strategies include the following steps:

1. Supporting access to transitional supportive housing opportunities for clients in city programs.
2. Supporting housing and services with preference to homeless special needs populations.
3. Identifying additional transitional supportive housing units.
4. Supporting programs that enable basic hygiene, adequate diet, and activities of daily living.

#### **10. Improve Availability of Mental Health Services\***

Southern Nevada Adult Mental Health (SNAMHS) is responsible for mental health care for the indigent and provides a 24-hour crisis center, inpatient, and outpatient services. Although the state of Nevada is responsible for providing mental health services, the city's primary role has been to financially support mental health services. Mental Health strategies include the following steps:

1. Ensuring financial support is available for the mental health triage center.
2. Identifying additional funding for individuals served by the mental health system.
3. Identifying funding for housing individuals served by the mental health system.

#### **11. Improve Availability of Substance Abuse Treatment Programs\***



In Southern Nevada, there are currently 330 in-patient beds dedicated for substance abuse treatment. While services may benefit housed individuals, it is problematic for the homeless. Once discharged from a treatment facility, most return back to the streets or shelters and experience high rates of recidivism. The city of Las Vegas is working with its regional partners to develop a comprehensive regional discharge plan. While homeless individuals, chronic inebriates, and ex-offenders participating in city programs at the EVOLVE Center receive substance abuse treatment coupled with intensive case management, there is a need to increase the level of services to ensure that these individuals remain on a path towards self-sufficiency. These services afford the individual an opportunity to regain a sense of normalcy. Substance abuse strategies include the following steps:

1. Increasing access and availability to substance abuse programs for individuals participating in city programs.
2. Supporting seamless services between treatment programs and housing providers.

## Conclusion

Homelessness is a significant problem in the city of Las Vegas and throughout the region. While there are no simple solutions to the complexity of homelessness, one agency or jurisdiction cannot solve it alone. Civic leaders, faith-based organizations, service providers, businesses and consumers, and neighborhoods must work together to assist those who want to help themselves. Although the national movement focuses on ending chronic homelessness, the city of Las Vegas has gone beyond the national call to focus on individuals and families that are chronically, episodically or temporarily homeless.

The Homes for Homeless Nevadans Plan is a significant step forward in enhancing existing homeless services and finding new and innovative ways to reduce homelessness. This plan provides the framework for reducing and ending homelessness. More importantly, it will reduce incidences of homelessness. Increasing opportunities for permanent housing combined with case management and supportive services, homeless individuals and families can regain a sense of normalcy and permanent self-sufficiency.

The city of Las Vegas recognizes the need for a comprehensive, coordinated, and continuous effort to reduce homelessness. Developing an interagency continuum is just one small step that will reap momentous benefits not only for homeless individuals and families, but to the city as well. As with the Southern Nevada Regional Homeless and Housing Plan, Homes for Homeless Nevadans will be a living document that will change as policies, directions, and administrations change. Modifications to the plan will also be made in response to the success or failure of individual or collective strategies, local and/or regional priorities, or other dynamics that change implementation of homeless services.

Through this process, the planning committee witnessed the spirit of Las Vegas at its best. Hundreds of dedicated individuals took part in hearty solution-focused discussions to reduce and end homelessness in the city of Las Vegas. Community leaders, homeless and formerly homeless, service providers, business leaders, and community members all worked together to develop these strategies. Thanks to their input and recommendations, especially from the homeless in this community, the road map is off to a good start and will only improve as the city moves forward to strategically address this issue. By continuing to work together, the city and this community will significantly reduce homelessness in ten years.

## Appendix A: Implementation

### Strategy 1: Promote Interagency Coordination of Human Service Delivery Programs

| Tasks   | Responsible Party   | Desired Outcome   | Timeframe                               |
|---|---|---|---|
| Develop an internal continuum of care with all city of Las Vegas human service delivery departments and programs.             | City Manager's Office, Neighborhood Services, Municipal Court, Fire and Rescue, Leisure Services, City Attorney's Office, Detention and Enforcement | Coordinated approach to human service delivery system for city of Las Vegas residents.  | First two years of plan implementation. |
| Develop Communication Protocols for homeless crisis.  | City Manager's Office, Neighborhood Services, Municipal Court, Fire and Rescue, Leisure Services, City Attorney's Office, Detention and Enforcement | Coordinated and comprehensive interagency communication guide to address homeless health, service and safety issues.  | First year of plan implementation.      |
| Re-evaluate the city's general and federal funded service provider contracts that can further leverage dollars and resources. | City Manager's Office, Neighborhood Services  | Housing and service opportunities provided for individuals and families participating in city of Las Vegas programs. Increased rate of return on fiscal investment. | Immediate ongoing and annual process.   |

## Strategy 2: Increase the Availability of Stable and Sustainable Housing

| Tasks  | Responsible Party   | Desired Outcome   | Timeframe   |
|--|---|---|---|
| Create a regional strategy for developing low-income housing.  | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services   | Regionally developed and funded housing opportunities for low income individuals and families. Inventory of affordable housing in Las Vegas increases.  | First three years of plan implementation.           |
| Place 900 chronic, temporary, and/or episodic homeless individuals/families in housing over ten-years.             | Neighborhood Services Department  | Previously chronic, temporary or episodic homeless individuals and/or families are residing in stable, affordable permanent housing. Homeless population is reduced.                                | Ongoing during plan implementation.                 |
| Support and increase housing options for homeless persons utilizing emergency shelter.                             | Regional Homeless Coordinator/Neighborhood Services   | Increased number of homeless individuals and/or families transitioning from emergency shelter and into permanent affordable housing.  | Immediate and ongoing during plan implementation.   |
| Promote valley-wide acquisition, rehabilitation, or new construction of permanent affordable housing.              | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services   | Increased number of affordable housing units acquired or created for low income individuals and families.   | Ongoing during ten years.                           |
| Promote sustainability of existing housing stock.  | City Manager's Office/Neighborhood Services   | Existing housing stock is safe and livable thereby reducing incidences of individuals or families entering the cycle of homelessness.   | Ongoing during ten years.                           |
| Support the access and creation of stable housing options for clients participating in city of Las Vegas programs. | City Manager's Office, Neighborhood Services, Municipal Court, Fire and Rescue, Leisure Services, City Attorney's Office, Detention and Enforcement | Chronic, temporary and episodic homeless individuals and/or families participating in city of Las Vegas programs will be provided "housing first" opportunities.                                    | First two years of plan implementation and ongoing. |
| Promote the use of a master leasing and utility program.   | Neighborhood Services Department  | Chronic, temporary and episodic homeless individuals and/or families participating in city of Las Vegas programs will secure affordable housing coupled with wraparound services and credit repair. | First two years of plan implementation and ongoing. |

### Strategy 3: Enhance Coordination between Non-Profit Organizations and Government

| Tasks   | Responsible Party   | Desired Outcome   | Timeframe                               |
|---|---|---|---|
| Promote diversification of funding sources.                                     | City Manager's Office,<br>Neighborhood Services                                     | Variety of financial streams to provide housing and supportive services.  | First two years of plan implementation. |
| Develop higher performance standards for funded entities.                       | City Manager's Office,<br>Neighborhood Services,<br>SNRPC Committee on Homelessness | Service Provider will increase outcomes versus outputs. More individuals and families remain housed or obtain housing.                        | First year of plan implementation       |
| Create intergovernmental partnerships.  | Neighborhood Services.<br>SNRPC Committee on Homelessness                           | Coordinated program reporting, and monitoring. Capacity building with partner organizations.  | Immediate and ongoing.                  |
| Promote enhanced collaborations.  | City Manager's Office,<br>Neighborhood Services,<br>SNRPC Committee on Homelessness | Non-profit organizations collaborate and play for local, state and federal grants. Reduced cost of service delivery.                          | Immediate and ongoing during ten years. |
| Ensure vendor accountability for funded services.                               | City Manager's Office,<br>Neighborhood Services,<br>SNRPC Committee on Homelessness | Enhanced service delivery, performance based outcomes, increased number of individuals and/or families placed in housing or remaining housed. | Immediate and ongoing during ten years. |
| Improve communication among governmental entities and non-profit organizations. | City Manager's Office,<br>Neighborhood Services,<br>SNRPC Committee on Homelessness | Coordinated service delivery and leveraging. Reduced incidences of service duplication. More efficient service delivery.                      | Immediate and ongoing during ten years. |
| Increase education regarding homeless issues.                                   | City Manager's Office,<br>Neighborhood Services,<br>Office of Communications        | Creation of PSA's outlining local and regional homeless needs and efforts.  | First year of plan implementation.      |

### Strategy 4: Prevent Individuals and Families from Becoming Homeless

| Tasks  | Responsible Party                                  | Desired Outcome  | Timeframe   |
|--|--|--|---|
| Provide flexible payment and funding standard to assist at-risk households.                                  | Neighborhood Services                              | Economic barriers to housing sustainability or acquisition eliminated.<br>Number of eviction preventions increased.<br>Number of households moving into new residence increased. | Ongoing with re-evaluation every year during ten years. |
| Prevent 1,000 individuals and/or families from entering the cycle of homelessness during the next ten years. | Neighborhood Services                              | 1,000 individuals or families prevented from entering the cycle of homelessness.   | Ongoing during ten years.                               |
| Raise education and awareness of early warning signs that lead to homelessness.                              | Neighborhood Services,<br>Office of Communications | Reduced incidences of individuals and families entering the cycle of homelessness.   | First year of plan implementation.                      |
| Break the cycle of recurrent homelessness through intensive case management and supportive housing.          | Neighborhood Services                              | Reduced number of individuals and/or families re-entering the cycle of homelessness within a six to twelve month period.   | Ongoing during ten years.                               |
| Evaluate and measure which programs and strategies are effective in preventing and reducing homelessness.    | Neighborhood Services                              | Improved service delivery and performance outcomes.  | Immediate and ongoing during ten years.                 |

### Strategy 5: Provide Seamless Client Services through Effective Partnerships

| Task  | Responsible Party                                      | Desired Outcomes   | Timeframe                               |
|---|--|--|---|
| Utilize HMIS to improve client service delivery between homeless service providers. | Neighborhood Services                                  | Homeless service delivery is improved and more efficient. Clients receive faster coordinated services.   | First year of plan implementation       |
| Utilize HMIS to link housing resources and availability.                            | Neighborhood Services                                  | Housing and services are provided in coordinated matter. Homeless population is reduced.   | First two years of plan implementation  |
| Continue support and use of seamless service delivery programs and services.        | SNRPC Committee on Homelessness, Neighborhood Services | Increased number of low income households served and number of agency partnerships and collaborations increase.  | Immediate and ongoing during ten years. |
| Support implementation of shared technology.  | SNRPC Committee on Homelessness, Neighborhood Services | Increased number of service providers utilizing Homeless Management Information System. Services coordinated, case management system is streamlined. Number of persons experiencing homelessness is reduced. | Immediate and ongoing during ten years. |

### Strategy 6: Foster Self-Sufficiency through Access to Education, Training and Employment Opportunities

| Task  | Responsible Party     | Desired Outcomes  | Timeframe                                 |
|---|-----------------------|---|---|
| Expand existing employment and educational programs to serve episodic and temporarily homeless. | Neighborhood Services | Increased number of individuals provided employment services and opportunities.   | First three years of plan implementation. |
| Enhance pre-employment and basic skills services.   | Neighborhood Services | Job placement and retention skills increases for at-risk populations.   | First two years of plan implementation.   |
| Support adult and alternative education and employment services.                                | Neighborhood Services | Increased number of education and employment services provided for at-risk populations.   | First year of plan implementation.        |
| Establish income management and financial guardianship program and services.                    | Neighborhood Services | Income management assistance is provided to assist the individual in maintaining economic stability. Public Guardian participation for individuals or families needing fiscal oversight.                          | First two years of plan implementation.   |
| Revise intake and discharge services to assess employability, education, and training.          | Neighborhood Services | Increased incidences of job retention. Increased incidences of education, training, and employment advancement. Individuals receive customized education and employment services, including life skills training. | First year of plan implementation.        |



### Strategy 7: Facilitate the Transition from Homelessness through Intensive Case Management

| Tasks   | Responsible Party                                      | Desired Outcome   | Timeframe   |
|---|--|---|---|
| Utilize the Homeless Management Information System.   | Neighborhood Services                                  | Reduced incidences and length of time individuals and/or families enter the cycle or experience homelessness.   | First year of plan implementation.                    |
| Improve coordination of case management services.   | SNRPC Committee on Homelessness, Neighborhood Services | Improved and coordinated case management and service delivery throughout Southern Nevada.   | Immediate and ongoing during ten years.               |
| Improve the quality and accuracy of information and referral services.                            | Neighborhood Services                                  | Improved effectiveness and accountability of homeless service providers. Individuals and families receive accurate informational and referral services coupled with follow-up services. | Immediate and ongoing during ten years.               |
| Develop partnerships with agencies providing credit repair, debt management, and budget programs. | Neighborhood Services                                  | Individuals and/or families experience improved economic and living situations. Life skills and repeated episodes of homelessness are reduced.  | First two years of plan implementation                |
| Develop alternative service delivery schedules.   | SNRPC Committee on Homelessness Neighborhood Services  | Increased number of working poor able to access human services delivery system.   | First three years of plan implementation and ongoing. |
| Promote case management outside traditional setting and service hours.                            | SNRPC Committee on Homelessness Neighborhood Services  | No wrong door approach to accessing and receiving services. Holistic approach to meeting needs of homeless individuals and/or families outside of traditional service delivery setting. | First two years of plan implementation and ongoing.   |

**Strategy 8: Increase Access to Medical, Dental, and Vision Care Services\***

| Tasks  | Responsible Party   | Desired Outcome   | Timeframe                                     |
|--|---|---|---|
| Provide support services sensitive to the needs of medically frail homeless individuals.               | SNRPC Committee on Homelessness, Neighborhood Services                        | Fewer incidences of medically frail individuals experiencing homelessness.  | Immediate and ongoing during ten years.       |
| Pursue partnerships and funding for dental and vision services.  | Neighborhood Services   | Low or no cost medical, dental and vision care services for individuals or families participating in city of Las Vegas human service delivery programs. Improved employability. Improved job readiness. | First two years of plan implementation.       |
| Support coordination of discharge planning and follow up care between hospitals and homeless services. | SNRPC Committee on Homelessness, City Manager's Office, Neighborhood Services | Reduced number of medically frail individuals entering or re-entering the cycle of homelessness.  | Immediate and ongoing during ten years.       |
| Leverage funding opportunities to provide services for HIV/AIDS homeless individuals.                  | Neighborhood Services   | Coordinated housing and supportive service systems.   | Immediate and ongoing during first two years. |

Strategies identified with an asterisk are regional efforts supported by the city of Las Vegas but beyond the scope of the city's programs and staffing.

**Strategy 9: Ensure Availability of Basic Needs Services\***

| Tasks   | Responsible Party   | Desired Outcome   | Timeframe  |
|---|---|---|--|
| Support access to transitional supportive housing opportunities for clients participating in city programs. | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Increased housing opportunities. Number of persons experiencing homelessness decreases. Length of time individuals or families experience homelessness decreases. | First four years of plan implementation.             |
| Support housing and services with preference to homeless special needs populations.                         | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Housing opportunities and options increase for severely mentally ill, youth, veterans, domestic violence victims and seniors.                                     | First five years of plan implementation and ongoing. |
| Identify additional transitional supportive housing units.  | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Quality affordable housing stock increases.   | First four years of plan implementation              |
| Support programs that enable basic hygiene, adequate diet, and activities of daily living.                  | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Homeless individual and/or families receive basic needs services while living on the streets or in emergency shelter services.                                    | Immediate and ongoing during ten years.              |

Strategies identified with an asterisk are regional efforts supported by the city of Las Vegas but beyond the scope of the city's programs and staffing.

**Strategy 10: Improve Availability of Mental Health Services\***

| Tasks   | Responsible Party   | Desired Outcome   | Timeframe  |
|---|---|---|--|
| Ensure financial support is available for the mental health triage center.      | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Increased service and program alternatives for persons with mental illness. | Ongoing and throughout ten years of plan implementation. |
| Identify additional funding for individuals served by the mental health system. | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Increased opportunities for mental health services and case management.     | Immediate and ongoing throughout ten years of plan.      |
| Identify funding for housing individuals serviced by the mental health systems. | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Increased housing opportunities for individuals with mental illness.        | Immediate and ongoing throughout ten years of plan.      |

Strategies identified with an asterisk are regional efforts supported by the city of Las Vegas but beyond the scope of the city's programs and staffing.

**Strategy 11: Improve Availability of Substance Abuse Treatment Programs\***

| Tasks   | Responsible Party   | Desired Outcome  | Timeframe                                 |
|---|---|--|---|
| Increase access and availability to substance abuse program for individuals participating in city programs. | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Decreased incidences of substance use.<br>Increased employability and job readiness. | First two years of plan implementation.   |
| Support seamless services between treatment programs and housing providers.                                 | SNRPC Committee on Homelessness/City Manager's Office/Neighborhood Services | Increased housing and substance abuse treatment programs.                            | First three years of plan implementation. |

Strategies identified with an asterisk are regional efforts supported by the city of Las Vegas but beyond the scope of the city's programs and staffing.

## Appendix B: Glossary of Terms

## Glossary of Terms

**Affordable Housing** – Defined as paying 30% or less than an individual's income.

**Chronic Homelessness** - Chronic homelessness refers to an extended episode of homelessness. People who experience chronic homelessness are more likely to have disabling condition, mental illness and sometimes co-occurring with substance abuse, unstable employment, and histories of incarceration or hospitalization.

**Community Development Block Grant Program (CDBG)** - Authorized by the Housing and Community Development Act of 1974 replacing several community development categorical grant programs. CDBG provides eligible metropolitan cities and urban counties with annual direct grants that they can use to revitalize neighborhoods, expand affordable housing and economic opportunities, and/or improve community facilities and services, principally to benefit low- and moderate-income persons.

**Domestic Violence** - Pattern of coercive control in an intimate relationship. This control may be seen in physical assault or in more subtle ways, but equally devastating ways. Verbal, isolation, emotional, financial are forms of abusive behaviors. Domestic violence crosses race, ethnic and economic lines.

**Emergency Shelter** – Emergency shelter are units which provide basic life-sustaining services. Emergency shelter beds have time limits and are usually offered in a congregant manner.

**Emergency Shelter Grant (ESG)** - A federal grant program designed to help improve the quality of existing emergency shelters for the homeless, to make available additional shelters, to meet the costs of operating shelters, to provide essential social services to homeless individuals, and to help prevent homelessness.

**Episodic Homelessness** - Episodic homelessness refers to recurrent periods of homelessness. People who experience episodic homelessness are typically younger and use the homeless services delivery system more sporadically. They often have chemical addictions and cycle in and out of homeless shelters.

**Gaps Analysis** – Part of HUD McKinney Vento; process that involves estimating the number of homeless in any community to determine where adequate services exist.

**HIV/Aids** – Virus that causes AIDS/Auto-Immune deficiency syndrome.

**HOME Program** - Provides funds to local governments and states for new construction, rehabilitation, acquisition of standard housing, assistance to home buyers, and tenant-based rental assistance.

**Low Income** - Income that does not exceed 80% of area median income.

**McKinney Vento Act** – Federal legislation responding to homelessness consisting of fifteen programs services for homeless people including emergency shelter, transitional housing, employment training, health care, and permanent housing.

**Permanent Supportive Housing** – Permanent housing where supportive services such as case management are needed.

**Serious Mental Illness (SMI)** - Defined by the American Psychiatric Association Diagnostic and Statistical Manual of Mental Health Disorders- Text Revised (DSM-TR), as individuals with debilitating mental illness.

**Southern Nevada Regional Planning Coalition's Committee on Homelessness** – Board responsible for overseeing and developing regional homeless policy and initiatives.

**Shelter Plus Care (S+C)** - Shelter Plus Care Program provides rental assistance for hard-to-serve homeless persons with disabilities in connection with supportive services funded from sources outside the program.

**Temporary Homelessness** - Temporary homelessness refers to a single episode of homelessness that is typically in short duration. Persons who experience temporary homelessness use homeless resources for brief periods, in times of economic hardship and temporary housing loss.

**Transitional Shelter** - Transitional shelter serve targeted subpopulations, tailoring services to meet that population's need.



## Appendix C: Resources

## Ten-Year Plan Resources

National Alliance to End Homelessness  
1518 K Street NW, Suite 410  
Washington, DC 20005  
(202) 638-1526  
[naeh@naeh.org](mailto:naeh@naeh.org)

Southern Nevada Regional Planning Coalition  
Committee on Homelessness  
Office of Southern Nevada Regional Homeless Coordinator  
360 Shadow Lane  
Las Vegas, Nevada 89106  
[www.snrpc.org](http://www.snrpc.org)

Southern Nevada Continuum of Care  
c/o Clark County Community Resources  
500 Grand Central Parkway  
Las Vegas, Nevada 89155  
[www.co.clark.nv.us](http://www.co.clark.nv.us)

National Low Income Housing Coalition (NLIHC)  
727 11th St. NW, 6<sup>th</sup> Floor, Washington DC 20005  
[info@nlihc.org](mailto:info@nlihc.org)

US Department of Housing and Urban Development  
451 7th Street S.W.  
Washington, DC 20410  
[www.hud.gov](http://www.hud.gov)

United States Interagency Council on Homelessness  
409 Third Street SW, Suite 310  
Washington, DC 20024  
[www.ich.gov](http://www.ich.gov)

Nevada Partnership for Homeless Youth  
PO Box 20135  
Las Vegas, NV 89112  
[www.nphy.org](http://www.nphy.org)

State of Nevada Adult Mental Health  
Southern Nevada Region  
6161 W. Charleston Boulevard  
Las Vegas, Nevada 89107  
[www.state.nv.us](http://www.state.nv.us)

## Appendix D: Gaps Analysis