

MEETING MINUTES
SOUTHERN NEVADA REGIONAL PLANNING COALITION
COMMITTEE ON HOMELESSNESS
October 9, 2014

In attendance:

Mary Ellen Donner, Chair, City of North Las Vegas
Julie Calloway, Vice Chair, City of Boulder City
Barbara Geach, City of Henderson
Stephen Harsin, City of Las Vegas
Tim Burch, Clark County
Paula Zier, Clark County School District
Annie Wilson, Las Vegas Metro Police Department
Jodie Gerson, Southern Nevada Adult Mental Health Services
Stacy Sutton Pollard, Nevada Homeless Alliance
Dr. Cynthia Dodge, Veterans Administration

Absent:

Captain Shawn Anderson, Las Vegas Metro Police Department
Maria Gatti, MGM Resorts International

Agenda Item 1. Call to order, notice of agenda compliance with the Nevada Open Meeting Law.

A meeting of the Southern Nevada Regional Planning Coalition's Committee on Homelessness was called to order by Mary Ellen Donner, Chair, City of North Las Vegas, at 2:01 p.m., on Thursday, October 9, 2014, at Clark County Commission Chambers, 500 S. Grand Central Pkwy, Las Vegas, Nevada, 89155. The agenda was duly posted in compliance with the Nevada Open Meeting Law requirements.

Agenda Item 2. Public Comment.

No public comment.

Agenda Item 3. Approval of the Agenda for October 9, 2014.

A motion was made to approve the agenda for October 9, 2014. The motion was approved unanimously.

Agenda Item 4. Approval of the Minutes from the September 11, 2014 meeting.

A motion was made to approve the Minutes from the September 11, 2014. The motion was approved.

Agenda Item 5. Receive an update from the Regional Initiatives Office.

Catherine Huang Hara, Regional Initiatives Office (RIO), presented the update. 2015 Homeless Census is scheduled for January 28th (urban area) and 29th (rural area). RIO is in the initial planning phases of the 2015 Southern Nevada Homeless Census, which includes a point-in-time shelter count, street count, and survey. Deployment Stations include: Catholic Charities, SNAMHS Rawson-Neal Psychiatric Hospital, Cambridge Recreation Center, Walnut Recreation Center and Henderson Multigenerational Center. Volunteer information will be posted at HelpHopeHome.org within the next week. For more information on how to participate, please contact Catherine Huang Hara at c3h@clarkcountynv.gov or (702) 455-5623. Inclement Weather Shelter Summer Day Shelter concluded on September 30th, 2014. Winter Night Shelter will commence on November 17th- March 29th, 2015. Locations include: Catholic Charities for men, The Salvation Army for adults, The Shade Tree for single women and women with children, and HopeLink of Southern Nevada is also available to provide motel vouchers. Mainstream Programs Basic

Training is scheduled for October 22th, 2014 from 1pm-4pm at Cambridge Recreation Center, 3930 Cambridge Street, Las Vegas, NV, 89119. It's a training and resource opportunity for case managers, social workers and other front-line staff serving the homeless population. Topic this month is Youth and Young Adults. We are finalizing the 2015 Schedule, and should have it available at our next meeting. Please save the date for the first session on February 25th, 2015. Nevada Statewide Veterans Homelessness Summit is scheduled to take place on November 6th, 2014 from 8:30-12:00pm at the 5th Street School. The summit is designed to advance stakeholder driven strategies around policy, program and practice changes that will improve outcomes for homeless veterans across the State of Nevada, including those in urban and rural communities. The event is being convened by The Federal Reserve Bank of San Francisco, Nevada Department of Veterans Services, and Nevada Community Foundation. For more information, please contact Katherine Miller at millerk@veterans.nv.gov or Joselyn Cousins at 415-974-3281 or Joselyn.cousins@sf.frb.org.

Agenda Item 6. Approval of recommendations for funding for the local 2014 Continuum of Care competition and authorize the Continuum of Care Coordinator to make necessary modifications for final application submission to U.S. Housing and Urban Development (HUD); for possible action.

Michele Fuller-Hallauer, Continuum of Care Coordinator gave the presentation. CoH Evaluation Working Group (EWG) has been working diligently to put forward recommendations to the CoH on projects that should be included in this year's 2014 US Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Consolidated Application. During the 2013 application, HUD released an opportunity for a consolidated application score assigned to communities in 2013 that would be also good for 2014 competition. The consolidated application score will affect funding for 2013 and 2014 allocations. In 2013, Southern Nevada was awarded monies for all but one project. The unfunded project was Support Service Only (SSO) project type not funded at all nationally in Tier 2. Our community consolidated application score from 2013 was 122.75 out of 156.

This year, local process began in early summer, with local application due on August 22, 2014 via Zoomgrants. HUD released the Notice of Funding Availability (NOFA) on September 14th, 2014. The EWG identified a sub-group and evaluation team that received and reviewed applications. Presentations were received on September 8th and 9th, 2014 and applications were scored at the 1st Ranking Session on October 1st, 2014. Agencies had the opportunity to appeal unfunded or defunded projects. All appeals were due by October 3rd, 2014. No appeals were filed this year. The 2nd ranking session occurred on October 8th, 2014 to review and discuss Permanent Housing Bonus application. CoC Application is due to HUD by October 30th, 2014. HUD priorities include: those who have been homeless the longest, permanent supportive housing, rapid re-housing, CoC planning, HMIS system, and transitional housing for youth, domestic violence victims and substance abuse. Opening Doors: Federal Plan to End Homelessness lists the following national goals to end homelessness: 1) End Veteran Homelessness by 2015, 2) End Chronic Homelessness by 2016, 3) End Family Homelessness by 2020, and 4) End Youth Homelessness by 2020. Locally, a Scorecard was developed to assist the providers to offer them with an overview of their respective program application and includes the following elements: scores from local applications assigned by the EWG, program outcomes from performance measures desk audit, alignment with HUD's policies and priorities, and alignment with Opening Doors. HUD mandates that community place projects in rank order and separate them into Tier 1 and Tier 2. EWG looked at the score card totals, reviewed the NEW project applications, transitional housing and Tier 1 and Tier 2 financial limits.

For the 2014 funding request, the Preliminary Pro Rata Need (PPRN) or the amount of monies HUD notifies communities that they are eligible to apply for is \$7,627,403. However, HUD allows communities to apply for annual Renewal Demand Amount because it allows communities to renew current projects, which is higher than the PPRN. HUD Renewal Demand Amount is \$11,191,341. HUD also allowed for Planning Grant at the amount of \$139, 891. HUD used the Renewal Demand Amount to determine how

much Permanent Housing Bonus (PHB) communities are eligible to apply for. Historically, the PHB for our community has been around \$600,000 but PHB this year is \$1,678,701. Tier 1 includes the renewal demand amount minus 2% for a total of \$10,967,515 and the Tier 2 amount includes 2% plus Planning Grant for a total of \$363,717.

The EWG decided to include the following programs in Tier 1: HMIS Expansion, CoC Planning, WestCare Nevada- Safe Haven program, Clark County Social Service-Health Living program, United States Veterans Initiative- CHAMPS program, The Shade Tree- H.O.M.E. program, Clark County Social Service- New Beginnings program, WestCare Nevada- HCCP, Southern Nevada Adult Mental Health Services (SNAMHS) Pathways, Dual Success and HUD 1 Expansion programs, Women's Development Center- Housing Stability for Families, HELP of Southern Nevada- Help Them Home, Family Promise of Las Vegas- Promises to Keep, St. Jude's Ranch for Children- New Crossings, HELP of Southern Nevada- A New Start, United States Veterans Initiative- CHAMPS 2, Nevada Partnership for Homeless Youth- Independent Living Program, Southern Nevada Children First- Paradise, US Veterans Initiative- Permanent Housing for Vets with Disabilities 2, Catholic Charities- St. Vincent HELP Apartments, HELP of Southern Nevada- Shannon West Homeless Youth Center, Women's Development Center- Transitional Housing Program, Southern Nevada Children First- Moving Forward, and Women's Development Center- A Place Called Home. Tier 2 agency/projects include: Women's Development Center- Re-Entry Housing Program, New Genesis- HOPE Project, Nevada Community Associates- Project Hope. Clark County Social Service-The Vivo Housing Project is recommended to receive the Permanent Housing Bonus at the amount of \$1,678,701. Nevada Community Associates- Project EIGHT renewal project was denied/reallocated. No appeal was filed.

Local projects set forth for recommendations will provide Permanent Supportive Housing renewal projects, 925 beds/557 units (334 beds Mentally Ill/Dual Diagnosed, 70 families- 6 pregnant/parenting youth/young adult, 67 Veterans, 347 Chronically Homeless- 14 Veterans), Rapid Rehousing Renewals (77 beds/41 units), Special Projects (HMIS Expansion, CoC Planning, and Safe Haven- 25 units for severely mentally ill), Transitional Renewal Projects(299 beds- 120 male individuals for work program, 118 Veterans work program, 15 families, 64 youth and young adults- 5 pregnant/parenting youth/young adult). New Projects will provide 7 PSH units for chronically homeless (5 families and 2 individuals), the PHB will provide 159 units for chronically homeless, 20 for families, and 85 for individuals.

The total request for 2014 CoC Consolidated Application is \$13,009,933 (Tier 1- \$10,967,515, Tier 2- \$363,717, and PHB - \$1,678,701)

EWG is asking for CoH to approve the recommendation and authorize to make any necessary modifications to submit the Consolidated Application to HUD. The application is due on October 30th, 2014. Stephen Harsin asked how our community would account for any reductions in the amount funded to our community to ensure no gaps in services occur. Ms. Fuller-Hallauer stated that HUD has informed communities that they have enough monies to fund Tier 1 Projects. Tier 2 projects may be at risk of being cut, *if* HUD decided to reduce the amount of monies coming into our community. We do not yet know which projects, if any HUD may defund or reduce funding for.

Tim Burch, Clark County Social Service and Jodie Gerson, Southern Nevada Adult Mental Health Services (SNAMHS) abstained from voting.

Agenda Item 7. Receive an update from WestCare on the Community Triage Center; for possible action.

Erin Kinard, WestCare Area Director, and Chris Nelson, WestCare Deputy Director of Community Triage Center (CTC) gave the update. Ms. Kinard stated that diversion efforts save the community substantial funds by treating individuals in crisis though a non-emergency setting instead of emergency rooms and detention facilities throughout Southern Nevada. On average, it costs \$1,500 per bed at a local

hospital and \$141 per bed (no case management services provided) at jails to treat individuals in crisis. In contrast, it only costs \$150 per bed at the CTC with additional case management services being provided to clients. WestCare purchased a facility on 323 N. Maryland Parkway that is currently being remodeled. Facility is anticipated to open and be operational by January 2015, with capacity of 51 beds. Purpose and function of the new facility is yet to be determined based on community needs.

In Fiscal Year (FY) 2011-2012, a total of 3,524 clients were served with an average length of stay at 2.77 days. In FY 2012-2013, a total of 3,768 clients were served with an average length of stay at 3.31 days. In FY 2013-2014, a total of 3,086 clients were served with an average length of stay 3.24 days. Reduction of clients served in FY 2013-2014 is related to the inheritance of Safe Haven program that required reallocation of resources within the agency to provide intensive case management services to program clients. Number of clients experiencing homelessness increased from 27.04% in 2012-2013 to 36.91% in 2013-2014. Number of clients reporting unemployment also increased from 89.54% in FY 2012-2013 to 92.83% in FY 2013-2014. Number of clients living below federal poverty level increased from 89.30% in FY 2012-2013 to 92.73% in FY 2013-2014. Self-referrals continue to be the primary source of referrals to CTC, followed by referrals from the hospitals. Top four hospitals that refer clients are UMC, Sunrise, Valley and Desert Springs and several from North Vista. Two primary discharge reasons are: 1) the client completed the program or 2) left against medical advice. Clients are primarily being discharged to private residence. However, majority of clients who leave against medical advice are categorized in the “unknown” discharge placement because CTC doesn’t truly know where these clients are going after leaving the facility. There is an increase in the number of psychiatric evaluation completed from 264 in FY 2012-2013 to 318 in FY 2013-2014 (increase of 17%). Number of clients placed on legal holds has increased about 25% from FY 2012-2013. There is a decrease of 46% in the number of duplicated clients. If CTC clients present mental health diagnoses or symptoms, they are referred primarily to Southern Nevada Adult Mental Health Services (SNAMHS).

Mr. Harsin requested an update regarding WestCare’s expansion of their capacity from 36 to 50 beds. Ms. Kinard replied that most of the hospitals, City of Las Vegas and State of Nevada have expressed interest in partnering with the CTC so the expansion is looking to be implemented by November 1st, 2014, pending formal commitment from community partners. Dr. Dodge asked if the hospital referrals are coming from the emergency room, and if WestCare is able to provide transportation for clients. Ms. Kinard stated that yes, referrals are primarily from the emergency rooms. WestCare can provide transportation for clients from the referral source as long as it’s not a private residence.

Agenda Item 8. Receive an update on the Homeless Management Information System (HMIS) from Bitfocus; for possible action.

Rob Herdzyk, Bitfocus, gave the update. In May of 2014, US Department of Housing and Urban Development (HUD) released HMIS data standards that were to be implemented by October 1st, 2014. New data standards include new data collection requirements, new screens/logic and fields have been added, retired, and changed. Sample intake forms were designed, webinars/trainings were recorded and user screens and workflows were updated. The report library was also updated to function with transitional HUD reporting, including standard reports affected by changes. Bitfocus is currently developing CSV and XML import/export programming to allow continued data exchange under the new standards. The expansion will include additional federal partners (VA, RHY, PATH, and HOPWA).

Bitfocus has been actively involved in implementation of the Coordinated Intake process that was open to public on July 1, 2014. Activities include: 1) centralized VI-SPDAT prescreen integration with automatic scoring/prioritization, 2) automatic program matching based on VI-SPDAT prioritization and eligible program integration, 3) community-wide waitlist to help ensure most vulnerable clients are prioritized for next available services, waitlists can be sorted based on most vulnerable, 4) community-wide reporting provides real-time analysis of current health and status of the system, 5) full client outcome tracking from

first intake to achieved outcomes at exit, 6) continued refinement of the process with the change working group. Southern Nevada Continuum of Care (CoC) currently has 50+ participating agencies, 650+ active users, and 120+ programs being managed. 410 VI-SPDAT assessments have been completed and scored through the coordinated intake pilot rollout. 2014 Goals for Clarity CMIS/HMIS are as follows: 2014 AHAR reporting period begins on October 1st, an intensive period to prepare data for submission, 2) 2015 Homeless Census (develop software to conduct electronic survey), 3) encourage participation and coordination amongst non-participating agencies, 4) expanded participation amongst first responders, including UMC, LVMPD detention, and LVF&R, 5) continued refinement of eligibility criteria for agency programs, identifying gaps based on data driven processes, 6) expand on statistical data analysis to provide stronger community performance and outcome measurement, 7) expand swipe cards via Clarity Passport, focused training efforts on the benefits of Swipe Cards, provide assistance on setup and integration of swipe cards to agency internal process, 8) encourage participation and coordination amongst non-participating agencies: expansion of capabilities of Clarity beyond HMIS, enabling agencies to manage other program types, workgroups and community outreach to engage organizations such as faith based groups, hospitals, food pantries, and other community partners. CMIS/HMIS technical support is available at the telephone help desk, 702-614-6690 X2, or via email at support@bitfocus.com. Additional information is available at www.miner-hmis.com that contains remote and classroom training, training manuals with step by step graphic instruction, help.clarityhs.com contains new support wiki with video tutorials and custom report writing/assessment development services.

Agenda Item 9. Receive a presentation from Clark County Social Service on new mobile outreach teams; for possible action.

Tim Burch, Clark County Department of Social Service (CCSS) gave the presentation on street outreach and intervention services. Mr. Burch stated that services are being coordinated but not directly provided by CCSS staff. CCSS staffing provides: scope of work and contract development, coordination and tracking of outreach activities, connection to coordinated intake, collaboration among contracted providers as needed, medical assessment as needed and quality management oversight. Any inquiries about outreach teams can be directed to helphopehome@clarkcountynv.gov.

Mobile Crisis Intervention Team (MCIT) services have been provided by HELP of Southern Nevada for the past 7 years. MCIT provides mobile crisis intervention and outreach to the homeless in the urban areas of Clark County. It's a multi-disciplinary approach serving households found in areas not meant for human habitation with provision of immediate assessment and services towards stability. MCIT is funded by Clark County general funds. HELP of Southern Nevada provides 2 dedicated outreach teams of 6 staff with each of the following: 1 qualified Mental Health Supervisor and Team Leader, 1 qualified Mental Health Associate Outreach Worker, 1 Certified Substance Abuse Counselor, 1 Peer Advocate and 2 Outreach Workers. MCIT performance outcomes are as follows: encounter and engage 350 unduplicated households, assess for housing needs, screen and assess mental health, substance use and medical treatment needs, and successful transitions to intensive case management.

Mobile Outreach Safety Team (MOST) is funded by State of Nevada Block Grant. MOST will provide Assertive Community Treatment (ACT) with intensive case management for Clark County. The team provides intervention services to those with a mental health condition that come into contact with law enforcement within 3 days of referral, 4 or more Legal 2000 (L2K) within the previous 6 months, and the law enforcement's Crisis Intervention Team (CIT) unit will verify if referral is appropriate. This program is designed for provision of outreach, field crisis intervention, referral, and connection to stabilizing services. WestCare provides a dedicated ACT Team comprised of: 1 clinical professional counselor who will coordinate psychosocial community services, 4 qualified mental health counselors who will complete screening and diagnostic assessment and link clients to community resources. Suppression, Prevention, Intervention, Referral Intelligence (SPIRIT) Tool provides automated assessment, referral and connection tools that will be utilized by LVMPD and WestCare in provision of services via MOST programs. MOST

Performance outcomes are as follows: 1) respond to CIT Unit centralized referrals within 3 days, 2) provide intensive universal screening, 3) construct an action plan to address needs as outlined in the screening, 4) connect to basic needs and linkages to medical and mental health care, stabilizing statement, housing, and other stabilizing services as necessary for stabilization, and 5) monitor the outcomes of the MOST initial contact to assure that client continues to be stable, or provide targeted outreach to individuals to attempt to stabilize them until all efforts are exhausted.

Medical Outreach Homeless Recovery (MOHR) is a mobile crisis intervention and outreach program geared towards the homeless in the Henderson area that serves as a diversion from emergency room and inpatient hospitalization for chronically homeless households who are medically vulnerable from St. Rose Dominican Hospitals. Provision of medical, mental health, case management and housing services using Critical Time Intervention (CIT). MOHR is a pending program that is funded by Dignity Health. MOHR is a partnership between Volunteers in Medicine (medical care), WestCare (behavioral health), New Genesis (case management and navigation), and Lutheran Social Services of Nevada (housing). MOHR performance outcomes are as follows: reduce readmits to the hospitals by 80% (32 clients), case manage using CIT model of transition to the community, try-out and transfer of care, and successful transitions to community resources. MOHR project proposal has passed the local Dignity Health Foundation Team and has been elevated to the national team. Community members with general questions, comments, or concerns, please email helphopehome@clarkcountynv.gov. If community partners, concerned citizens, or provider come in contact with homeless individuals or encampments, an intervention form may be completed and sent to helphopehome@clarkcountynv.gov to request intervention from outreach teams.

Ms. Donner asked when the program will be available to the community, and if LVMPD the only entity able to request assistance from the MOST Unit for intervention services. Mr. Burch stated that CCSS is currently working on rolling out the community with the above mentioned programs. The two new outreach programs will provide coverage for about 80 hours a week to provide outreach services. LVMPD was already looking to develop a similar program to MOST so CCSS was able to provide coordination services to carry the project to fruition. This first pilot project will serve as a baseline to fully grasp the need in our community. Mr. Harsin requested jurisdictional representatives to meet to coordinate outreach efforts. He asked if anyone has access to helphopehome@clarkcountynv.gov account during non-business hours to ensure street interventions are carried out before and after business hours, and if there is there a weekend team that will have access to the mailbox to review community requests. Mr. Burch stated that the helphopehome account is a shared mailbox and the weekend personnel will have access to the inbox message to provide homeless outreach, however it is difficult for clients to be connected to community services during non-business hours. In regards to the MOST Unit, Ms. Geach asked how services will be provided to individuals within 3 days of referral if the vendor (WestCare) does not know where the homeless individual is residing in the County and if the SPIRIT a mobile app. Mr. Burch stated that the referrals are not specific to homeless individuals but rather to all community members who are presenting with mental health symptoms. LVMPD will continue to encourage clients to obtain a Clarity Passport that will enable agencies to track and follow up with individual clients. Yes, SPIRIT is a mobile web-based service that can be accessed on electronic devices. Dr. Dodge asked if the outreach teams have access to HMIS during interventions to access and input client data. Mr. Burch replied that yes, Bitfocus can access HMIS on mobile devices so that the outreach teams may have secure access to HMIS. Moving forward, VI-SPDAT assessment tool will be made available on mobile devices to complete assessments on the streets with homeless individuals.

Agenda Item 10. Receive an update from the Nevada Homeless Alliance and a presentation from Nevada Partnership for Homeless Youth; for possible action.

Stacy Sutton-Pollard, Nevada Homeless Alliance gave the update. Project Homeless Connect is scheduled to take place on November 19th, 2014 at Cashman Center from 9am-4pm. As of October 8th, Regis Corporation and Supercuts have requested an exclusive for the haircuts section of the event and will be

providing 50 hair stylists. Registration for hair stylists currently closed. UBS Financial will be host glove boxes in Henderson and Summerlin to request donations for gloves. Booth application deadline is Wednesday, October 29th, 2014. Volunteers may sign-up at www.volunteercentersn.org. Pre-registration for clients will be open October 10th-November 10th at Catholic Charities and Salvation Army anytime during business hours. Pre-registered clients will be able to enter into the event in less than 30 seconds with their pre-issued Clarity Card. PHC donation wish-list is available at www.nevadahomelessalliance.org. The next Provider/PHC Planning Meeting is scheduled for Wednesday, October 15th, 2014 at VA CRRC, 916 W. Owens Ave, Las Vegas, NV, 89106 from 8:30am-9:30am.

Arash Ghafoori, Executive Director of Nevada Partnership for Homeless Youth gave the presentation. Mr. Ghafoori thanked the committee for allowing NPHY to share their program information with the community. A short video testimonial was played for the committee members and audience.

In 2013, Nevada was fifth in the nation for prevalence of unaccompanied homeless children and youth and had the 1st highest rate of unaccompanied homeless children and youth living unsheltered. During the 2013-2014 school year, 9284 homeless youth were enrolled in the Clark County School District. Youth become homeless for many reason but it is often related to severe family breakdown. Often times, youth that arrive at NPHY have no income and minorities and LGBTQ populations are overrepresented. NPHY offers a comprehensive range of services for Southern Nevada's homeless youth. NPHY served abused, neglected, and unaccompanied minors and transition age youth up to the age of 21 to include street youth, runaways, and throw-away youth. Last year, NPHY served 377 individual youth across our core programs and thousands more through outreach. Outreach: Informational cards were provided to 26, 251 youth in schools and at community events and 3,332 contacts with youth on the street. Safe Place (Mobile Crisis Intervention Program for youth) was able to remove 126 at-risk youth from danger often within half hour or less. Emergency Shelter was able to provide 117 youth with 523 bed nights safe and off the streets. The Operation Go Home Program (family reunification program) reunited 36 youth with family across North America. William Fry Drop-In-Center provided survival supplies and supportive services to 377 unduplicated youth over 4,843 visits. Through the 20-bed, scattered site transitional housing program, the Independent Living Program, 6,815 bed nights to 44 youth were provided with 100% of clients exiting to permanent housing. In order to meet the needs of Southern Nevada's growing population of homeless youth, NPHY is more than doubling the sq. footage from 1950 sq. ft. to 4500 sq. ft., increasing both in quantity of clients served and the quality of services. The expanded Drop-In-Center is expected to open in early 2015. Expansion of services is expected to increase the experience and outcomes of all youth accessing services. In addition, NPHY is actively involved in the following regional efforts: Coordinated Intake Process, Youth At-Risk of Homelessness (YARH) sub-committee, and Youth Count/Survey, while at the same time implementing national best practices such as Positive Youth Development model in provision of services. All of the efforts at NPHY are driven by the belief that youth-centered interventions such as NPHY's programs often make all the difference helping homeless youth who are vulnerable who are often teetering on the edge between a lifetime of poverty, abuse, and crime, and a successful, sustainable future. Mr. Ghafoori thanked the community for their support of NPHY's mission and contributions.

Ms. Geach inquired about how the composition of the outreach team, and if the agency provides counseling services to youth. Mr. Ghafoori stated that the outreach teams are composed of peers, volunteers and staff members, and mental health services are provided on site.

Agenda Item 11. Receive an update from each committee member regarding relevant activities within their respective organizations relating to homelessness.

Annie Wilson, Las Vegas Metropolitan Police Department, announced that the Giving Project is scheduled to take place on Saturday, October 11th, 2014 from 9:30am- 11:30 am at 733 N. Veterans Memorial Dr.

Jodie Gerson, Southern Nevada Adult Mental Health Services (SNAMHS), stated that she is resigning from her position at SNAHMS, effective November 3rd, 2014. Donna Jordan will be replacing Ms. Gerson on the Committee on Homelessness board. Ms. Donner thanked Ms. Gerson for her commitment and dedication to the CoH. On behalf of the SNRPC, CoH board presented Ms. Gerson with a Certificate of Appreciation.

Stephen Harsin, City of Las Vegas, reminded the public that Southern Nevada Homelessness Continuum of Care (SNH CoC) Board Interest Forms and Southern Nevada Continuum of Care Membership Forms are still available at www.helphome.org. Deadline for submissions is November 1st, 2014.

Agenda Item 12. Public Comment

Phillip Hollon, The Salvation Army, thanked multiple partners who have been actively involved with the agency to provide resources to homeless and/or low-income clientele in our community. Sky Top Vending has donated \$3,500 worth of various beverages and snack items to the agency. Tim Arnold from Pinball Hall of Fame on 1610 E. Tropicana, donated a truck earlier in the year and has made a \$20,000 donation to Three Square on behalf of Salvation Army to help the agency secure food for the food pantry. Brady Industries donated a brand new washer and dryer to the Salvation Army shelter facility. Las Vegas Justice Courts raised more than \$4000 for bottled water during the summer months by encouraging their employees to pay/donate funds towards Salvation Army for wearing jeans at the workplace. Sky Shift and American Airways donated approximately \$50,000 of china (dishes, glasses, and other items). Walgreens has been providing free flu shots at Salvation Army Family Services, Horizon Crest Apartment and Owens campus for the past three days. Salvation Army is partnering with Three Square and Zappos for the 2nd Annual Thanksgiving Feast to provide frozen Thanksgiving turkey and fixings at Zappos campus on Wednesday, November 19th, 2014. On Wednesday, November 21, 2014, Zappos, Three Square and the Salvation Army will be hosting an event called Heart to Sole with Dr. Watson who will be providing free shoes and socks to our homeless community and low-income individuals. On Saturday, October 18th, 2014, 500 volunteers from the Crossing Church will be doing renovation of the agency's apartment complex, in partnership with AHERN Rental, Cashman Center, Lowes and LVMPD.

Marlene Richter, Executive Director of The Shade Tree, 1 W Owens Ave, North Las Vegas, NV 89030 stated that October is Domestic Violence awareness month. She encouraged the community to promote available services to victims of domestic violence primarily because these victims are eligible to access homeless services in our community.

The meeting adjourned at 3:14 p.m.