City of Laredo

HOME Investment Partnerships American Rescue Plan (HOME-ARP)

Table of Contents

City of Laredo HOME-ARP Allocation Plan

Introduction

On September 20, 2021, the U.S. Department of Housing and Urban Development issued the HOME American Rescue Plan (HOME-ARP) Grant Agreement awarding the City of Laredo $4,199,095 contingent to HUD's review and approval of this HOME-ARP allocation plan.

This allocation plan outlines the specific activities that will be available to support and provide relief to services that address homelessness assistance and supportive services to primary benefit individuals and families in the qualifying populations. Reducing homelessness is an essential phase in creating a healthy and productive community.

Consultation

Describe the consultation process including methods used and dates of consultation:

The City of Laredo has made a collaborative effort to consult with public and private community partners in order to enhance coordination of homeless services delivered by all. The City recognizes that these partnerships are important in providing effective services to those in need in our community.

Staff conducted surveys, hosted discussion meetings, and received public comments related to the development of the City of Laredo HOME-ARP allocation plan to provide homeless and domestic service providers, veterans groups, the housing authority, public agencies, private or public organizations, Texas Balance of State Continuum of Care and residents the opportunity to participate.

The following was the consultation process including methods used and dates of consultations:

- HOME- ARP Online Survey (Available in English and Spanish) - April 1, 2022 – April 29, 2022
- Hosted Virtual Public Meeting – April 22, 2022
- Received Comments/Requested Feedback (By Email/Phone) – April 1, 2022 – December 15,2022
- Presented at Homeless Coalition Meeting – September 27, 2022
- Presented at the Homeless Veterans Meeting – October 5, 2022

The City collected a total of 73 HOME-ARP surveys through the Survey Monkey site (English and Spanish) in an effort to collect additional public input. The survey was available on the City's website, emailed to the homeless coalition members, and city staff was available in-person on the following locations to conduct surveys and provide citizens the opportunity to comment or ask questions about the HOME-ARP Allocation Plan.

- Laredo Housing Authority Offices at 2000 San Francisco - April 4, 2022   9:00 a.m. to 11:00 a.m.
- Laredo Public Library – Main at 1120 E. Calton Rd. - April 4, 2022   3:30 p.m. to 5:30 p.m.
- MOS Branch Library at 1920 Palo Blanco - April 5, 2022   3:30 p.m. to 5:30 p.m.
- Bethany House of Laredo at 817 Hidalgo St. - April 6, 2022   9:00 a.m. to 11:00 a.m.

The HOME-ARP survey gave the opportunity to the public to rank the following eligible homeless activities in terms of priority from highest to lowest within our community:

- Development of affordable housing
- Supportive Services
- Rental assistance
- Acquisitions/Development of Non-Congregate Shelter

The survey indicated that elderly individuals, disabled adults, persons with substance dependency, and people with mental health conditions are more prone to experience homelessness. Supportive services that were considered essential to assist the individuals or families experiencing homelessness; such as food assistance, mental health services, employment assistance, and substance abuse treatment services.

List the organizations consulted:

Agency/Organization Consulted	Type of Agency/ Organization	Method of Consultation	Feedback
American Legion	Veteran's Group	Phone	No feedback received.
Bethany House of Laredo	Homeless Services Provider	Email/Phone/ In-Person	Supportive Services should be a priority followed by street outreach services.
Border Region	Mental Health and Homeless Services Provider	Email/Phone/ In-Person	Supportive Services such as financial assistance, employee assistance and job training programs, and improving knowledge and basic educational skills. Transportation and access to medical care are also needed.
Boys and Girls Club of Laredo	Non-Profit Organization (Address the needs of qualifying populations)	Phone	Affordable Housing is a priority in our community.
Casa de Misericordia	Domestic Violence Service Provider	Email/Phone/ In-Person	Increase the affordability housing inventory and the construction of transitional units. Supportive Services is also necessary to help families stabilize. The community needs mental and health services.
Catholic Charities	Social Services (address the needs of qualifying populations)	Phone	Affordable Housing is a huge need and supportive services to enable and ensure stability.
City of Laredo Health Department	Public Agency	Email	Affordable housing, subsidized groceries, assembly and delivery of services to the homeless population such as medical care and treatment.
Department of Veterans Affairs	Veteran's Group	Email	Shortage of affordable housing in the community and a great need for rental and utility assistance.
Endeavors	Veteran's Group	Email	Safe affordable housing for low-income veterans, emergency housing options such as hotel vouchers, and rental/utility assistance.
Gateway Community Health Clinic	Private, Non-Profit	Phone	No feedback received.

Habitat for Humanity of Laredo	Non-Profit	Phone	Affordable Housing for the elderly and families are needed. As well as supportive services for transportation and wellness checks.
Holding Institute	Homeless Service Provider	Email/Phone	No feedback received.
Laredo Housing Authority	Public Agency	Email	Creation of a permanent supportive housing project to target homelessness.
Laredo Independent School District	Public Agency	Phone	More rental assistance to prevent evictions and the construction of a noon-congregated shelter.
Laredo Police Department	Public Agency	Phone/Email	No feedback received.
Laredo Pride	Non-Profit Organization (Civil Rights)	Phone	No feedback received.
Laredo Pride Lulac	Non-Profit Organization (Civil Rights)	Phone	Additional shelters are needed to facilitate the access to showers and to provide more hygiene supplies.
Lulac Heaven	Public Housing	Phone	Assisted living is needed in the community to get the medical attention required and other services to help the most vulnerable individuals.
Neighbor Works Laredo	Affordable Housing, Fair Housing, and HUD Certified Housing Counseling Agency	Phone	Need of affordable housing to decrease homelessness. As for homeownership the area median income limits must be increase to at least to 120%.
Ruthe B. Cowl Rehabilitation Center	Non-Profit Organization (Address the needs of people with disabilities)	Phone	People with disabilities are more prone to lose their jobs and are at risk of being homeless because they won't be able to afford their rent. Therefore, rental assistance in our community is a must to prevent them from becoming homeless.
Safe Heavan	Domestic Violence Service Provider	Phone	Supportive Services for domestic violence victims and more efficient law enforcement trainings.
Salvation Army	Homeless Service Provider	Email/Phone	No feedback received.
Serving Children and Adults in Need	Mental Health, Housing, and Domestic Violence Service Provider	Email/Phone/In-Person	Rental Assistance and programs to assist undocumented homeless individuals.
South Texas Development Council	Public Agency	Email	Mental services is the biggest issue. The community lacks interventions. Nursing facilities have residence that go into the facility in dire need of supportive services and do not receive it due to the lack of programs. Some of the clients need to go out of town in order to receive these types of services and they have to leave their families behind. Need to bring a psychiatrist for the community. Affordable housing for the

			elderly who do not need to be place in a nursing facility.
South Texas Food Bank	Non-Profit Organization	Phone	No feedback received.
Texas A&M International University	Public University	Phone	Community needs vocational skills and home stability. Clothing donations for individuals to be able to look presentable for future job opportunities.
Texas Health and Human Services	Public Agency	Phone	No feedback received.
Texas Homeless Network	Continuum of Care	Email/Phone	For PJs to consult directly with the homeless coalition, homeless service providers, public housing agency, and with individuals that had experience homelessness.
Texas Rio Grande Legal Aid	Fair Housing/Civil Rights	Phone 956-996-8752	No feedback received.
United Independent School District	Public Agency	Email/Phone	Rental and utility assistance to prevent families from moving from place to place due to job loss, illness, or death in the family. Also, there is a great need of a family shelter.
United Way	Non-Profit Agency	Phone	The top most assistance needed in our community is rent, deposit, and utility assistance and supportive services. As well as more mental health facilities and food pantries.
Volunteers Serving the Need	Veteran's Group	Email/Phone	No feedback received.
Voz de Ninos	Non-Profit Organization (Civil Rights)	Phone	Community needs more affordable housing, tenant based rental assistance, and supportive services.
Webb County Veterans Service Office	Veteran's Group	Email/Phone	Supportive Services such as transportation is needed to assist with medical appointments, buying groceries, and job search.
Webb County Community Action Agency	Local Government Entity	Email/Phone	Permanent immediate emergency shelters are needed as there has been an increase of calls requesting a place to stay for several days.

Summarize feedback received and results of upfront consultation with these entities:

The results from the consultation process concluded the need of affordable housing as the highest priority in our community, as rents continue to rise and wages continue to be stagnate. Homelessness can have devastating effects on individuals because having a home is essential to their health and wellbeing. Experiencing homelessness can disrupt individuals' ability to maintain a job and ensure that their children attend and focus on school. The stress of homelessness also harms the individual's mental well-being. Therefore, supportive services also are essential because it not only assists with homelessness but increases housing stability. It can improve the individuals' health and lower public costs by reducing the use of publicly funded services, such as shelters, prisons, and hospitals. As for people experiencing risk of homelessness, Tenant Based Rental Assistance was also considered critical to prevent homelessness.

As there are many reasons for homelessness such as substance abuse, poverty, mental illness, and lack of affordable housing and healthcare. The recent recession has had a substantial effect as well, because people lost their jobs or suffered a reduction in income. Therefore, helping people successfully exit homelessness and/or maintaining stable housing is an effective approach to address these problems.

Public Participation

Describe the public participation process, including information about and the dates of the public comment period and public hearing(s) held during the development of the plan:

- ***Date(s) of public notice: 4/3/2022***
- ***Planning and Input Public Comment Period:*** *start date – 4/1/2022 end date – 12/16/2022*
- ***Date(s) of 1st public hearing: 4/19/2022***
- ***Date(s) of public notice: 1/1/2023, and 1/15/2023***
- ***Draft Plan Public comment period:*** *start date – 1/17/2023 end date – 2/1/2023*
- ***Date(s) of 2nd public hearing: 1/17/2023***

Describe the public participation process:

The City of Laredo initiated the public participation process by developing an online survey that allowed the public to rank the eligible homeless activities for the HOME-ARP funds in terms of priority within our community. The process also requested feedback on what type of population was mostly affected by homelessness and what supportive services are needed, if any. This survey was distributed through different methods to obtain a greater number of responses and was made available in English and Spanish. The survey was advertised in the Laredo Morning Times on April 3, 2022 and it outlined the different ways to complete the survey and provide public comments. Homeless service providers, domestic violence service providers, veterans' groups, public housing agencies, public agencies that address the needs of the qualifying populations, and public/private organizations that address fair housing, civil, rights, and needs of persons with disabilities were emailed the link to the survey. This survey was also available on the City of Laredo website and by visiting the City of Laredo Community Development Department and Municipal Housing offices for a total of 29 days.

In addition to the survey, City staff held virtual and in-person meetings to provide an opportunity for the public to provide feedback and ask questions about the HOME-ARP allocation plan. The 1st public hearing was held on April 19, 2022 to provide the public the opportunity to participate on the development of the HOME-ARP allocation plan were all eligible activities were included and the 2nd public hearing was held on January 17, 2023 to provide the opportunity for public to comment on the draft City of Laredo HOME-ARP allocation plan with proposed activities. No comments were received during both public hearing.

Describe efforts to broaden public participation:
In order to broaden public participation, the City of Laredo made every effort feasible to involve the public to ensure that they were informed about the amount of HOME-ARP funds allocated to the city, all eligible activities, and their concerns were considered throughout the development of the HOME-ARP allocation plan by email, phone, and in-person. Interpreters were available for non-English speakers at all public input meetings and the public hearings. Special services were also available upon request for persons with disabilities.

In addition to the efforts mentioned on the public participation process, a homeless consultant was contracted by the City of Laredo for strategic planning and to prepare an independent needs assessment study that included recommendations on which action steps our community needed to address homelessness.

Summarize the comments and recommendations received through the public participation process either in writing, or orally at a public hearing:

The comments and recommendations received throughout the public participation process was the need for additional funds to be allocated to assist the homeless population within our community. Affordable housing continues to be a priority and needs to be addressed promptly to prevent homelessness but is not sufficient without the proper supportive services in place to make permanent housing successful. As for the individuals at risk of losing their homes, tenant based rental assistance can also be utilized as an additional method to help reduce housing instability, poverty, and homelessness.

Summarize any comments or recommendations not accepted and state the reasons why:

All comments were accepted.

Needs Assessment and Gaps Analysis

The City of Laredo evaluated the size and demographic composition of all four qualifying populations within its boundaries and assessed the unmet needs of each of those populations. The assessment identified the gaps within its current shelter and housing inventory as well as the needed improvement to the service delivery system. The following data was obtained by utilizing the 2022 point in time count, housing inventory count, and consulting with service providers to quantify the individuals and families in the qualifying populations and their need for additional housing, shelter, or services.

Homeless Needs Inventory and Gap Analysis Table

	Homeless												
	Current Inventory					**Homeless Population**				**Gap Analysis**			
	Family		Adults Only		Vets	Family HH (at least 1 child)	Adult HH (w/o child)	Vets	Victims of DV	Family		Adults Only	
	# of Beds	# of Units	# of Beds	# of Units	# of Beds					# of Beds	# of Units	# of Beds	# of Units
Emergency Shelter	65	11	178	-	-								
Transitional Housing	71	17	17	-	-								
Permanent Supportive Housing	2	2	20	-	2								
Other Permanent Housing	23	23	62	-	-								
Sheltered Homeless						19	161	5	18				
Unsheltered Homeless						2	113	0	10				
Current Gap										64	19	98	-

Data Source: 1. Webb County Housing Inventory Count (HIC) 2. Laredo Point in Time 3. Consultation

Housing Needs Inventory and Gap Analysis Table

Non-Homeless			
	Current Inventory	**Level of Need**	**Gap Analysis**
	# of Units	# of Households	# of Households
Total Rental Units	21,665		
Rental Units Affordable to HH at 30% AMI (At-Risk of Homelessness)	1,700		
Rental Units Affordable to HH at 50% AMI (Other Populations)	520		
0%-30% AMI Renter HH w/ 1 or more severe housing problems (At-Risk of Homelessness)		5,195	
30%-50% AMI Renter HH w/ 1 or more severe housing problems (Other Populations)		3,480	
Current Gaps			9,925

Data Source: Comprehensive Housing Affordability Strategy (CHAS)

Describe the size and demographic composition of qualifying populations within the PJ's boundaries:

Homeless as defined in 24 CFR 91.5

The 2022 Point in Time (PIT) report concluded that there was 226 sheltered and 116 unsheltered people experiencing homelessness in the community. Conducting the unsheltered PIT during the Covid-19 pandemic made it challenging for the individuals performing the count and for the individuals experiencing homelessness. Additional precautions needed to take place in order to maintain the health and safety of all individuals as the City was experiencing a high number of positive Covid-19 cases. The City of Laredo made it priority to increase the use of outreach teams in street-based counts; however, we believe that the number of unsheltered people experiencing homelessness is much higher.

The PIT count identified 5 homeless veterans and 52 chronically homeless individuals from the 342 individuals experiencing homelessness. The majority of the homeless families with children were staying in the Emergency Shelters at the time of the count. As the majority of individuals within our city that are experiencing homelessness were white and Hispanic. The PIT count also identified that 32 individuals (adults only) suffered from serious mental illness, 42 with substance use disorder, 2 with HIV, and 28 were survivors of domestic violence.

The average length of time for individuals experiencing homelessness in the City was 3 to 24 months and for the individuals experiencing chronic homelessness was 36 months. There are an estimated 1,500 individuals that have been entered in HMIS and Osnium since the beginning of January 2022. Through the City of Laredo Emergency Solutions Grant (ESG) 21 individuals were assisted with rapid re-housing funds within the last year.

At Risk of Homelessness as defined in 24 CFR 91.5

Based on 2015-2019 Comprehensive Housing Affordability Strategy (CHAS) data report, Laredo has 21,665 renter units, which 6,895 are at or below 30% of household area median family income (HAMFI). Of these, 5,195 households have at least 1 to 4 housing problems (incomplete kitchen facilities, incomplete plumbing facilities, more than 1 person per room) and 4,045 households have a cost burden greater than 50%, which places them in a higher risk of homelessness.

Through the City of Laredo Emergency Solutions Grant (ESG) 41 individuals were assisted with homelessness prevention funds within the last year.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

As per the 2022 PIT count, 28 individuals were fleeing or attempting to flee domestic violence (18 were sheltered and 10 were unsheltered). The City of Laredo currently has 1 shelter, Casa de Misericordia, for victims of domestic violence and offers survivors a chance to reclaim their lives through comprehensive, holistic services and consistent long-term support. The services include but are not limited to residential shelter with 24-hour hotline, counseling services for adults, legal assistance, outreach education and community referrals. The annual average number of individuals sheltered at Casa de Misericorida is 600.

Each year, domestic violence ends the lives of many women, men, and children, in Laredo last year there were an estimate of 2,222 cases reported to the police department. Due to the Covid-19 pandemic, there has been an increase number of domestic violence (sexual harassment, physical and verbal abuse) cases.

In 2021, Texas Council on Family Violence documented the third highest number of intimate partner homicides in the last decade; 204 Texans were victims of intimate partner homicide. The number includes 169 women and 35 men, including 12 LGBTQ victims. Three times as many victims were killed with a firearm than all other means combined such as being stabbed, physical assault, or strangulation. The ages of women killed were between 16- 85 years old and for men between 18- 82 years old. It was also determined that almost half of the victims (44%) had taken steps to end the abuse.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability, as defined by HUD in the Notice

The City of Laredo has processed 1,870 applications for rent, mortgage, and utility assistance through the Emergency Rental Assistance Programs. As of November 2022, a total of 1,325 applications have been approved and $7,969,032 has been expended to assist individuals that have been impacted by Covid-19 pandemic and are at risk of homelessness. These programs assisted renters and/or homeowners earning less than 80% of HAMFI and in need of assistance to maintain housing stability. A total of 807 households approved for rental assistance had incomes at or below 30% of HAMFI, which made them more vulnerable for future housing instability.

Identify and consider the current resources available to assist qualifying populations, including congregate and non-congregate shelter units, supportive services, TBRA, and affordable and permanent supportive rental housing (Optional):

Through the Emergency Solutions Grant (ESG), the City provides funding to engage homeless individuals and families on the street; improve the quality and assist with the operations of emergency shelters; provide essential services to shelter residents; and Rapid Re-Housing and Homelessness Prevention assistance. The City of Laredo currently has three operating shelters: Bethany House, Holding Institute, and Casa de Misericordia available to assist qualifying populations. There was a total of 1,023 people assisted and $326,923 of funds expended on ESG activities during the 2021-2022 fiscal year.

The City of Laredo has recently awarded Bethany House of Laredo the amount of $4,389,371 to expand their homeless shelter with ESG-CV, CDBG-CV, and SLFR funds. This project entails the acquisition and rehabilitation of the property located across their existing shelter that will assist with the current COVID-19 pandemic by expanding the shelter capacity and complying with the CDC and local public health guidelines. The purpose of this expansion is to increase the number of services provided to the homeless individuals and at least double the number of beds currently available. In addition, this funding will assist with Bethany House of Laredo transition from a night shelter to a 24-hour shelter. Casa de Misercorida and Holding Institute also received funding to address homelessness.

As for Tenant Based Rental Assistance (TBRA), the City of Laredo uses approximately $300,000 of HOME funds to assist an estimated 106 elderly individuals with rental assistance annually. This program is extremely important since majority of its participants live in fixed income, are susceptible to pay more than one-half of their income for rent due to high rents, and earn less than 30% of HAMFI. The City of Laredo, currently has 133 elderly individuals placed on the waiting list.

The City of Laredo strives to ensure that quality housing is available and affordable for families of all incomes but recognizes that there is a shortage particularly with the elderly population. The City of Laredo currently has designated four rental housing projects (26 units) and anticipates constructing 12 additional units within the next year to benefit low-income elderly households. Currently there is 93 elderly individuals placed on this waiting list. The City of Laredo also maintains and manages 537 homes/apartments through the Laredo Municipal Housing division that are available to the public and are below the average market rent. Preferences are given to homeless veterans wishing to rent a Laredo Municipal Housing unit.

There are several more organizations within our community that provide affordable housing such as the Housing Authority, La Terraza, La Azteca Economic Development, Cherry Hill Apartments, Clark Crossing, and St. Vicent de Paul. Nevertheless, these agencies have waiting lists in place and it can take an average of 2-5 years to provide the assistance.

The City continues to offer information to individuals regarding community resources through the 311 Program and works together with the Laredo Homeless coalition to strengthen our current coordinated entry process.

Describe the unmet housing and service needs of qualifying populations:

Homeless as defined in 24 CFR 91.5

As for the City of Laredo Homelessness Needs Assessments and Action Steps Plan, the following recommendations were identified:
- To expand and have the right-types of services provided in the existing Bethany House Shelter;
- Create a funding pool for root cause treatment and recovery programs;
- Create customized clinical tracks based on the unique needs of the community.
- Source new housing opportunities of all types whenever possible, especially Transitional Housing;
- Whenever possible, separate families with children from non-family single adults;
- Establish service eligibility criterion with residency criteria; and
- Have zero tolerance approach to encampments and overnight hanging out in plazas.

Mental health was identified as a major issue in the streets of Laredo according to this study. People living in the streets did not have access to drinkable water, good nutrition, or a good night sleep.

As for the HOME-ARP consultation process with the different homeless service providers, the following recommendations were noted:

- Increase capacity and effectiveness of outreach;
- Increase the affordable housing units and service options; and
- Strengthen the Coordinated Entry Process to connect homeless individuals to the appropriate housing and resources.
- The need of additional funding to support supportive services.

At Risk of Homelessness as defined in 24 CFR 91.5

Consultation with the homeless service providers identified the immediate need for additional homelessness prevention resources to maintain housing stability such as job placement services and financial assistance. As the rent prices are at the rise and the economic insecurity that has followed the pandemic more people are at risk of homelessness.

Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, as defined by HUD in the Notice

Consultation with domestic violence providers indicated that there is a gap in legal services in matters related to separation and divorce proceeding such as employment, financial, and housing problems. As for the Legal Services Corporation America's Partner for Equal Justice the economists concluded that civil legal aid is more effective than access to shelters or counseling services in reducing domestic violence. Obtaining, renewing, and enforcing protective order in court and securing child custody orders so that a parent and children can legally and safely leave the abusive spouse and/or parent can prevent future violence. Filing a protection order and leaving the abuser are the most effective tools for stopping domestic violence.

Human trafficking cases are on the rise according to the U.S. Department of the United Nations and the International Organizations for Migration, the sale of human beings is believed to be a $150 billion industry. Due to the victims' lack of self-awareness, it is challenging to recognize this crime. To address this ongoing problem, at least educators, healthcare professionals, and first responders need to be well trained and informed on human trafficking. At this time, the City of Laredo Police Department have no reports on human trafficking in our community. However, as a border city, it is most likely a place where human trafficking is present. No local human trafficking agencies were identified in our community that could provide significant data.

Other populations requiring services or housing assistance to prevent homelessness and other populations at greatest risk of housing instability as defined by HUD in the Notice

The City of Laredo Homelessness Needs Assessments and Action Steps Plan concluded that engagement, medical assistance, job placement, hygiene services, overnight sleeping, and food are essential to prevent homelessness.

Identify any gaps within the current shelter and housing inventory as well as the service delivery system:

The gap within the current shelter is the need of additional supportive services such as childcare, employment assistance and job training, legal services, counseling, critical life management trainings, and financial assistance. As for the housing inventory, there is a great need to increase affordable housing, homelessness prevention resources, and short-term emergency shelter for people with disabilities and/or medical needs.

Under Section IV.4.2.ii.G of the HOME-ARP Notice, a PJ may provide additional characteristics associated with instability and increased risk of homelessness in their HOME-ARP allocation plan. These characteristics will further refine the definition of "other populations" that are "At Greatest Risk of Housing Instability," as established in the HOME-ARP Notice. If including these characteristics, identify them here:

The City of Laredo plans to utilize the HOME-ARP funds to benefit qualifying individuals and families who are homeless, at risk of homelessness, fleeing or attempting to flee domestic violence and other populations where providing supportive services or assistance would prevent a family's homelessness and would serve those with the greatest risk of housing stability.

Based on the Comprehensive Housing Affordability Strategy data, 78% of the households with income less than or equal to 30% of the area median income are experiencing severe cost burden by paying more than 50% of their monthly household income on rent and utilities leaving them at a higher risk of homelessness. Housing instability involves a number of other challenges such as overcrowding that can affect mental health, stress levels, and relationships; moving frequently can be associated with health outcomes specially in children; and for individuals existing a publicly funded institution or system of care can potentially relapse.

Identify priority needs for qualifying populations:

Through the consultation process, the following priority needs were identified:

1. Development of Affordable Housing
2. Tenant-Based Rental Assistance
3. Supportive Services

For the homeless population, creating more affordable housing and providing supportive services is essential to achieve housing stability. For households at risk of homelessness, rental assistance is a priority to prevent evictions and supportive services including childcare, transportation, employment assistance, and counseling. Persons fleeing or attempting to flew domestic violence and have been residing in an emergency shelter need supportive services and rental assistance to achieve independent living.

Explain how the PJ determined the level of need and gaps in the PJ's shelter and housing inventory and service delivery systems based on the data presented in the plan:

The City of Laredo conducted an extensive consultation process with homeless service providers, utilized a wide range of data sources, and contracted studies to determine the level of need and gaps in the shelter and housing inventory and service delivery systems. Data sources included but were not limited to the 2022 Point in Time Count, the Housing Inventory Count, the Comprehensive Housing Affordability Strategy data, the Census and other sources. Studies include the City of Laredo Homelessness Needs Assessments and Action Steps, the Laredo-Webb County Coordinated Entry process, and the Laredo Homeless Coalition Continuum of Care Plan.

HOME-ARP Activities

Describe the method(s) that will be used for soliciting applications for funding and/or selecting developers, service providers, subrecipients and/or contractors:

The City of Laredo will allocate funds to service providers and sub recipients through a request for proposals and will be scored by a panel of City staff with no financial interest in the request for proposals. As for the method to be used for selecting contractors for in-house projects, the City's established procurement process will be followed.

Describe whether the PJ will administer eligible activities directly:

The City of Laredo plans to administer some eligible activities directly and to request proposals from interested service providers and sub-recipients.

If any portion of the PJ's HOME-ARP administrative funds are provided to a subrecipient or contractor prior to HUD's acceptance of the HOME-ARP allocation plan because the subrecipient or contractor is responsible for the administration of the PJ's entire HOME-ARP grant, identify the subrecipient or contractor and describe its role and responsibilities in administering all of the PJ's HOME-ARP program:

No funds were provided to a subrecipient or contractor prior to HUD's acceptance of the HOME-ARP allocation plan.

Use of HOME-ARP Funding

	Funding Amount	Percent of the Grant	Statutory Limit
Supportive Services	$350,000		
Acquisition and Development of Non-Congregate Shelters	$ 0		
Tenant Based Rental Assistance (TBRA)	$449,095		
Development of Affordable Rental Housing	$2,800,000		
Non-Profit Operating	$ 0	0 %	5%
Non-Profit Capacity Building	$ 0	0 %	5%
Administration and Planning	$600,000	14.29 %	15%
Total HOME ARP Allocation	**$4,199,095**		

Describe how the PJ will distribute HOME-ARP funds in accordance with its priority needs identified in its needs assessment and gap analysis:

Based on the needs assessment and gap analysis, the City of Laredo plans to distribute its HOME-ARP funds to the following eligible activities:

- Development of Affordable Housing which studies show that has a positive effect on people's health and well-being by freeing up financial resources for healthcare and nutritious food, relieve stress and improve mental health, and to reduce homelessness
- Tenant-Based Rental Assistance to address the risk of eviction, homelessness, and other housing instability.
- Supportive Services to provide the resources needed to regain housing stability and to avoid homelessness.

Describe how the characteristics of the shelter an   d housing inventory, service delivery system, and the needs identified in the gap analysis provided a rationale for the plan to fund eligible activities:

Poverty, unemployment, and lack of affordable hommonly associated with homelessness. Therefore, adequate housing and shelter can help address the causes of homelessness through a variety of necessary supportive services including mental and substance treatment, employment assistance, and mainstream benefits.

HOME-ARP Production Housing Goals

Estimate the number of affordable rental housing units for qualifying populations that the PJ will produce or support with its HOME-ARP allocation:

The City of Laredo estimates producing 14 affordable rental-housing units for qualifying populations.

Describe the specific affordable rental housing production goal that the PJ hopes to achieve and describe how the production goal will address the PJ's priority needs:

The City of Laredo production of 14 units through the development of affordable housing will make progress towards the City's goal of increasing the affordable housing inventory. Additionally, an estimated 89 households will be assisted through the Tenant Based Rental Assistance Program.

The City collaborates with several organizations to support and assist in the housing crisis, which calls for increasing the number of housing units and providing rental assistance. The key to lowering poverty and boosting economic mobility is affordable housing. Some people have the impression that building affordable housing will lower the value of the nearby properties and increase crime. However, repeated research has shown that affordable housing has no adverse effects on the neighborhood's real estate market, refuting the notion that affordable housing encourages crime. Affordable housing residents do not exhibit higher criminal propensities than other families. They want a safe place to live, just like every other family. In fact, there are no studies showing any connection between the availability of affordable housing and crime rates.

The creation of these affordable housing units will benefit individuals and families from the following qualifying populations:

- Homeless, as defined in section 103(a) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302(a));

- At-risk of homelessness, as defined in section 401(1) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(1));

- Fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, as defined by the Secretary;

- In other populations where providing supportive services or assistance under section 212(a) of the Act (42 U.S.C. 12742(a)) would prevent the family's homelessness or would serve those with the greatest risk of housing instability;

- Veterans and families that include a veteran family member that meet one of the preceding criteria.

However, no more than 30% percent of the total number of rental units will be occupied by low-income households.

Preferences

Identify whether the PJ intends to give preference to one or more qualifying populations or a subpopulation within one or more qualifying populations for any eligible activity or project:

The City of Laredo does not plan to establish preferences; assistance will be available to all four qualifying populations.

If a preference was identified, explain how the use of a preference or method of prioritization will address the unmet need or gap in benefits and services received by individuals and families in the qualifying population or subpopulation of qualifying population, consistent with the PJ's needs assessment and gap analysis:

Not Applicable.

Referral Methods

Identify the referral methods that the PJ intends to use for its HOME-ARP projects and activities. PJ's may use multiple referral methods in its HOME-ARP program. (Optional):

The City of Laredo will have a project-specific waiting list in place and the applicants will be selected in chronological order. All programs will be advertised in the local newspaper, media outlets, and with agencies that work with the qualifying populations.

If the PJ intends to use the coordinated entry (CE) process established by the CoC, describe whether all qualifying populations eligible for a project or activity will be included in the CE process, or the method by which all qualifying populations eligible for the project or activity will be covered. (Optional):

The City of Laredo will not use the coordinated entry process.

If the PJ intends to use the CE process established by the CoC, describe the method of prioritization to be used by the CE. (Optional):

If the PJ intends to use both a CE process established by the CoC and another referral method for a project or activity, describe any method of prioritization between the two referral methods, if any. (Optional): Not applicable.

Limitations in a HOME-ARP rental housing or NCS project

Describe whether the PJ intends to limit eligibility for a HOME-ARP rental housing or NCS project to a particular qualifying population or specific subpopulation of a qualifying population identified in section IV.A of the Notice:

The City of Laredo does not inte   ligibility for a HOME-ARP rental housing and does not plan to fund the non-congregated shelter activity.

If a PJ intends to implement a limitation, explain why the use of a limitation is necessary to address the unmet need or gap in benefits and services received by individuals and families in the qualifying population or subpopulation of qualifying population, consistent with the PJ's needs assessment and gap analysis: Not applicable.

If a limitation was identified, describe how the PJ will address the unmet needs or gaps in benefits and services of the other qualifying populations that are not included in the limitation through the use of HOME-ARP funds (i.e., through another of the PJ's HOME-ARP projects or activities):
Not applicable.

HOME-ARP Refinancing Guidelines

The City of Laredo does not intend to use HOME-ARP funds to refinance existing debt secured by multifamily rental housing that is being rehabilitated with HOME-ARP funds.

- *Establish a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing to demonstrate that rehabilitation of HOME-ARP rental housing is the primary eligible activity.*
  Not applicable.

- *Require a review of management practices to demonstrate that disinvestment in the property has not occurred; that the long-term needs of the project can be met; and that the feasibility of serving qualified populations for the minimum compliance period can be demonstrated.*
  Not applicable.

- *State whether the new investment is being made to maintain current affordable units, create additional affordable units, or both.*
  Not applicable.

- *Specify the required compliance period, whether it is the minimum 15 years or longer. Enter narrative response here.*
  Not applicable.

- *State that HOME-ARP funds cannot be used to refinance multifamily loans made or insured by any federal program, including CDBG.*
  Not applicable.

- *Other requirements in the PJ's guidelines, if applicable:*
  Not applicable.

Appendix 1:

SF-424, SF-424B, SF-424D and HOME-ARP Certifications

Application for Federal Assistance SF-424

* 1. Type of Submission:	* 2. Type of Application:	* If Revision, select appropriate letter(s):
☐ Preapplication	☒ New	
☒ Application	☐ Continuation	* Other (Specify):
☐ Changed/Corrected Application	☐ Revision	

* 3. Date Received:	4. Applicant Identifier:
	M-21-MP-48-0505

5a. Federal Entity Identifier:	5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:	7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name: City of Laredo, Texas

* b. Employer/Taxpayer Identification Number (EIN/TIN):	* c. UEI:
74-6001573	Y5MTUNLGB2P5

d. Address:

* Street1: 1301 Farragut St. (Transit Center 3rd Floor)
Street2:
* City: Laredo
County/Parish:
* State: TX: Texas
Province:
* Country: USA: UNITED STATES
* Zip / Postal Code: 78040

e. Organizational Unit:

Department Name:	Division Name:
Community Development	

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:	Mrs.	* First Name:	Maria
Middle Name:	E.		
* Last Name:	Martinez		
Suffix:			

Title: Community Development Director

Organizational Affiliation:

* Telephone Number: (956) 795-2675	Fax Number: (956) 795-2689

* Email: mmartinez2@ci.laredo.tx.us

Application for Federal Assistance SF-424

* 9. Type of Applicant 1: Select Applicant Type:

C: City or Township Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

* 10. Name of Federal Agency:

U.S. Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Number:

CFDA Title:

* 12. Funding Opportunity Number:

* Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

| | Add Attachment | Delete Attachment | View Attachment |

* 15. Descriptive Title of Applicant's Project:

Administration, Supportive Services, Development of Affordable Rental Housing, and Tenant Based Rental Assistance

Attach supporting documents as specified in agency instructions.

| Add Attachments | Delete Attachments | View Attachments |

1

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant   28

* b. Program/Project   HOME-A

Attach an additional list of Program/Project Congressional Districts if needed.

| | Add Attachment | Delete Attachment | View Attachment |

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding ($):

* a. Federal	4,199,095.00
* b. Applicant	
* c. State	
* d. Local	
* e. Other	
* f. Program Income	
* g. TOTAL	4,199,095.00

* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

☐ a. This application was made available to the State under the Executive Order 12372 Process for review on _____.

☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.

☒ c. Program is not covered by E.O. 12372.

* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)

☐ Yes   ☒ No

If "Yes", provide explanation and attach

| | Add Attachment | Delete Attachment | View Attachment |

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

☒ ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:	Mr.
* First Name:	Joseph
Middle Name:	W
* Last Name:	Neeb
Suffix:	
* Title:	City Manager
* Telephone Number:	(956) 791-7398
Fax Number:	(956) 791-7498
* Email:	jneeb@ci.laredo.tx.us

* Signature of Authorized Representative: DHA   *Joseph W Neeb*

* Date Signed: 5-18-23

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.
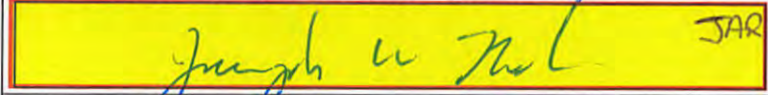
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C.§§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation

Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
Joseph W. Neel JAR	City Manager
APPLICANT ORGANIZATION	DATE SUBMITTED
City of Laredo	3-3-23

Standard Form 424B (Rev. 7-97) Back

ASSURANCES - CONSTRUCTION PROGRAMS

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant:, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will not dispose of, modify the use of, or change the terms of the real property title or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.

4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.

5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progressive reports and such other information as may be required by the assistance awarding agency or State.

6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards of merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681 1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29) U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statue(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statue(s) which may apply to the application.

11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.

14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of

Federal actions to State (Clean Air) implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq).

18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

20. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
[signature] JAR	City Manager
APPLICANT ORGANIZATION	DATE SUBMITTED
City of Laredo	3-3-23

SF-424D (Rev. 7-97) Back

HOME-ARP CERTIFICATIONS

In accordance with the applicable statutes and the regulations governing the consolidated plan regulations, the participating jurisdiction certifies that:

Affirmatively Further Fair Housing --The jurisdiction will affirmatively further fair housing pursuant to 24 CFR 5.151 and 5.152.

Uniform Relocation Act and Anti-displacement and Relocation Plan --It will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended, (42 U.S.C. 4601-4655) and implementing regulations at 49 CFR Part 24. It will comply with the acquisition and relocation requirements contained in the HOME-ARP Notice, including the revised one-for-one replacement requirements. It has in effect and is following a residential anti-displacement and relocation assistance plan required under 24 CFR Part 42, which incorporates the requirements of the HOME-ARP Notice. It will follow its residential anti-displacement and relocation assistance plan in connection with any activity assisted with funding under the HOME-ARP program.

Anti-Lobbying --To the best of the jurisdiction's knowledge and belief:
1. No Federal appropriated funds have been paid or will be paid, by or on behalf of it, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and

3. It will require that the language of paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose
accordingly.

Authority of Jurisdiction --The consolidated plan is authorized under State and local law (as applicable) and the jurisdiction possesses the legal authority to carry out the programs for which it is seeking funding, in accordance with applicable HUD regulations and program requirements.

Section 3 --It will comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) and implementing regulations at 24 CFR Part 75.

HOME-ARP Certification --It will use HOME-ARP funds consistent with Section 3205 of the American Rescue Plan Act of 2021 (P.L. 117-2) and the CPD Notice: *Requirements for the Use of Funds in the HOME-American Rescue Plan Program*, as may be amended by HUD, for eligible activities and costs, including the HOME-ARP Notice requirements that activities are consistent with its accepted HOME-ARP allocation plan and that HOME-ARP funds will not be used for prohibited activities or costs, as described in the HOME-ARP Notice.

_____   3-3-23
Signature of Authorized Official   Date

Joseph W. Neeb
City Manager

Appendix 2:

Public Notices and Public Hearings

NOTICE OF REQUEST FOR PUBLIC COMMENT

The City of Laredo, Department of Community Development, will be conducting surveys and receiving public comments in regards to the development of the HOME Investment Partnerships American Rescue Plan (HOME-ARP) in order to provide citizens the opportunity to participate. Staff will also consult with homeless and domestic violence service providers, veteran's groups, public housing agencies, public agencies that address the needs of the qualifying populations, and public or private organizations that address fair housing, civil rights, and the needs of persons with disabilities, and the Texas Balance of State Continuum of Care. The HOMEARP program funds will support and provide relief to services that address homelessness assistance and supportive services.

The community is highly encouraged to fill out the HOME-ARP survey or provide comments through any of the following methods:
- April 19, 2022: Public Hearing during the 5:30 p.m. City Council meeting at the City Council Chambers located at 1110 Houston Street, Laredo, Texas, 78040.
- April 22, 2022: Community input meeting scheduled at 10:00 a.m. at the Department of Community Development located at 1301 Farragut 3rd Floor.
- Visit the City of Laredo Department of Community Development located at 1301 Farragut or the City of Laredo Municipal Housing Offices located at 5511 Thomas Ave., to pick up, fill out, and submit a survey (hard copies will be available) from April 4 – April 29, 2022, Monday to Friday from 8:00 a.m. - 5:00 p.m.
- Call the City of Laredo Community Development Department at (956)795-2675.
- Write an e-mail to cdcomments@ci.laredo.tx.us
- Submit comments orally (in person or by phone) or in writing to Ms. Tina Martinez, Community Development Director, P.O. Box 1276 or 1301 Farragut, Transit Center, 3rd Floor, East Wing, Laredo, Texas 78040.
- Fill out the survey online through Survey Monkey at https://www.surveymonkey.com/r/SDLSNPG (English) or https://www.surveymonkey.com/r/KNBS2NM (Spanish).
- Visit the City of Laredo website at https://www.cityoflaredo.com and click on "HOME-ARP Survey" to fill out a survey online.

Comments received will be made part of the HOME-ARP Allocation Plan, that will be submit as an amendment to the FY2021 Annual Action Plan. This plan will outline how the HOME-ARP funding of $4,199,095 made available through the U.S. Department of Housing and Urban Development (HUD) will be utilized.

City staff would like to invite the community to attend or submitted their comments to better service our homeless population. Special services will be made available upon timely request for the physically impaired. For more information, contact the Department of Community Development at (956)795-2675.

Equal Housing Opportunity

Tina Martinez
Community Development Director

AVISO DE SOLICITUD DE COMENTARIO PÚBLICO

El Departamento de Desarrollo de la Comunidad de la Ciudad de Laredo estará realizando encuestas y recibiendo comentarios con respecto al desarrollo del Plan de Rescate Estadounidense de HOME Investment Partnerships (HOME-ARP) para brindarles a los ciudadanos la oportunidad de participar. El personal también consultará con proveedores de servicios para personas sin hogar y violencia doméstica, grupos de veteranos, agencias de vivienda pública, agencias públicas que abordan las necesidades de las poblaciones que califican y organizaciones públicas o privadas que abordan la vivienda justa, los derechos civiles y las necesidades de las personas con discapacidades y el Texas Balance of State Continuum of Care. Los fondos del programa HOME-ARP apoyarán y brindarán alivio a los servicios que abordan la asistencia para personas sin hogar y los servicios de apoyo.

Se alienta a la comunidad a completar la encuesta HOME-ARP o proporcionar comentarios a través de cualquiera de los siguientes métodos:
- 16 de Abril, 2022: Audiencia pública durante la junta regular del Cabildo a las 5:30 p.m. en la Sala de Cabildo localizada en 1110 Houston Street, Laredo, Texas, 78040.
- 22 de Abril 2022: Reunión de aportes de la comunidad programada para las 10:00 a.m. en el Departamento de Desarrollo Comunitario ubicado en 1301 Farragut, 3er piso.
- Visitando el Departamento de Desarrollo Comunitario de la Ciudad de Laredo ubicado en 1301 Farragut o las Oficinas Municipales de Vivienda de la Ciudad de Laredo ubicada en 5511 Thomas Ave., para recoger, completar y enviar una encuesta (habrá copias impresas disponibles) a partir del 4 de abril – 29 de abril de 2022, de lunes a viernes de 8:00 a.m. - 5:00 p.m.
- Llamando al Departamento de Desarrollo Comunitario de la Ciudad de Laredo al (956)795-2675.
- Escribiendo un correo electrónico a cdcomments@ci.laredo.tx.us
- Presentando comentarios verbalmente (en persona o por teléfono) o por escrito a la Sra. Tina Martinez, Directora de Desarrollo Comunitario, P.O. Box 1276 o 1301 Farragut, Transit Center, 3er piso, ala este, Laredo, Texas 78040.
- Complete la encuesta en línea a través de Survey Monkey en https://www.surveymonkey.com/r/SDLSNPG (inglés) o https://www.surveymonkey.com/r/KNBS2NM (español).
- Visite el sitio web de la Ciudad de Laredo en https://www.cityoflaredo.com y haga clic en "Encuesta HOME-ARP" para completar una encuesta en línea.

Los comentarios recibidos formarán parte del Plan de asignación de HOME-ARP, que se presentará como una enmienda al Plan de Acción Anual de FY2021. Este plan describirá cómo se utilizará la financiación de HOME-ARP de $4,199,095 disponible a través del Departamento de Vivienda y Desarrollo Urbano.

El personal de la ciudad quisiera invitar a la comunidad a asistir o enviar sus comentarios para brindar un mejor servicio a nuestra población sin hogar. Los servicios especiales estarán disponibles a petición oportuna para las personas con discapacidad física. Para obtener más información, comuníquese con el Departamento de Desarrollo Comunitario al (956)795-2675.

Igualdad de Oportunidad en la Vivienda

Tina Martinez
Directora del Departamento De
Desarrollo de la Comunidad

City Council-Regular

Meeting Date: 01/17/2023

Initiated By: Rosario Cabello, Interim City Manager

Staff Source: Tina Martinez - CD Director

SUBJECT

Public Hearing allowing interested persons to comment on the HOME Investment Partnerships American Rescue Plan (HOME-ARP), which will be submitted as an amendment to the FY2021 Annual Action Plan to the U.S. Department of Housing and Urban Development. This plan outlines the specific activities that will be available to support and provide relief to services that address homelessness assistance and supportive services. The City of Laredo anticipates receiving $4,199,095.00 of HOME-ARP funding contingent to HUD's review and acceptance of this plan.

The following projects are proposed to be funded:

HOME Investment Partnerships American Rescue Plan

Administration and Planning	$600,000.00
Development of Affordable Rental Housing	$2,800,000.00
Tenant Based Rental Assistance (TBRA)	$449,095.00
Supportive Services	$350,000.00
Total	**$4,199,095.00**

VENDOR INFORMATION FOR COMMITTEE AGENDA

N/A

PREVIOUS COUNCIL ACTION

On April 19, 2022, a public hearing was held at the City Council meeting to provide the community an opportunity to comment on the development of the HOME Investment Partnerships American Rescue Plan (HOME-ARP). No comments were received.

BACKGROUND

The City of Laredo Department of Community Development, conducted surveys, hosted discussion meetings, and received public comments in regard to the HOME Investment Partnerships American Rescue Plan (HOME-ARP) to provide homeless and domestic violence providers, veteran's groups, public housing agencies, public or private organizations, Texas Balance of State Continuum of Care and citizens the opportunity participate in the development of the program. The HOME-ARP Program will primarily benefit qualifying individuals and families who are homeless, at risk of

will primarily benefit qualifying individuals and families who are homeless, at risk of homelessness, or other vulnerable populations.

The HOME-ARP Allocation Plan is currently available for public review and comment for a period of fifteen (15) days beginning January 17, 2023, and ending February 1, 2023, at the offices of the City Secretary, the Department of Community Development, at the Main Public Library, and on the City of Laredo's website under the Community Development Department's page https://www.cityoflaredo.com/CommDev/index.html. Comments received will be incorporated into the final HOME-ARP allocation plan document, which will be presented for City Council approval on February 6, 2023.

COMMITTEE RECOMMENDATION

N/A

STAFF RECOMMENDATION

That interested persons be provided an opportunity to comment on the draft HOME-ARP Allocation Plan.

Fiscal Impact	
Fiscal Year:	2023
Bugeted Y/N?:	Y
Source of Funds:	HOME-ARP
Account #:	217-6966
Change Order: Exceeds 25% Y/N:	
FINANCIAL IMPACT:	
Funding is available under 217-6966	

Public Notice

Publication date: Sunday, <u>January 1, 2023 & January 15, 2023</u>

The City of Laredo Department of Community Development prepared its HOME Investment Partnerships American Rescue Plan Program (HOME-ARP) Allocation Plan, which will be submitted as an amendment to the FY2021 Annual Action Plan to the U.S. Department of Housing and Urban Development. This plan outlines the specific activities that will be available to support and provide relief to services that address homelessness assistance and supportive services. If HUD approves the plan, the City anticipates receiving **$4,199,095** of HOME-ARP funding.

The following projects are proposed and subject to City Council approval.

HOME Investment Partnership American Rescue Plan	
Administration and Planning	$600,000
Development of Affordable Rental Housing	$2,800,000
Tenant Based Rental Assistance	$449,095
Supportive Services	$350,000
TOTAL	**$4,199,095**

The HOME-ARP Allocation plan is currently available for public review and comment for a period of fifteen (15) days **beginning January 17, 2023 and ending February 1, 2023** at the offices of the City Secretary, the Department of Community Development, at the Main Public Library, and on the City of Laredo's website under the Community Development Department's page https://www.cityoflaredo.com/CommDev/index.html. Comments received will be incorporated into the final HOME-ARP allocation plan document, which will be presented for City Council approval on February 6, 2023.

A public hearing to provide interested citizens an opportunity to comment on the HOME-ARP Allocation Plan draft is schedule for **January 17, 202**3 in the City Council Chambers of City Hall located at 1110 Houston during the regularly scheduled City Council meeting beginning at 5:30 p.m. Special services are available, upon timely request, for the physically impaired.

Comments may be provided at the public hearing or submitted in writing during the fifteen (15) day comment period to Ms. Tina Martinez, Community Development Director, P.O. Box 1276 in Laredo, Texas 78042 or 1301 Farragut 3rd Floor East Wing, Laredo, Texas 78040. Comments may also be submitted via email to: mcervantes@ci.laredo.tx.us. Comments will be accepted until **February 1, 2023**, 5:00 p.m. For more information, contact the Department of Community Development at (956)795-2675.

Equal Housing Opportunity

Tina Martinez
Community Development Director

Aviso Público

Fecha de Publicación: Domingo, 1 de enero, 2023 y enero 15, 2023

El Departamento de Desarrollo Comunitario de la Ciudad de Laredo preparó su Plan de HOME Investment Partnerships America Rescue Plan Program (HOME-ARP), que se presentará como una enmienda al Plan de Acción Anual del Año Fiscal 2021 al Departamento de Vivienda y Desarrollo Urbano de los Estados Unidos. Este plan describe las actividades específicas que estarán disponibles para apoyar y proporcionar alivio a los servicios que afrontan la asistencia para personas sin hogar y los servicios de apoyo. Si HUD aprueba el plan, la Ciudad anticipa recibir $4,199,095 de fondos HOME-ARP.

Los siguientes proyectos son propuestos y sujetos a la aprobación del Cabildo de la Ciudad.

HOME Investment Partnership American Rescue Plan	
Administración y Planificación	$600,000
Desarrollo de Viviendas Asequibles	$2,800,000
Asistencia de Renta para Arrendatarios	$449,095
Servicios de Apoyo	$350,000
TOTAL	**$4,199,095**

El plan de HOME-ARP está actualmente disponible para revisión y comentarios públicos por un período de quince (15) días a partir d**el 17 de enero de 2023 y hasta el 1 de febrero de 2023** en las oficinas del Secretario de la Ciudad, el Departamento de Desarrollo Comunitario, en la Biblioteca Pública Principal y en el sitio web de la Ciudad de Laredo en la página https://www.cityoflaredo.com/CommDev/index.html del Departamento de Desarrollo Comunitario. Los comentarios recibidos se incorporarán al documento final del plan de HOME-ARP, que se presentará para su aprobación por el Cabildo de la Ciudad de 6 de febrero de 2023. Una audiencia pública para brindar a los ciudadanos interesados la oportunidad de comentar sobre el HOME-ARP Plan está programada para el 1**7 de enero de 2023** en la Cámaras del Cabildo ubicada en 1110 Houston durante la reunión programada regularmente del Cabildo Municipal a partir de las 5:30 p.m. Se pondrán a disposición de los discapacitados físicos servicios especiales, con previa solicitud.

Los comentarios pueden ser proporcionados en la audiencia pública o enviarse por escrito durante el período de comentarios de quince (15) días a la Sra. Tina Martínez, Directora de Desarrollo Comunitario, P.O. Box 1276 en Laredo, Texas 78042 o 1301 Farragut 3rd Floor East Wing, Laredo, Texas 78040. Los comentarios también pueden enviarse por correo electrónico a: mcervantes@ci.laredo.tx.us. Los comentarios serán aceptados hasta el **1 de febrero del 2023**, 5:00 p.m. Para obtener más información, comuníquese con el Departamento de Desarrollo de la Comunidad al (956)795-2675.

Igualdad de Oportunidad En La Vivienda

Tina Martínez
Directora del Departamento de Desarrollo de la Comunidad

City Council-Regular

Meeting Date: 01/17/2023

Initiated By: Rosario Cabello, Interim City Manager

Staff Source: Tina Martinez - CD Director

SUBJECT

Public Hearing allowing interested persons to comment on the HOME Investment Partnerships American Rescue Plan (HOME-ARP), which will be submitted as an amendment to the FY2021 Annual Action Plan to the U.S. Department of Housing and Urban Development. This plan outlines the specific activities that will be available to support and provide relief to services that address homelessness assistance and supportive services. The City of Laredo anticipates receiving $4,199,095.00 of HOME-ARP funding contingent to HUD's review and acceptance of this plan.

The following projects are proposed to be funded:

HOME Investment Partnerships American Rescue Plan

Administration and Planning	$600,000.00
Development of Affordable Rental Housing	$2,800,000.00
Tenant Based Rental Assistance (TBRA)	$449,095.00
Supportive Services	$350,000.00
Total	**$4,199,095.00**

VENDOR INFORMATION FOR COMMITTEE AGENDA

N/A

PREVIOUS COUNCIL ACTION

On April 19, 2022, a public hearing was held at the City Council meeting to provide the community an opportunity to comment on the development of the HOME Investment Partnerships American Rescue Plan (HOME-ARP). No comments were received.

BACKGROUND

The City of Laredo Department of Community Development, conducted surveys, hosted discussion meetings, and received public comments in regard to the HOME Investment Partnerships American Rescue Plan (HOME-ARP) to provide homeless and domestic violence providers, veteran's groups, public housing agencies, public or private organizations, Texas Balance of State Continuum of Care and citizens the opportunity participate in the development of the program. The HOME-ARP Program will primarily benefit qualifying individuals and families who are homeless, at risk of

will primarily benefit qualifying individuals and families who are homeless, at risk of homelessness, or other vulnerable populations.

The HOME-ARP Allocation Plan is currently available for public review and comment for a period of fifteen (15) days beginning January 17, 2023, and ending February 1, 2023, at the offices of the City Secretary, the Department of Community Development, at the Main Public Library, and on the City of Laredo's website under the Community Development Department's page https://www.cityoflaredo.com/CommDev/index.html. Comments received will be incorporated into the final HOME-ARP allocation plan document, which will be presented for City Council approval on February 6, 2023.

COMMITTEE RECOMMENDATION

N/A

STAFF RECOMMENDATION

That interested persons be provided an opportunity to comment on the draft HOME-ARP Allocation Plan.

	Fiscal Impact
Fiscal Year:	2023
Bugeted Y/N?:	Y
Source of Funds:	HOME-ARP
Account #:	217-6966
Change Order: Exceeds 25% Y/N:	
FINANCIAL IMPACT:	
Funding is available under 217-6966	

Appendix 3:

Surveys

Through this consultation process, the City of Laredo Department of Community Development is seeking feedback from the general public, community groups or organizations that work with individuals experiencing homelessness, at risk of homelessness, fleeing domestic violence, or other populations where providing supportive services or assistance would prevent a family's homelessness or would serve those with the greatest risk of housing stability.

1. Which selection below best describes the group in which you are affiliated with?

○ City of Laredo Residents

○ Homeless Service Provider

○ Victim Services Provider

○ Veteran's Group

○ Public Housing Agency (PHAs)

○ Public agencies that address the needs of the qualifying population including mainstream benefit systems

○ Organization that address civil rights, fair housing and needs of people with disabilities

○ Other (please specify)

[   ]

2. Is there a need to provide individuals or families with rental assistance to pay rent to prevent homelessness?

○ Great Need

○ Some Need

○ No Need

3. Is there a need for new construction of affordable housing for homeless individuals or families?

○ Great Need

○ Some Need

○ No Need

4. Is there a need for additional emergency shelters for homeless individuals or families?

○ Great Need

○ Some Need

○ No Need

5. Is there a need for an non-congregated emergency shelter for homeless individuals or families?

○ Great Need

○ Some Need

○ No Need

6. Provide ranking of the following eligible homeless activities for the HOME-ARP funds in terms of priority within our community?

	(1) Highest	(2) Mid/High	(3) Mid/Low	(4) Lowest
Development of Affordable Housing	○	○	○	○
Rental Assistance	○	○	○	○
Supportive Services	○	○	○	○
Acquisition/Development of Non-Congregate Shelter	○	○	○	○

7. Based on your experience, what category is most affected by homelessness?

○ Elderly Persons

○ Disabled Adults

○ Illiterate Adults

○ Battered Spouses

○ Persons living with AIDS

○ Other (please specify)

[   ]

8. Is there a need to provide outreach services to homeless individuals living in the streets?

○ Great Need

○ Some Need

○ No Need

9. What kind of supportive services do you consider essential to assist the individuals or families experiencing homelessness? Please check all that apply.

- ☐ Food
- ☐ Transportation
- ☐ Case Management
- ☐ Financial Assistance Costs
- ☐ Outpatient Health Services
- ☐ Mental Health Services
- ☐ Life Skills Training
- ☐ Education Services
- ☐ Mediation
- ☐ Employment Assistance and Job Training
- ☐ Housing Search and Counseling Services
- ☐ Substance Abuse Treatment Services

10. What unmet housing and/or services needs do you think are necessary in our community?

11. What gaps do you see within the shelters and the service delivery system?

12. Do you have any comments or suggestions?

El Departamento de Desarollo de la Comunidad de la Ciudad de Laredo realizo esta encuesta y está pidiendo comentarios al público general, a grupos comunitarios o organizaciones que trabajan con personas sin hogar, en riesgo de quedarse sin hogar, que huyen de la violencia doméstica o otras poblaciones donde brindar servicios de apoyo.

1. ¿Qué selección a continuación describe mejor el grupo al que usted está afiliado?

   ○ Residente de la Ciudad de Laredo

   ○ Proveedor de servicios para personas sin hogar

   ○ Proveedor de servicios para víctimas

   ○ Grupo de Veteranos

   ○ Agencia de vivienda pública

   ○ Agencias públicas que abordan las necesidades de las poblaciones calificadas, incluidos los sistemas de beneficios principales

   ○ Organizaciones que abordan los derechos civiles, la vivienda justa y las necesidades de las personas con discapacidades

   ○ Otro:

   ┌───┐
   │   │
   └───┘

2. ¿Hay necesidad de proveer a individuos o familias asistencia para pagar la renta ú otras utilidades para prevenir que terminen en la calle?

   ○ Mucha Necesidad

   ○ Poca Necesidad

   ○ No Hay Necesidad

3. ¿Hay necesidad de una nueva construcción de viviendas asequibles para personas o familias sin hogar?

   ○ Mucha Necesidad

   ○ Poca Necesidad

   ○ No Hay Necesidad

4. ¿Hay necesidad de refugios de emergencia adicionales para personas o familias sin hogar?

○ Mucha Necesidad

○ Poca Necesidad

○ No Hay Necesidad

5. ¿Hay necesidad de un refugio de emergencia no congregado para personas o familias sin hogar?

○ Mucha Necesidad

○ Poca Necesidad

○ No Hay Necesidad

6. ¿Clasifique de las siguientes actividades elegibles para el programa de HOME-ARP basado en la prioridad qué hay en la comunidad?

	(1) Mas Alto	(2) Medio Alto	(3) Medio/Bajo	(4) Más Bajo	
Nueva Construcción de Viviendas	○	○	○	○	○
Desarrollo de Viviendas Asequibles	○	○	○	○	○
Asistencia de Renta	○	○	○	○	○
Servicios de Apoyo	○	○	○	○	○
Adquisición/Desarrollo de Refugio No Congregado	○	○	○	○	○

7. ¿Basado en su experiencia, ¿qué categoría corre el más riesgo de vivir en la calle?

○ Personas Mayores

○ Adultos Discapacitados

○ Adultos Iletrados

○ Abuso Marital

○ Personas que viven con SIDA

○ Otro:

8. ¿Hay necesidad de proveer información a personas que viven en las calles sobre los servicios disponibles?

○ Mucha Necesidad

○ Poca Necesidad

○ No Hay Necesidad

9. ¿Qué tipo de servicios de apoyo considera qué sea esencial para personas o familias sin hogar? Por favor marque todos los que apliquen.

☐ Comida

☐ Transporte

☐ Manejo de Casos

☐ Asistencia Financiera

☐ Servicios de Salud Ambulatorios

☐ Servicios de Salud Mental

☐ Aptitudes Necesarias de la Vida

☐ Servicios Educativos

☐ Mediación

☐ Asistencia para el Empleo y Entrenamiento Laboral

☐ Servicios de Busqueda de Vivienda y Asesoramiento

☐ Servicios de Tratamiento de Abuso de Sustancias

10. ¿Qué necesidades de vivienda y/o servicios insatisfechas cree que son necesarias en nuestra comunidad?

11. ¿Qué deficiencias ve dentro de los refugios y el sistema de prestación de servicios?

12. ¿Tiene algún otro comentario o sugerencia?

Appendix 4:

2022 Point in Time (PIT) Count

HUD Point in Time Report - Sheltered

Count:	**Texas Balance of State 2022 PIT Count**	Geography:	**Laredo**
Organization:	**All Organizations**		
Project:	**All Projects**	Project Type:	**All Project Types**
Created by:	**Paredes,Alex**	Created on:	**04/20/2022 12:24 PM**

Summary
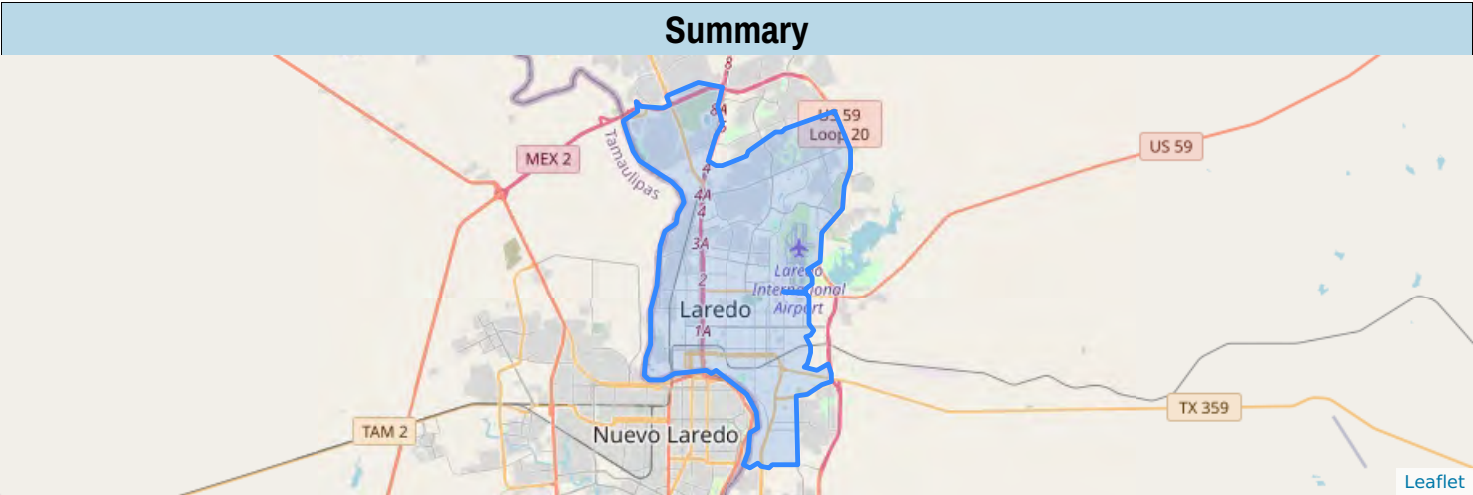
Total Persons	226
Adults (age 18 or older)	185
Young Adults (age 18 to 24)	45
Children (under age 18)	41
Unknown Age	0
Unknown Age - Believe to be Adult	0
Unknown Age - Believe to be Young Adult (18-24)	0
Unknown Age - Believe to be Adult (25+)	0
Unknown Age - Believe to be Child	0
Chronically Homeless	29
Veterans	5
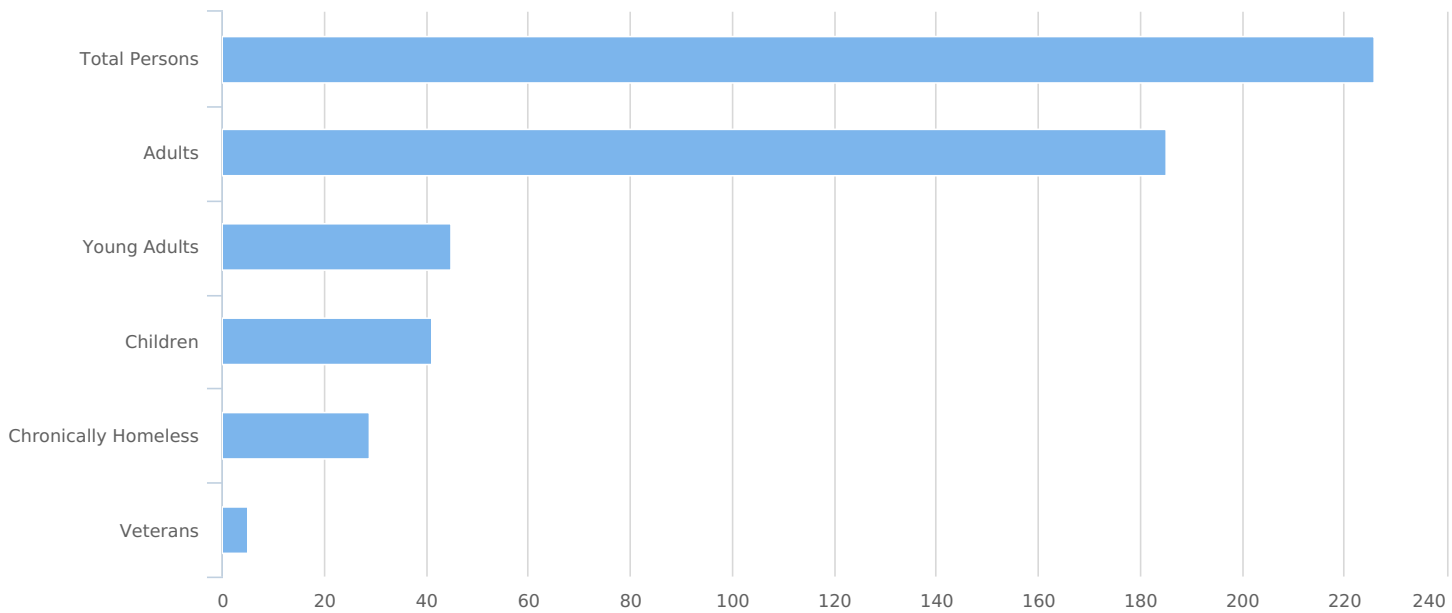
Data Quality Checks

Persons Missing Age Information	0
Persons Missing Sleeping Location	0
Persons Missing Gender	1
Persons Missing Ethnicity	13
Persons Missing Race	1
Persons Missing Relation to HoH	0
Persons with Unknown Household Type	0
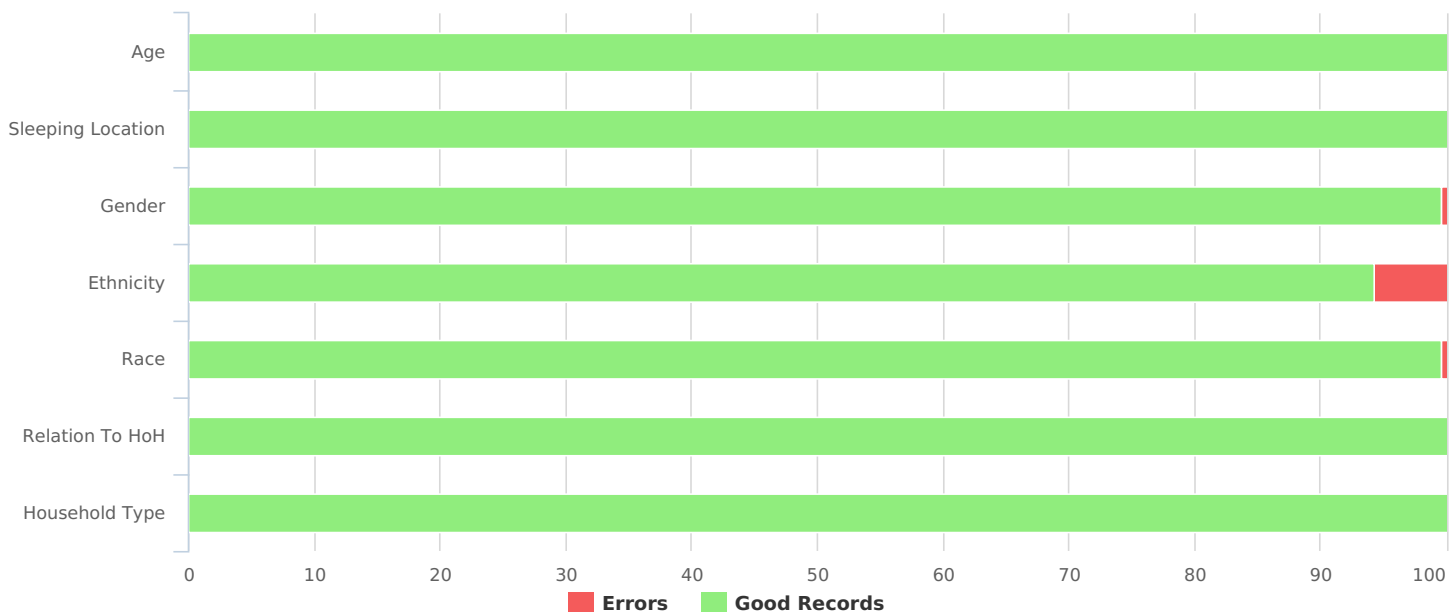
All Households

Households with at Least one Adult and One Child

Household and Person Breakdown

Total Number of Households	19
Total Number of Persons	64
Number of Children (under age 18)	41
Number of Young Adults (age 18 to 24)	4
Number of Adults (age 25 or older)	19

Gender

Female	33
Male	31
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

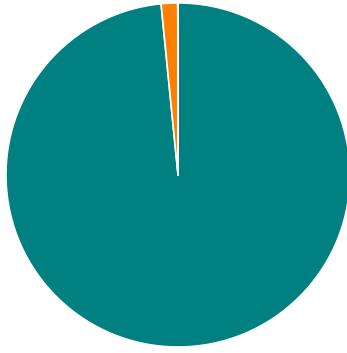|	
Non-Hispanic/Non-Latin(a)(o)(x)	2
Hispanic/Latin(a)(o)(x)	58

Race

White	63
Black, African American or African	1
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race

- White
- Black or African American
- Asian
- American Indian
- Native Hawaiian
- Multiple
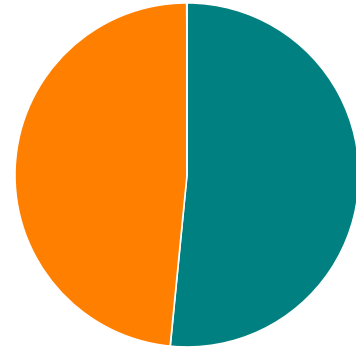
Gender

- Female
- Male
- Transgender
- A gender other than singularly...
- Questioning

Households without Children

Household and Person Breakdown

Total Number of Households	161
Total Number of Persons	162
Number of Young Adults (age 18 to 24)	41
Number of Adults (age 25 or older)	121

Gender

Female	102
Male	59
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

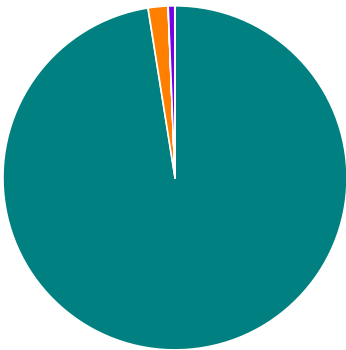|	
Non-Hispanic/Non-Latin(a)(o)(x)	11
Hispanic/Latin(a)(o)(x)	134

Race

White	156
Black, African American or African	3
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	1
Multiple Races	0

Chronically Homeless

Total Number of Persons	29

Race

Gender

Legend — Race: White, Black or African American, Asian, American Indian, Native Hawaiian, Multiple
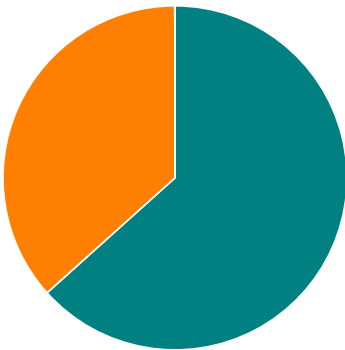
Legend — Gender: Female, Male, Transgender, A gender other than singularly…, Questioning

Households with Only Children

Household and Person Breakdown

Total Number of Households	0
Total Number of Children	0

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Persons	0

Race	Gender

White   Black or African American   Asian   Female   Male   Transgender
American Indian   Native Hawaiian   Multiple   A gender other than singularly...   Questioning

Veteran Households

Veteran Households with at Least One Adult and One Child

Household and Person Breakdown

Total Number of Households	0
Total Number of Persons	0
Total Number of Veterans	0

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race   Gender

■ White   ■ Black or African American   ■ Asian   ■ Female   ■ Male   ■ Transgender
■ American Indian   ■ Native Hawaiian   ■ Multiple   ■ A gender other than singularly...   ■ Questioning

Veteran Households without Children

Household and Person Breakdown

Total Number of Households	5
Total Number of Persons	5
Total Number of Veterans	5

Gender

Female	0
Male	5
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

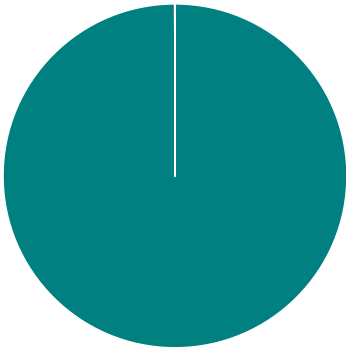|	
Non-Hispanic/Non-Latin(a)(o)(x)	2
Hispanic/Latin(a)(o)(x)	3

Race

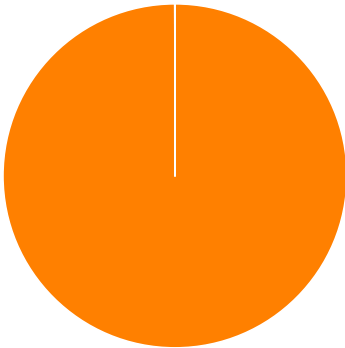|	
White	5
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	3
Total Number of Persons	3

Race

White · **Black or African American** · **Asian** · **American Indian** · **Native Hawaiian** · **Multiple**

Gender

Female · **Male** · **Transgender** · **A gender other than singularly...** · **Questioning**

Youth Households

Unaccompanied Youth Households

Household and Person Breakdown

Total Number of Unaccompanied Youth Households	41
Total Number of Unaccompanied Youth	41
Total Number of Unaccompanied Youth (under age 18)	0
Total Number of Unaccompanied Youth (18 to 24)	41

Gender

Female	36
Male	5
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	39

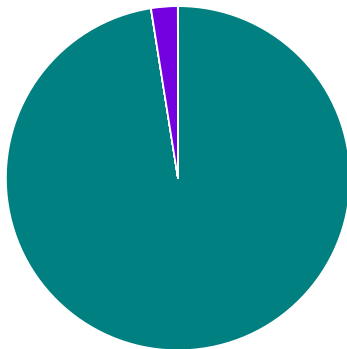### Race

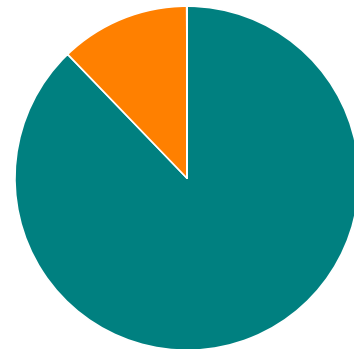|	
White	39
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	1
Multiple Races	0

Chronically Homeless

Total Number of Persons	0

Race	Gender

Race pie chart legend: White, Black or African American, Asian, American Indian, Native Hawaiian, Multiple

Gender pie chart legend: Female, Male, Transgender, A gender other than singularly..., Questioning

Parenting Youth

Household and Person Breakdown

Total Number of Parenting Youth Households	3
Total Number of Persons in Parenting Youth Households	6
Total Parenting Youth	3
Total Children in Parenting Youth Households	3
Number of Parenting Youth Under 18	0
Children in Households with Parenting Youth Under 18	0
Number of Parenting Youth 18 to 24	3
Children in Households with Parenting Youth 18 to 24	3

Gender

Female	3
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	3

Race
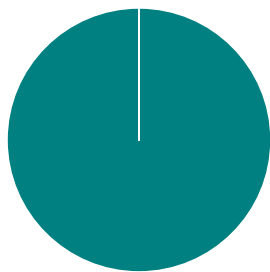
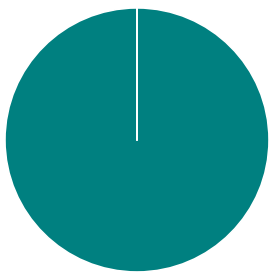|	
White	3
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race

- ■ White
- ■ Black or African American
- ■ Asian
- ■ American Indian
- ■ Native Hawaiian
- ■ Multiple

Gender

- ■ Female
- ■ Male
- ■ Transgender
- ■ A gender other than singularly...
- ■ Questioning

Additional Homeless Populations (Adults Only)

Serious Mental Illness	15
Substance Use Disorder	21
HIV/AIDS	1
Survivors of Domestic Violence (optional)	18

Adults with Condition   Adults without Condition
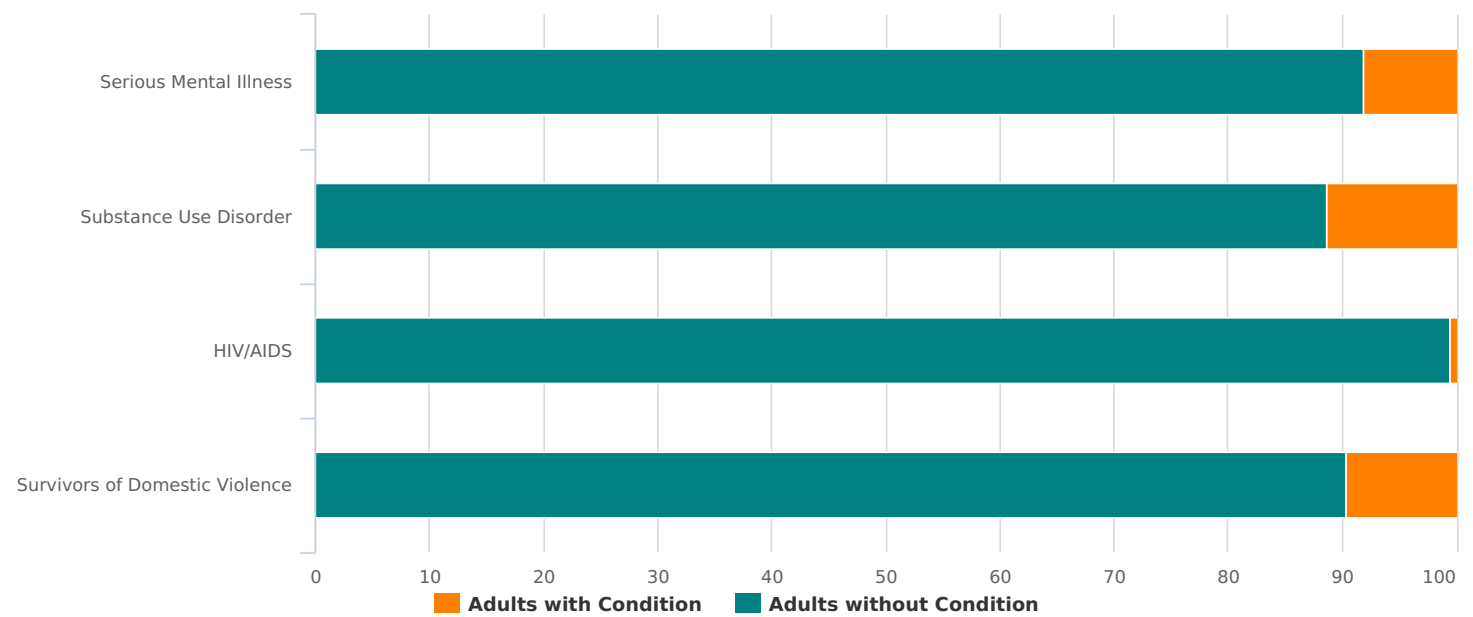
HUD Point in Time Report - Unsheltered

Count:	**Texas Balance of State 2022 PIT Count**	Geography:	**Laredo**
Created by:	**Paredes,Alex**	Created on:	**04/20/2022 12:24 PM**

Summary
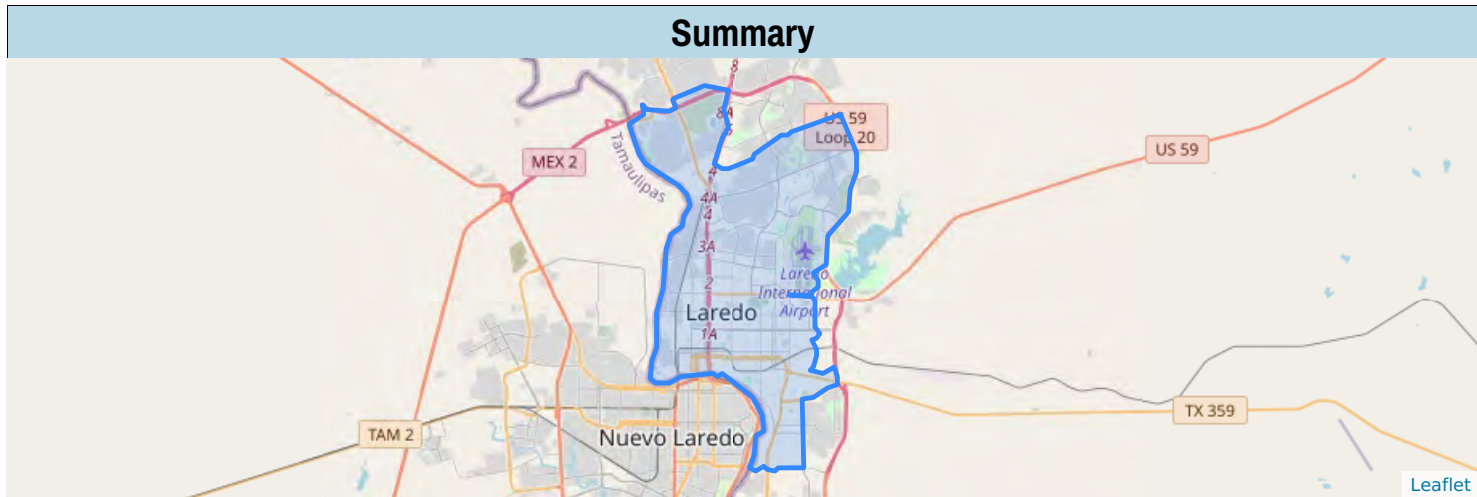
Total Persons	116
Adults (age 18 or older)	114
Young Adults (age 18 to 24)	3
Children (under age 18)	2
Unknown Age	0
Unknown Age - Believe to be Adult	0
Unknown Age - Believe to be Young Adult (18-24)	0
Unknown Age - Believe to be Adult (25+)	0
Unknown Age - Believe to be Child	0
Chronically Homeless	23
Veterans	0
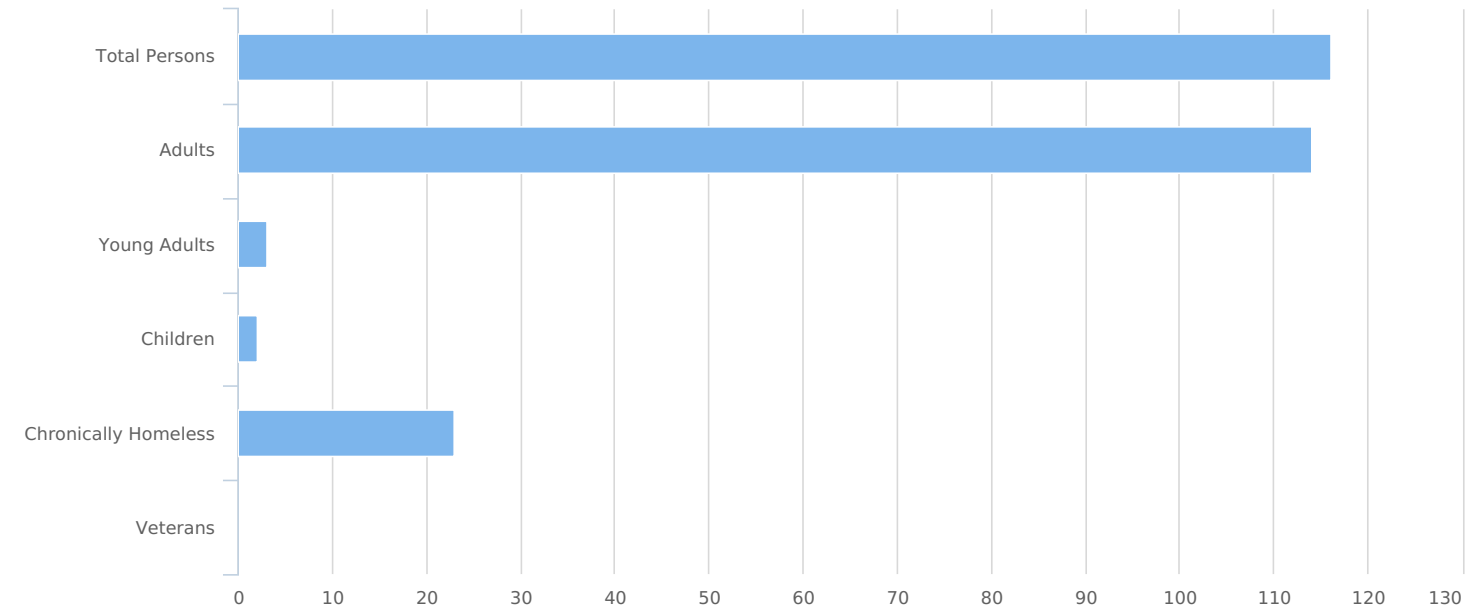
Data Quality Checks

Persons Missing Age Information	0
Persons Missing Sleeping Location	0
Persons Missing Gender	71
Persons Missing Ethnicity	71
Persons Missing Race	71
Persons Missing Relation to HoH	0
Persons with Unknown Household Type	0
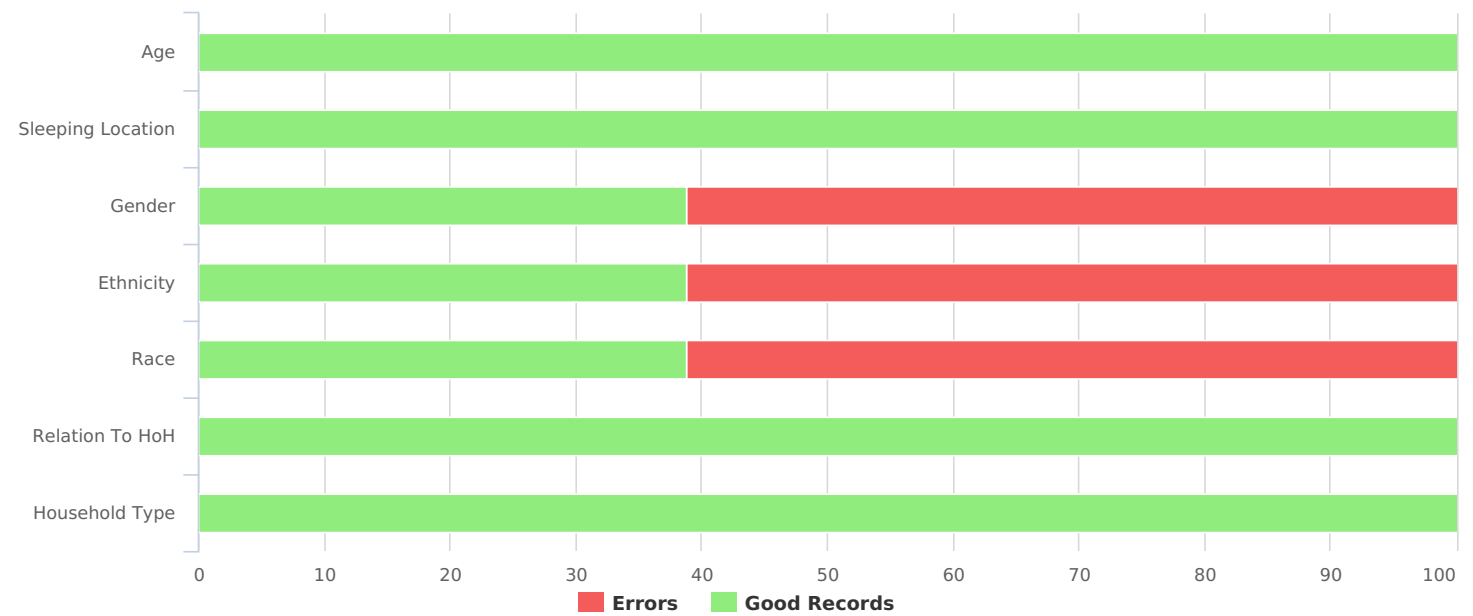
Errors   Good Records

All Households

Households with at Least one Adult and One Child

Household and Person Breakdown

Total Number of Households	0
Total Number of Persons	0
Number of Children (under age 18)	0
Number of Young Adults (age 18 to 24)	0
Number of Adults (age 25 or older)	0

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race

Gender

White   Black or African American   Asian   Female   Male   Transgender
American Indian   Native Hawaiian   Multiple   A gender other than singularly...   Questioning

Households without Children

Household and Person Breakdown

Total Number of Households	113
Total Number of Persons	114
Number of Young Adults (age 18 to 24)	3
Number of Adults (age 25 or older)	111

Gender

Female	11
Male	34
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

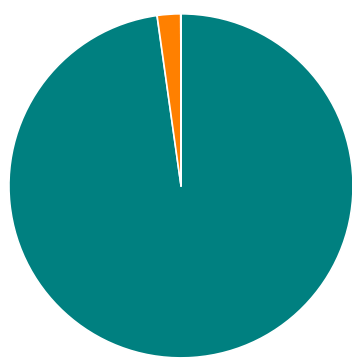|	
Non-Hispanic/Non-Latin(a)(o)(x)	8
Hispanic/Latin(a)(o)(x)	37

Race

White	44
Black, African American or African	1
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Persons	23

Race

Gender

Legend — Race: White, Black or African American, Asian, American Indian, Native Hawaiian, Multiple
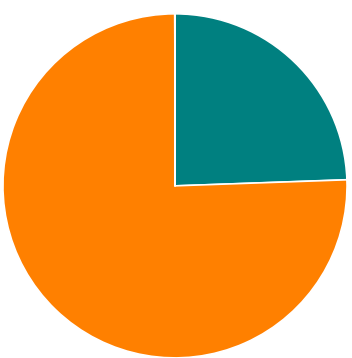
Legend — Gender: Female, Male, Transgender, A gender other than singularly..., Questioning

Households with Only Children

Household and Person Breakdown

Total Number of Households	2
Total Number of Children	2

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Persons	0

Race   Gender

White   Black or African American   Asian   Female   Male   Transgender
American Indian   Native Hawaiian   Multiple   A gender other than singularly...   Questioning

Veteran Households

Veteran Households with at Least One Adult and One Child

Household and Person Breakdown

Total Number of Households	0
Total Number of Persons	0
Total Number of Veterans	0

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race   Gender

■ White   ■ Black or African American   ■ Asian   ■ Female   ■ Male   ■ Transgender
■ American Indian   ■ Native Hawaiian   ■ Multiple   ■ A gender other than singularly...   ■ Questioning

Veteran Households without Children

Household and Person Breakdown

Total Number of Households	0
Total Number of Persons	0
Total Number of Veterans	0

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

|	
Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race	Gender

■ White ■ Black or African American ■ Asian   ■ Female ■ Male ■ Transgender
■ American Indian ■ Native Hawaiian ■ Multiple   ■ A gender other than singularly... ■ Questioning

Youth Households

Unaccompanied Youth Households

Household and Person Breakdown

Total Number of Unaccompanied Youth Households	5
Total Number of Unaccompanied Youth	5
Total Number of Unaccompanied Youth (under age 18)	2
Total Number of Unaccompanied Youth (18 to 24)	3

Gender

Female	1
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	1

Race

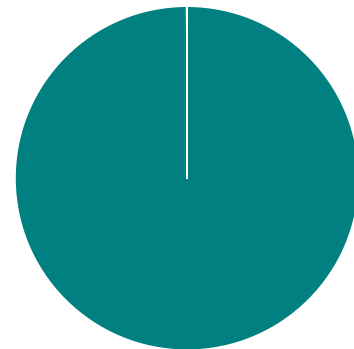|	
White	1
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Persons	1

Race	Gender
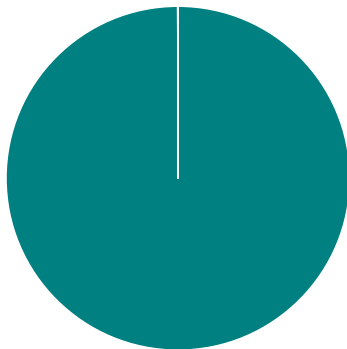
Race pie chart legend: White, Black or African American, Asian, American Indian, Native Hawaiian, Multiple

Gender pie chart legend: Female, Male, Transgender, A gender other than singularly..., Questioning

Parenting Youth

Household and Person Breakdown

Total Number of Parenting Youth Households	0
Total Number of Persons in Parenting Youth Households	0
Total Parenting Youth	0
Total Children in Parenting Youth Households	0
Number of Parenting Youth Under 18	0
Children in Households with Parenting Youth Under 18	0
Number of Parenting Youth 18 to 24	0
Children in Households with Parenting Youth 18 to 24	0

Gender

Female	0
Male	0
Transgender	0
A gender other than singularly female or male (e.g., nonbinary, genderfluid, agender, culturally specific gender)	0
Questioning	0

Ethnicity

Non-Hispanic/Non-Latin(a)(o)(x)	0
Hispanic/Latin(a)(o)(x)	0

Race

White	0
Black, African American or African	0
Asian	0
American Indian, Alaska Native, or Indigenous	0
Native Hawaiian or Pacific Islander	0
Multiple Races	0

Chronically Homeless

Total Number of Households	0
Total Number of Persons	0

Race

Gender

Additional Homeless Populations (Adults Only)

Serious Mental Illness	17
Substance Use Disorder	21
HIV/AIDS	1
Survivors of Domestic Violence (optional)	10

Legend: Adults with Condition, Adults without Condition
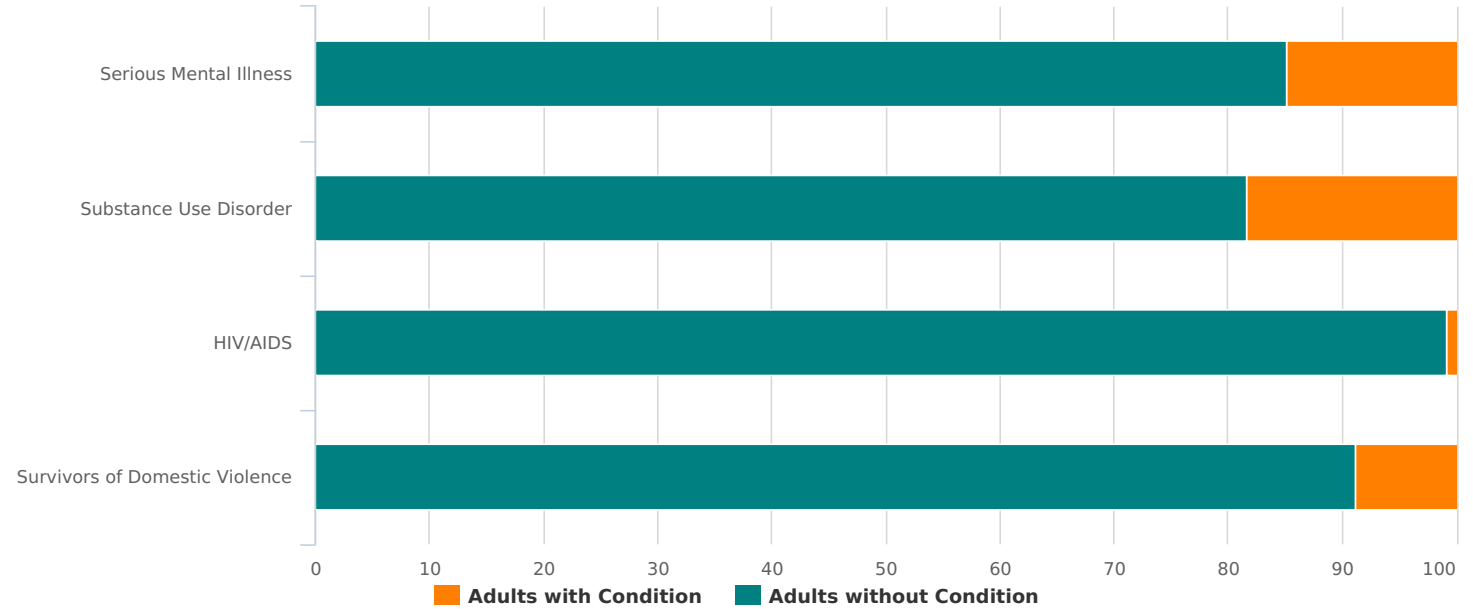
Appendix 5:

Continuum of Care Housing Inventory Count (HIC)

Continuum of Care Housing Inventory Count (HIC)

Year	Proj. Type	Organization Name	Project Name	Community	County	HMIS-Participating	Use HMIS-comparable database	Inventory Type	Victim Service Provider	Target Population	Beds (Households w/ Children)	Units (Households w/ Children)	Beds (Households w/o Children)	Beds (Households w/ only Children)	Veteran Beds (Households w/ Children)	Youth Beds (Households w/ Children)	Chronic Homeless Beds (Households w/ Children)	Veteran Beds (Households w/o Children)	Youth Beds (Households w/o Children)	Chronic Homeless Beds (Households w/o Children)	Chronic Homeless Beds (Households w/ only Children)	Year-Round Beds
2022	Emergency Shelter	Bethany House	Bethany House ES for men	Laredo	Webb County	Yes		Current	No	NA	0	0	48	0	0	0		0	0			48
2022	Emergency Shelter	Bethany House	Bethany House ES for women	Laredo	Webb County	Yes		Current	No	NA	0	0	22	0	0	0		0	0			22
2022	Transitional Housing	Bethany House	BH Transitional Housing	Laredo	Webb County	Yes		Current	No	NA	71	17	5	0	0	0		0	0			76
2022	Rapid Re-Housing	Bethany House	ESG-CV/CC/RRH	Laredo	Webb County	Yes		Current	No	NA	5	4	2	0	0	0		0	0			7
2022	Rapid Re-Housing	Bethany House	ESG/CC/RRH	Laredo	Webb County	Yes		Current	No	NA	6	2	0	0	0	0		0	0			6
2022	Rapid Re-Housing	Endeavors, Inc.	Laredo RRH SSVF	Laredo	Webb County	Yes		Current	No	NA	0	0	1	0	0	0		1	0			1
2022	Rapid Re-Housing	Housing Authority of Laredo	CoC RRH	Laredo	Webb County	Yes		Current	No	NA	42	17	9	0	0	0		0	0			51
2022	Permanent Supportive Housing	Housing Authority of Laredo	HUD VASH	Laredo	Webb County	No		Current	No	NA	2	2	20	0	2	0	0	20	0	0	0	22
2022	Other Permanent Housing	Housing Authority of Laredo	PH| EHV	Laredo Housing Authority	Laredo	Webb County	No		Current	No	NA	23	23	62	0	0	0		0	0			85
2022	Emergency Shelter	Mercy Ministries of Laredo	Casa de Misericordia	Laredo	Webb County	No	Yes	Current	Yes	Domestic Violence Survivors	35	7	5	0	0	0		0	0			40
2022	Transitional Housing	SCAN	Arco Iris TLP	Laredo	Webb County	Yes		Current	No	NA	0	0	12		0	0		0	12			12
2022	Emergency Shelter	SCAN	Emergency Shelter	Laredo	Webb County	Yes		Current	No	NA			8	0	0		0	0			8
2022	Rapid Re-Housing	SCAN	ESG-CV RRH	Laredo	Webb County	Yes		Current	No	NA	0	0	0	0	0	0		0	0			0
2022	Emergency Shelter	The Holding Institute	ESG Emergency Shelter	Laredo	Webb County	Yes		Current	No	NA	30	4	90	0	0	0		0	0			120
2022	Rapid Re-Housing	The Salvation Army of Laredo	RRH	Laredo	Webb County	No		Current	No	NA	0	0	0	0	0	0		0	0			0
2022	Emergency Shelter	The Salvation Army of Laredo	Salvation Army Laredo	Laredo	Webb County	No		Current	No	NA	0	0	13	0	0	0		0	0			13

Appendix 6:

Comprehensive Housing Affordability (CHAS)

Comprehensive Housing Affordability Strategy ("CHAS") data

Income Distribution Overview	Owner	Renter	Total
Household Income less-than or= 30% HAMFI	3,125	6,895	10,020
Household Income >30% to less-than or= 50% HAMFI	2,805	4,000	6,805
Household Income >50% to less-than or= 80% HAMFI	3,645	3,975	7,620
Household Income >80% to less-than or=100% HAMFI	2,170	1,700	3,870
Household Income >100% HAMFI	12,380	5,100	17,480
Total	24,130	21,665	45,795
Housing Problems Overview 1	Owner	Renter	Total
Household has at least 1 of 4 Housing Problems	7,520	11,735	19,255
Household has none of 4 Housing Problems OR cost burden not available, no other problems	16,610	9,925	26,535
Total	24,130	21,665	45,795
Severe Housing Problems Overview 2	Owner	Renter	Total
Household has at least 1 of 4 Severe Housing Problems	4,555	7,655	12,210
Household has none of 4 Severe Housing Problems OR cost burden not available, no other problems	19,575	14,005	33,580
Total	24,130	21,665	45,795
Housing Cost Burden Overview 3	Owner	Renter	Total
Cost Burden less-than or= 30%	17,885	10,505	28,390
Cost Burden >30% to less-than or= 50%	3,315	4,810	8,125
Cost Burden >50%	2,585	5,160	7,745
Cost Burden not available	345	1,200	1,545
Total	24,130	21,665	45,795
Income by Housing Problems (Owners and Renters)	Household has at least 1 of 4	Household has none of 4 Housing Problems	Total

	Housing Problems	OR cost burden not available, no other problems	
Household Income less-than or= 30% HAMFI	7,450	2,570	10,020
Household Income >30% to less-than or= 50% HAMFI	5,125	1,680	6,805
Household Income >50% to less-than or= 80% HAMFI	3,505	4,110	7,620
Household Income >80% to less-than or= 100% HAMFI	1,150	2,720	3,870
Household Income >100% HAMFI	2,025	15,455	
Total	19,255	26,535	45,795
Income by Housing Problems (Renters only)	Household has at least 1 of 4	Household has none of 4 Housing Problems	Total
	Housing Problems	OR cost burden not available, no other problems	
Household Income less-than or= 30% HAMFI	5,195	1,700	6,895
Household Income >30% to less-than or= 50% HAMFI	3,480	520	4,000
Household Income >50% to less-than or= 80% HAMFI	2,055	1,915	3,975
Household Income >80% to less-than or= 100% HAMFI	460	1,240	1,700
Household Income >100% HAMFI	545	4,555	5,100
Total	11,735	9,925	21,665
Income by Housing Problems (Owners only)	Household has at least 1 of 4	Household has none of 4 Housing Problems	Total
	Housing Problems	OR cost burden not available, no other problems	
Household Income less-than or= 30% HAMFI	2,255	870	3,125
Household Income >30% to less-than or= 50% HAMFI	1,645	1,160	2,805
Household Income >50% to less-than or= 80% HAMFI	1,450	2,195	3,645
Household Income >80% to less-than or= 100% HAMFI	690	1,480	2,170

Household Income >100% HAMFI	1,480	10,900	12,380
Total	7,520	16,610	24,130

Income by Cost Burden (Owners and Renters)	Cost burden > 30%	Cost burden > 50%	Total
Household Income less-than or= 30% HAMFI	7,055	5,630	10,020
Household Income >30% to less-than or= 50% HAMFI	4,755	1,550	6,805
Household Income >50% to less-than or= 80% HAMFI	2,460	340	7,620
Household Income >80% to less-than or= 100% HAMFI	655	45	3,870
Household Income >100% HAMFI	940	175	17,480
Total	15,865	7,745	45,795

Income by Cost Burden (Renters only)	Cost burden > 30%	Cost burden > 50%	Total
Household Income less-than or= 30% HAMFI	4,875	4,045	6,895
Household Income >30% to less-than or= 50% HAMFI	3,275	935	4,000
Household Income >50% to less-than or= 80% HAMFI	1,500	145	3,975
Household Income >80% to less-than or= 100% HAMFI	240		1,700
Household Income >100% HAMFI	80	35	5,100
Total	9,970	5,160	21,665

Income by Cost Burden (Owners only)	Cost burden > 30%	Cost burden > 50%	Total
Household Income less-than or= 30% HAMFI	2,180	1,585	3,125
Household Income >30% to less-than or= 50% HAMFI	1,480	615	2,805
Household Income >50% to less-than or= 80% HAMFI	965	200	3,645
Household Income >80% to less-than or= 100% HAMFI	415	45	2,170
Household Income >100% HAMFI	860	140	12,380
Total	5,900	2,585	24,130

1. The four housing problems are: incomplete kitchen facilities, incomplete plumbing facilities, more than 1 person per room, and cost burden greater than 30%.
2. The four severe housing problems are: incomplete kitchen facilities, incomplete plumbing facilities, more than 1 person per room, and cost burden greater than 50%.
3. Cost burden is the ratio of housing costs to household income. For renters, housing cost is gross rent (contract rent plus utilities). For owners, housing cost is "select monthly owner costs", which includes mortgage payment, utilities, association fees, insurance, and real estate taxes.

Appendix 7:

American Community Survey (ACS)

United States®
Census
Bureau

QuickFacts

Laredo city, Texas

QuickFacts provides statistics for all states and counties, and for cities and towns with a *population of 5,000 or more*.

Table

All Topics ▼	Laredo city, Texas
Population Estimates, July 1 2022, (V2022)	⚠ NA
👤 **PEOPLE**	
Population	
Population Estimates, July 1 2022, (V2022)	⚠ NA
Population Estimates, July 1 2021, (V2021)	⚠ 256,153
Population estimates base, April 1, 2020, (V2022)	⚠ NA
Population estimates base, April 1, 2020, (V2021)	⚠ 255,181
Population, percent change - April 1, 2020 (estimates base) to July 1, 2022, (V2022)	⚠ NA
Population, percent change - April 1, 2020 (estimates base) to July 1, 2021, (V2021)	⚠ 0.4%
Population, Census, April 1, 2020	255,205
Population, Census, April 1, 2010	236,091
Age and Sex	
Persons under 5 years, percent	⚠ 8.9%
Persons under 18 years, percent	⚠ 32.6%
Persons 65 years and over, percent	⚠ 9.3%
Female persons, percent	⚠ 50.7%
Race and Hispanic Origin	
White alone, percent	⚠ 68.0%
Black or African American alone, percent (a)	⚠ 0.4%
American Indian and Alaska Native alone, percent (a)	⚠ 0.2%
Asian alone, percent (a)	⚠ 0.5%
Native Hawaiian and Other Pacific Islander alone, percent (a)	⚠ 0.0%
Two or More Races, percent	⚠ 26.7%
Hispanic or Latino, percent (b)	⚠ 95.5%
White alone, not Hispanic or Latino, percent	⚠ 3.2%
Population Characteristics	
Veterans, 2017-2021	5,473
Foreign born persons, percent, 2017-2021	25.2%
Housing	
Housing units, July 1, 2021, (V2021)	X
Owner-occupied housing unit rate, 2017-2021	62.2%
Median value of owner-occupied housing units, 2017-2021	$147,700
Median selected monthly owner costs -with a mortgage, 2017-2021	$1,498
Median selected monthly owner costs -without a mortgage, 2017-2021	$532
Median gross rent, 2017-2021	$902
Building permits, 2021	X
Families & Living Arrangements	
Households, 2017-2021	72,692
Persons per household, 2017-2021	3.46
Living in same house 1 year ago, percent of persons age 1 year+, 2017-2021	89.2%
Language other than English spoken at home, percent of persons age 5 years+, 2017-2021	89.7%
Computer and Internet Use	
Households with a computer, percent, 2017-2021	89.9%
Households with a broadband Internet subscription, percent, 2017-2021	78.1%
Education	
High school graduate or higher, percent of persons age 25 years+, 2017-2021	69.7%
Bachelor's degree or higher, percent of persons age 25 years+, 2017-2021	20.0%
Health	
With a disability, under age 65 years, percent, 2017-2021	8.6%

Persons without health insurance, under age 65 years, percent	⚠ 30.8%

Economy

In civilian labor force, total, percent of population age 16 years+, 2017-2021	61.9%
In civilian labor force, female, percent of population age 16 years+, 2017-2021	53.5%
Total accommodation and food services sales, 2017 ($1,000) (c)	D
Total health care and social assistance receipts/revenue, 2017 ($1,000) (c)	D
Total transportation and warehousing receipts/revenue, 2017 ($1,000) (c)	2.991.630
Total retail sales, 2017 ($1,000) (c)	3,357,240
Total retail sales per capita, 2017 (c)	$12,962

Transportation

Mean travel time to work (minutes), workers age 16 years+, 2017-2021	21.0

Income & Poverty

Median household income (in 2021 dollars), 2017-2021	$55,603
Per capita income in past 12 months (in 2021 dollars), 2017-2021	$21,193
Persons in poverty, percent	⚠ 22.2%

🏭 BUSINESSES

Businesses

Total employer establishments, 2020	X
Total employment, 2020	X
Total annual payroll, 2020 ($1,000)	X
Total employment, percent change, 2019-2020	X
Total nonemployer establishments, 2019	X
All employer firms, Reference year 2017	4,802
Men-owned employer firms, Reference year 2017	2,817
Women-owned employer firms, Reference year 2017	731
Minority-owned employer firms, Reference year 2017	3,126
Nonminority-owned employer firms, Reference year 2017	1,012
Veteran-owned employer firms, Reference year 2017	S
Nonveteran-owned employer firms, Reference year 2017	4,004

🌐 GEOGRAPHY

Geography

Population per square mile, 2020	2,396.5
Population per square mile, 2010	2,655.4
Land area in square miles, 2020	106.49
Land area in square miles, 2010	88.91
FIPS Code	4841464

Appendix 8:

Homelessness Needs Assessment and Action Steps

Homelessness Needs Assessment and Action Steps
for
The City of Laredo

~~ ~~ ~~

Presentation of Observations, Findings
and
Recommendation of Strategic Action Steps

by

Marbut Consulting

~~ ~~ ~~

Presentation to the Laredo City Council - August 1, 2022

Final Written Report - August 15, 2022

Prepared by Robert G. Marbut Jr., Ph.D.

Table of Contents

Study Scope

The City of Laredo procured the services of Marbut Consulting to conduct a Homelessness Services Needs Assessment and to develop Strategic Action Step Recommendations to improve service delivery in order to help reduce homelessness within Laredo.

In order to develop practical recommendations, Marbut Consulting:
- conducted a wide range of interviews with stakeholders,
- conducted a series of site visits and tours of service providing agencies,
- interviewed individuals experiencing homelessness,
- studied and inventoried homeless services throughout Laredo and Webb County,
- analyzed statistics and reports from local agencies,
- made street-level observations,
- posed as a person experiencing homelessness in order to understand what it is like to be homeless in this area and to better understand the movement and circulation of the homelessness community.

Using national best practices and the *Seven Guiding Principles of Homeless Transformation* as the key measuring tools, Marbut Consulting evaluated the current state of homelessness service operations within Laredo, including conducting an extensive survey of people experiencing homelessness. Marbut Consulting then conducted a needs assessment and gaps analysis between existing inventory and identified needs, including the types of services (qualitative) and capacity of services (quantitative) needed within Laredo. Dr. Robert Marbut formally started in Laredo on February 9, 2022 and finished this study and written report on August 15, 2022.

Scope-of-Work: Key Activities, Work Products and Timeline

Based on prior work in dozens of other communities, Marbut Consulting conducted the following activities.

Some of these stages and phases ran in sequence, while other stages and phases overlapped. Throughout these stages and phases, homelessness was observed from a variety of vantage points: individuals experiencing homelessness, families with children experiencing homelessness, agency staff, volunteers, upstream funders, government officials, civic community leaders, businesses, the media and the general public.

Stage 1 - Inventoried and Conducted Research

Phase 1 - Inventoried Current Services:
    In coordination with Tina Martinez (the assigned City of Laredo liaison), Marbut Consulting

inventoried and ascertained information about the types (qualitative) and volume (quantitative capacity) of services being provided within Laredo, and when appropriate Webb County. This also included inventorying formal and informal policies throughout the County. This included in-person site visits of all services and service points as well as interviews and focus groups with all service providers and key stakeholders throughout Laredo in order to inventory the "types" and "volume" of services. Specifically, the Consultant performed in-person site visits and interviews of homelessness services in order to:
- analyze the coordinated entry system,
- inventory of shelter services, beds and mat units,
- inventory of transitional, recovery and long-term services,
- inventory of types and volume of supportive services (quantity and qualitative),
- inventory of preventative services,
- identify service pinch-points and segue gaps.

Throughout the different Phases of this process, Marbut Consulting participated in group and individual meetings with key community stakeholders and partners in order to solicit their input, and to garner their buy-in of the Strategic Action Steps. Discussions with key stakeholders and partners were critical in order to improve the study, promote buy-in and deepen partnerships.

Phase 2 - Data Analysis of PITCs and HMIS + Field Observations and Surveys:
Marbut Consulting conducted a data analysis of the recent Point-in-Time-Count (PITC) compared to earlier PITCs. The Consultant also reviewed Homeless Management Information System data and reports of homelessness service providing agencies. Additionally, in coordination with the City of Laredo, Marbut Consulting conducted a series of field observations analyzing flow and movement patterns which included Dr. Marbut "being homeless" on the streets within Laredo. Based on these findings, with help of the City of Laredo, Marbut Consulting drafted and conducted an in-the-field data survey of individuals and families experiencing "street-level homelessness" (eg individuals living on the street, in shelters and in encampments). Field observations and surveys were used to better understand the unique local causes and triggers of homelessness within Laredo and Webb County, which informed the Strategic Action Steps.

Phase 3 - Gaps and Duplication Data Analysis/Assessment:
Based on the agency interviews, site visits, street-level observations, Point-in-Time-Count data, Homeless Management Information System reports, agency reports and the customized Laredo survey data (*which was focused uniquely on Laredo issues and not on national issues*), Marbut Consulting conducted a needs assessment of the types of services (qualitative) and capacity of services (quantitative) needed in Laredo, and when appropriate Webb County. This included conducting a gap and duplication analysis of services between existing inventory and identified needs.

Phase 4 - Master Functionality Assessment Study:
In conjunction with Phase 3 above, Marbut Consulting conducted a "strategic-higher-level" master functionality assessment study of the gaps and missing services within the context of the overall Continuum of Care (CoC). A "functionality assessment study" was critical in order to assure cost effective and affective strategic action steps, and to ascertain what is needed to assure long-term success. Using national data and best practices, this sub-study synthesized missing types of services, quantity of service gaps, demand:supply ratios, service proximity data, and downstream data (eg traditional housing, permanent supportive housing and housing first), which in turn "informed" the functional strategic action steps. Having an accurate understanding of the functional needs was necessary in order to understand the scope, scale and structure of the overall system.

Toward the end of Phase 4, Dr. Marbut conducted several oral presentations of the preliminary data analyses and base findings at public forums with key stakeholders and community partners. All forums had an extensive Q&A sessions.

NOTE: The failure to conduct a thoughtful "functionality study" before developing strategic action steps is one of the biggest mistakes most communities make.

Stage 2 - Synthesized Public and Stakeholder Input

Phase 5 - Led the Strategic Framing of Critical Issues and Initiatives:
With input and guidance from the City of Laredo and as part of the strategic development process to create a shared vision and to encourage community "buy-in," Marbut Consulting strategically framed action steps in order to develop sound action steps. The focus was to develop customized bold strategies and impactful solutions to significantly reduce homelessness within Laredo. This required the Consultant to conduct in person meetings with officials from local government, elected bodies, funders, businesses, faith-based entities, non-profits, civic groups, service providers, educational groups and other agencies. This framing process included the input of key stakeholders and community partners. It also included interrelated-system partners from the criminal justice, health care and mental/behavioral health systems.

Stage 3 - Developed Strategic Action Steps

Phase 6 - Draft Strategic Action Steps:
Marbut Consulting, with input and guidance from The City of Laredo drafted Strategic Action Steps based on national and emerging best practices that are grounded within identified local needs, gaps and opportunities. These action steps were informed by input of key stakeholders and community partners. These strategic action steps include real-world strategic positioning of both qualitative (types of services) and quantitative (volume) needs within the overall CoC environment including critical functionalities and operating policies/protocols/procedures. The Strategic Action Steps include: outreach, engagement,

prevention, coordinated entry, crisis response, transitional services, rapid rehousing, permanent supportive housing, affordable housing, and other longer term housing issues.

Phase 7 - Key Partner and Stakeholder Comment Period:
As part of the "buy-in" efforts and to improve the overall study, Dr. Marbut presented critical elements of the Strategic Action Steps for comment to key stakeholders in a variety of one-on-one and group forums. This phase required Marbut Consulting to conduct numerous briefings of government staff members, elected officials, businesses, faith-based entities, civic groups, educational groups and service providing agencies.

Phase 8 - Public Presentation of FINAL Community Wide Strategic Action Plan:
Dr. Marbut formally presented his final report to the Laredo City Council on August 1, 2022. Additionally, a written "Final" Strategic Action Steps was delivered to the City of Laredo on August 15, 2022. These Strategic Action Steps provide a comprehensive roadmap to help prevent and reduce homelessness within Laredo, and when appropriate Webb County. Beyond these recommendations, this report includes key observations and data findings.

Notes About Scope-of-Work:
-   Many improvements "organically" materialized throughout the process, especially during the gap and duplication analysis phase. Marbut Consulting shared these improvement opportunities as they naturally arose throughout this "journey."

Major Observations and Findings

The Positives and the Opportunities

There is a tendency in such endeavors to focus on the negative rather than the positive. Therefore, before the challenges and gaps are addressed below, there are a couple of observations that bode well for Laredo regarding the state of homelessness within the greater Laredo community that this researcher would like to share:

- Most everyone genuinely likes each other, and most everyone is connected somehow or someway.

- The homelessness service agencies within Laredo do so much with so little. Considering how under-resourced agencies are, it is amazing how much homelessness service providers have been able to accomplish.

The Negatives and the Challenges

There Is No "Formal System" of Coordination Among Service Providers: There is no strategic coordination and collaboration of services among homelessness service providers. What little coordination that exists among service providers is informal and ad-hoc, and is generally based on personal relationships.

Laredo Does Not Have the Right-size Inventory of Needed Services: There is a significant lack of services, especially considering how big the homelessness challenges are in Laredo. It is very important to note that because of the current significant lack of services (both in terms of quantity and types of services) the City of Laredo is non-compliant in terms of Martin vs. Boise.

Laredo Is Uniquely Located on a High Traffic North-South Corridor: Laredo is located on the high trafficked IH-35 North-South Corridor, which means there is a constant inflow of people experiencing homelessness, especially coming from the north. Even though Laredo is a relatively small community, it deals with the big city challenges of homelessness. It is important to note that because of weather conditions and seasonal changes, North-South corridors generally have significantly higher levels of individuals experiencing homelessness passing through than East-West corridors experience.

The Greater Laredo Community Lacks a Critical Mass of Non-profit and Private Funding to Cost Effectively Operate "Right-sized" Comprehensive Holistic Programs: Laredo lacks non-profit and private sector financial resources necessary to cost effectively operate comprehensive holistic treatment, recovery and engagement activities for individuals and families experiencing homelessness. Put simply, Laredo has big-city homelessness challenges,

but has small-community non-profit resources. In order to be successful, public sector funding will be necessary to fill the gap.

There Is a Lack of Free Substance Abuse and Mental Health Treatment Slots/Beds in Laredo: The root triggers and causes of homelessness most often is untreated mental illness with co-presenting substance use disorders. In order to engage in meaningful recovery, the focus must be on the root triggers of homelessness, not symptoms. There is a need in Laredo for more free mental health and substance abuse treatment slots/beds of all lengths of time.

The Amount of Housing Placements is Low: Because of a low inventory of affordable housing and relatively high occupancy rates, housing placements are very low relative to the need. Like most of the USA, there is a critical need of "transitional" units (eg 6-24 month residential stays) as well as "permanent supportive housing" (eg 2 years or longer time frames). Study beyond the scope of this project is needed to determine a precise number of housing units needed for Webb County.

The Major Subgroups of Homelessness in Laredo: Very seldom is the loss of a job the real root cause trigger of homelessness, likewise very seldom does securing a job alone reverses the cycle homelessness. The cycle of homelessness is a multi-faceted process that starts with a trigger, and devolves through the loss of credit worthiness, credit cards, connections with friends and families, jobs, housing, vehicles, etc. Below is a list of the major demographic sub-groups of homelessness in Laredo:
- Out-of-town Single Adult Males (untreated mental illness who travel to Laredo),
- Homegrown Single Adult Females (domestic violence),
- Homegrown Single Adult Males (untreated mental illness with co-presenting substance use disorders)
- Families with Children (domestic violence),
- Families with Children (divorce economics),
- Chronic (1-5 years on the street with untreated mental illness and co-presenting substance use disorders) and Super Chronic (5 years or more on the street with untreated mental illness and co-presenting substance use disorders).

Dehydration, Poor Nutrition and Sleep Deprivation Exacerbate the Homelessness Condition:
Mental Health, behavioral health and substance use disorder issues are all exacerbated by dehydration, poor nutrition and sleep deprivation. Individuals experiencing "street-level" homelessness often do not drink enough water since it is hard to find a public restroom and they do not want to be hassled for going to the bathroom in public. Additionally, individuals and families with children experiencing homelessness seldom eat well-balanced meals since it is much cheaper to prepare high-sugar and high-carbohydrate meals. Finally, most individuals and families experiencing homelessness have less than ideal sleeping arrangements which leads to severe sleep deprivation for many individuals. Unfortunately, many individuals experiencing homelessness experience all three of these exacerbating factors at the same time (eg dehydration, poor nutrition and sleep deprivation) which makes treatment and recovery even more challenging.

At a Policy Level, Compared to Other Communities, the Homelessness Situation Is Currently More Manageable in Laredo: A series of targeted investments would have a huge positive impact in terms of the overall outcomes. Furthermore, smartly targeted investments could actually save unnecessary spending within the criminal justice and medical systems.

A Note on Current Child Research - It is Very Negative to Mix Children with Single Adults: This researcher observed commingling of young children with non-family single adult males and females experiencing chronic homelessness in plazas and at Bethany House. This is very harmful to the future development of the children, and presents many unnecessary risks and liabilities to the service providing agencies.

Over the last 20 years, a new body of research has emerged that has been studying the long-term neurobiological and physiological impacts of exposure to adverse experiences during childhood. These "toxic stress" experiences are called "Adverse Childhood Experiences" (ACEs). The groundbreaking study in this research area was *Adverse Childhood Experiences Study (ACE Study)* and was led by California researchers Dr. Vincent Felitti and Dr. Robert Anda, and surveyed more than 17,000 adults. What they and others have found is having a high number of Adverse Childhood Experiences (eg traumatic experiences) during the most formative period of a person's life can have a highly negative impact on a child's developing brain and body, and this negative impact can last a lifetime.

There are 10 specific formally recognized ACEs that a child can be exposed to during childhood. See the *Data Report - A Hidden Crisis: Findings on Adverse Childhood Experiences in California* by The Center for Youth Wellness for more information.

It is thus highly problematic to mix non-family adult males who are experiencing homelessness with children since these children are exposed on an average to many more ACEs than children in the general population. In terms of the overall general population, 83.3% of the general population had 3 or less ACEs, and 60.0% of the general population had 0 or 1 ACEs in their childhood. Whereas, children that are commingled with adult males experiencing homelessness will likely experience at least 4 ACEs on a daily basis (eg exposure to individuals with mental illness, to individuals with substance abuse, to people who have been incarcerated, etc.). It is important to note that the research has found that having 4 or more ACEs is the critical tipping point between good outcomes and poor outcomes over a lift-time.

People who were exposed to 4 or more ACE's during their childhood had the following increased serious health and behavioral conditions compared to individuals who were exposed to 3 or less ACEs (partial listing of negative outcomes):
- 12.2 times as likely to attempt suicide,
- 10.3 times as likely to use injectable drugs,
- 7.4 times as likely to be an alcoholic,
- 5.1 times as likely to suffer from depression,
- 2.9 times as likely to smoke,

- 2.4 times as likely to have a stroke,
- 2.2 times as likely to have ischemic heart disease,
- 1.9 times as likely to have cancer,
- 1.6 times as likely to have diabetes,
- 39% more likely to be unemployed.

Survey Data Results and Analyses of Street-level Homelessness

Based on interviews of stakeholders within Webb County, street-level observations within Webb County, anecdotal information and surveys by this researcher in other communities, a detailed data survey was developed by this researcher. Surveys were then administered at Bethany House, feeding sites, on the streets, in plazas and in encampments. Surveys were administered during March 2022 by volunteers and Laredo City Staff members.

It is very important to note that the focus of this data survey was on the "street-level" community of homelessness that lives and/or sleeps on the streets, under bridges, in drainage ditches, within encampments and in parks. The individuals within this cohort are relatively high users of emergency services and have high contact rates with law enforcement.

Unlike the Point-in-Time-Count, this survey instrument was specifically designed to focus on issues relating to individuals experiencing street-level homelessness within the City of Laredo and Webb County. It is important to note that PITC is designed to address HUD oriented issues. Finally, PITCs often ask questions in ways that "undershoot" real-life durations/timelines of homelessness and thus miss what is actually going on in the real world (eg the PITC misses some of the major underlying issues because it is not statistically sensitive enough to detect the real issues). Taking all these issues together (eg multiple unrelated sub-groups, narrow questions, "undershooting," etc.), PITC results often "mask" what is really going on within the narrower sub-population of street-level homelessness.

By focusing clearly on individuals experiencing street-level homelessness, we are able to have a higher level of clarity and a more robust understanding of what is really going on with the group of individuals experiencing street-level homelessness. The following is aggregated data from the surveys:

Gender:
 Males represent 74.3% and females represent 25.7% of the surveyed street-level population experiencing homelessness. These percentages are very close to national percentages and percentages in comparable communities.

Age:
 The average age for individuals experiencing street-level homelessness is 53.9 years old and the median age is 54 years old. The spread and direction between "average" and "median" are closer than would be expected. The overall average age is slightly higher and older than national averages.

Age Started Experiencing Homelessness:
 The average age of an individual starting to experience homelessness is an average of 47.7 years old, with a median age of 50.5. The median age is older than would be expected.

Chronicness Levels (Duration of Chronic Homelessness):
     In over simplified terms, HUD defines *chronic homelessness* as a person who has been living on the streets for more than 1 year. This researcher then adds two categorical definitions called *super chronic homelessness* and *very super chronically homelessness* which this researcher defines as individuals who have been experiencing homelessness for 5 or more years and 10 or more years respectively.

     Of all the individuals surveyed, the average total time experiencing homelessness was 6.3 years and the median was 3.0 years, both of which are relatively higher and longer compared to other communities.

     Broken down by length of time living on the street:
          6.8% . . . less than 1 year on the streets (HUD defined not chronic homelessness),
        93.2% . . . 1 or more years on the street (HUD defined chronic homelessness).
                    The 1+ years is very high.

        40.5% . . . 5 or more years on the street (super chronic homelessness),
        20.3% . . . 10 or more years on the street (very super chronic homelessness),
                    The 5+ years is on the higher end, whereas the 10+ years is closer to the average.

Length of Time Living in Laredo or Webb County:
     On an average, individuals experiencing street-level homelessness have lived in Webb County for 25.6 years, with a median of 22.0 years in Webb County. This is very high compared to other communities.

Family Living in Laredo or Webb County:
     Of all the individuals experiencing street-level homelessness, 55.4% have family members living in Webb County. When you add in family members who have passed-on who had been living in Webb County, the number moves up to 58.1%. Relative to other communities, local family connectivity is low.

Location of High School Attendance:
     43.2% attended High School somewhere in Webb County (high'ish),
     16.2% attended High School in Texas but not in Webb County (low),
     17.6% attended High School in the USA but not in Texas (low),
     23.0% attended High School in Mexico (very high).

Job History in Webb County Before Experiencing Homelessness:
     29.7% did not have a job in Webb County before experiencing homelessness (very low),
     47.3% had a full-time job before experiencing homelessness (about average),
     23.0% had a part-time job before experiencing homelessness (high),

     Relative to comparable communities, the individuals surveyed had better job employment histories.

Job History in Webb County After Experiencing Homelessness:
    83.8% did <u>not</u> have a job in Webb County before experiencing homelessness (high),
     2.7% had a full-time job before experiencing homelessness (extremely low),
    13.5% had a part-time job before experiencing homelessness (low'ish),

Homegrown vs. Out-of-Towner:
    43.2% went to high school in Laredo/Webb,
    58.1% have or had (passed on) family living in Laredo/Webb,
    64.9% started experiencing homelessness in Laredo/Webb,
    70.3% had a job in Laredo/Webb before experiencing homelessness (2:1 Full Time : Part Time).

This is on the higher end of being more homegrown . . . but is not overwhelming homegrown.

However, this does not explain the different views of different stakeholder groups about homegrown vs. out-of-towner ratios. The police and business owners predicted out-of-towners would be very high, whereas agency workers and volunteers predicted homegrown would be very high.

The difference in views can be reconciled based on a very pronounced gender gap in the data.

Homegrown vs. Out-of-Towner with a Male vs. Female Sub-tabs:

    47.3% overall were born in Laredo/Webb,
        41.8% of males vs. 63.2% of females were born in Laredo/Webb.

    43.2% overall went to high school in Laredo/Webb,
        38.2% of males vs. 57.9% of females went to high school in Laredo/Webb.

    58.1% overall have (living family) or had (family passed on) in Laredo/Webb,
        52.7% of males vs. 73.7% of females have/had family in Laredo/Webb.

This represents a 20.7 percentage point gender gap in homegrown vs. out-of-towner.
Females are much more homegrown, while males are much more likely to an out-of-towner.

Major Recommended Strategic Action Steps - Summary

1 - Bethany House Needs to Be Right-sized (eg Expanded), and Have the Right-types of Services.

2 - Create a Funding Pool for Root Cause Treatment and Recovery Programs.

3 - Create Customized Clinical Tracks Based on the Unique Needs for Laredo.

4 - Source New Housing Opportunities of All Types Whenever Possible, Especially Transitional Housing.

5 - Whenever Possible, Separate Families with Children from Non-family Single Adults.

6 - Establish Service Eligibility Criterion with Residency Criteria.

7 - After the Bethany House Expansion is Complete, Have a Zero Tolerance Approach to Encampments and Overnight Hanging Out in Plazas.

Major Recommended Strategic Action Steps - In Detail

1 - Bethany House Needs to Be Right-sized (eg Expanded), and Have the Right-types of Services

A glossary of Common Definitions of Homelessness Shelters and Centers:

Inclement Shelters - short-term intermittent facilities generally open 10-14 hours a day when "triggered" by extreme weather conditions like really high temperatures (105° or higher), really low temperatures (39° or lower), tornados, floods, hurricanes, etc.

Cooling or Warming Centers - short-term intermittent facilities generally open 10-14 hours a day when "triggered" by extremely high or low temperatures.

Summer and Winter Shelters - shelters operating over a finite period of time (usually 3-5 months depending on local weather conditions) . . . these shelters are generally open 10-14 hours a day, but are sometimes open 24/7/168.

Wet Shelters - facilities that allow on-site drinking, and sometimes on-site drug use.

Come-As-You-Are (CAYA) Shelters - sometimes called "Low Demand Shelters" or "Low Barrier Shelters," these types of facilities have minimal barriers to entry, and low demands on guests once inside facilities. CAYA can be applied to any of the above type of shelters. A CAYA facility is NOT the same as a "wet shelter" which does not allow on-site drinking and drug use.

Shelters (vs Homelessness Assistance Centers) - shelters have minimal services and focus on basic life safety services, and are seldom open 24/7/168/365.

Homelessness Assistance Centers, Navigation Centers and Transformational Centers (vs Shelters) - homelessness assistance, navigation and transformational centers have a wide-range of wrap-around trauma informed services and focus on exiting homelessness, and are generally open 24/7/168/365.

Bethany House Needs to Move from Being a "Shelter" to Becoming a "Transformational Center":

A "shelter" works to keeps a person alive by providing basic support services. Whereas a "transformational center" works to help people exit the condition of homelessness by providing robust, targeted and customized trauma informed care services.

Historically, for the majority of people experiencing homelessness in Laredo, Bethany House has operated as a traditional shelter providing the most basic of services (eg food, clothing and respite), and sometimes as an inclement shelter. Keeping a person alive is of the upmost

importance, but it is not enough if community wants to reduce the level of homelessness.

The ergonomic limitations of the existing Bethany House facility do not allow Bethany to provide robust trauma informed services for most of their guests. Additionally, the internal layout of the facility limits the number of homelessness cohorts that can be served at one time. Furthermore, the restricted layout creates many instances of commingling children with single adults (see the note above about the tragic results of commingling children with single adults - *A Note on Current Child Research - It is Very Negative to Mix Children With Single Adults*).

In order to reduce homelessness in Laredo, it is paramount that Bethany House be right-sized (eg expanded), and for the facility to be efficiently and effectively laid-out. Once right-sized and right-designed, Bethany House will be able to effectively provide the right-mix of critical trauma informed care services. It will also allow service partners to provide specialized care services on-site within the Bethany House facility.

Exhibit 1 below itemizes in detail the types of services that could ideally be provided at Bethany House on a full-time or part-time basis.

Bethany House Should Also Have an Adult Come-As-You-Are (CAYA) Courtyard On-site:

Almost everyone interviewed for this study stated there is a clear need for a year-round Come-As-You-Are (CAYA) facility. The EMS, police, clergy, hospital staff and general public all expressed a need for "a place or program" in which they can refer adults that are experiencing street-level homelessness.

The survey data also supports the need for a Come-As-You-Are facility. For clinical and operational efficiency reasons, it would be best to incorporate and co-locate a CAYA Courtyard within the Bethany House expansion.

2 - Create a Funding Pool for Root Cause Treatment and Recovery Programs

Root cause treatment options for individuals and families experiencing homelessness is limited throughout Webb County. There is a critical need for additional short-term and longer-term mental health and substance use disorder treatment services. It is therefore recommended to create a funding pool that can be used to customize tailored treatment programs for individuals and families experiencing homelessness. The City of Laredo or Webb County should be the overall custodian of such a fund, and should work closely with Bethany House and other service providers to establish operating protocols for distribution of this proposed funding.

Programs that only address the *symptoms* of homelessness do very little to reduce homelessness, and in fact often increase homelessness vis-a-vis enablement. If a community wants to truly address the condition of homelessness, it must proactively and smartly focus on the *root causes*

that trigger homelessness in the first place. In simple terms, homelessness service agencies need to move from a "basic emergency service level" to a "more holistic and comprehensive service level."

Increases in homelessness drain and divert the resources of law enforcement, courts, jails and prisons. Laredo Police Department already has disproportionately high contact and interaction rates with individuals experiencing homelessness. Likewise, hospitals expend disproportionately high amounts of resources on individuals experiencing homelessness, while having a very low reimbursable rates for these expended resources.

It is difficult for smaller communities like Laredo to cost efficiently fund localized treatment, recovery and engagement activities for individuals and families experiencing homelessness. If root cause treatment and recovery programs are not adequately funded, it is very likely the number of individuals and families experiencing homelessness will continue to increase significantly. This in turn will dramatically and exponentially increase the financial burden on the emergency medical service and criminal justice systems. It therefore will be most cost effective to address this set of issues as fast as possible.

If properly targeted, an investment now would save hundreds-of-thousands of dollars over time, if not millions of dollars, within the criminal justice and medical care systems.

3 - Create Customized Clinical Tracks Based on the Unique Needs for Laredo

Based on national best practices, research and the survey results, the following four clinical tracks should be created:
1. Hometown single females and hometown single-parent led families.
2. Out-of-town males.
3. Hometown males.
4. Everyone new to homelessness and/or new to Laredo (under one year).

Additionally:
▸ Clinical Tracks 1, 2 & 3 above must focus on chronicness.
▸ Clinical Tracks 1 & 3 above must have robust job "coaching."

These four customized tracks will address most of, but not all of, the homelessness clinical needs in Laredo. These clinical tracks should be reevaluated and "tweaked" every 3-5 years.

4 - Source New Housing Opportunities of All Types Whenever Possible, Especially Transitional Housing

There is a critical need to increase the number of affordable housing placements, especially transitional housing placements, across the spectrum for single men, single women and families with children. To be successful, there needs to be an increase in inventory capacity of all types of housing within Laredo.

Because of likely upcoming federal budget cuts, the financial burden will be shifting to state and local governments to fund additional transitional housing units as well as longer-term supportive housing units.

Laredo and Webb County should proactively pursue multiple initiatives to increase the affordable housing stock:
+ as challenging it will be, try to obtain more federal vouchers,
+ partner with developers to maximize the use low-income-housing-tax-credits,
+ develop working relationships with developers and apartment owners,
+ encourage homelessness service organizations to develop "their own" housing stock,
+ conduct due diligence on the possibility of developing and placing "tiny-houses,"
+ purchase and then remodel vacant and/or abandoned motels.

All of the possible initiatives listed above have pros and cons. Vouchers are very useful and effective, but federal budget cuts combined with higher rental rates will likely reduce the number of vouchers available. Low income tax credit housing is one of the best federal programs in existence, however, this program is very competitive. Many of the housing first type programs are very expensive since it would likely entail developing/constructing new inventory. Tiny-houses have been proven to be useful for short periods of stays, but the evidence is inconclusive for longer term habitation. Additionally, most if not all of these solutions will have highly emotionally-charged NIMBY'ism zoning and siting challenges.

Finally, service providers need to develop educational training programs that best prepare individuals and families for the challenges they will face in the future once they receive housing placements.

5 - Whenever Possible, Separate Families with Children from Non-family Single Adults

There were several occasions in which this researcher observed families with children commingled with and/or in close proximity to non-family single adult males and females who were experiencing homelessness. This occurred in public places like the plazas and inside of service providers like Bethany House.

Families with children must be separated away from single adults experiencing homelessness as much as possible, and as soon as possible. This includes all types of contact including queuing in lines for meals or waiting for services at food pantries.

By all measures, the mixing of children with adults who are experiencing chronic homelessness does not meet national best practices as it is risky, dangerous and unnecessarily increases legal exposure to agencies. It is very important to note that this type of commingling creates unhealthy and negative developmental issues in children. Furthermore, this mixing can exacerbate the inefficiencies in the placement process and inhibit optimal utilization of service inventory. This is why centers/programs/shelters across the USA have moved to separate families with children from non-family single men (and single women when possible).

Ideally, all families with children should be separated at least from single adult males, and when possible separated from single adult females. However, the realities of capacities and physical layouts may not allow for the ideal setups, at least in the short term.

Additionally, at a clinical level, it would be good for all single adult females to be separated from the single adult males. Ideally, single adult females would have their own dedicated facilities, but this likely would be cost prohibitive.

See the note above about the tragic results of commingling children with single adults - *A Note on Current Child Research - It is Very Negative to Mix Children With Single Adults*.

6 - Establish Service Eligibility Criterion with Residency Criteria

For the most part, the single adults interacting with social service agencies within Laredo fall in one of four cohorts:
1. Hometown single females and hometown single-parent led families.
2. Out-of-town males.
3. Hometown males.
4. Everyone new to homelessness and/or new to Laredo (under one year).

It is strongly recommended that "Long-term" and "Intermediate-term" services be exclusively used for and on behalf of individuals with long-term direct connectivity to the greater Laredo community. "Short-term Emergency" services would be available to all individuals who either have long-term direct connectivity with Laredo or are from out-of-town. For the purpose of this recommendation, short-term emergency ervices would last no longer than seven cumulative days of service within any given year.

It is very important to realize that for the exception of domestic violence triggered homelessness, treatment is generally more successful at a clinical level when an individual is located close to one's home support structure of friends and family. It is therefore better for individuals

experiencing homelessness to be in a treatment community near where the individual grew up, and in familiar surroundings.

It is recommended that "Direct Connectivity to Laredo" be defined as individuals:
    a) who attended high school in Webb County or,
    b) who have living parents in Webb County or,
    c) who have deceased parents that were living in Webb County at the time of their passing or,
    d) can prove they have been living continuously in Laredo for more than 24 months.

If an individual does not meet at least one of these four criteria then the individual would have "no direct connectivity to Laredo." The City of Laredo could modify this criterion as desired.

The above paragraphs would function as a "residential requirement" for utilization of long-term and intermediate-term services. It does provide for the use of short term emergency services to all individuals for up to seven days of service in a year regardless of residency requirements.

Having active family involvement is a well known core principle of most counselors and therapists in the field of homelessness (with the very important exception is with domestic violence victims/survivors). This means for most individuals with mental illness and substance use disorders have a higher chance of recovery when they are in their home environment with family.

The quote below is from the Federal SAMHSA (Substance Abuse and Mental Health Services Administration) and sums up the thinking on this issue:

> *". . . all families share a bond that can be used to support one another during trying times. While there is no one-size-fits-all solution for helping a family member who is drinking too much, using drugs, or dealing with a mental illness, research shows that family support can play a major role in helping a loved one with mental and substance use disorders.*
>
> *When a family member is experiencing a mental or substance use disorder, it can affect more than just the person in need of recovery. Evidence has shown that some people have a genetic predisposition for developing mental and substance use disorders, and may be at greater risk based on environmental factors such as having grown up in a home affected by a family member's mental health or history of substance use. Families should be open to the options of support groups or family therapy and counseling, which can improve treatment effectiveness by supporting the whole family."*

Because of the different clinical needs among cohorts, it is critical that each cohort be treated uniquely. Furthermore, if these cohorts were to be treated the same there could be a variety of very negative outcomes for both the individuals within the cohorts and for the general public.

For example, a home-grown individual experiencing homelessness needs significant engagement and help. In the reverse, providing the same type of support to an out-of-towner could actually encourage the visitor to stay longer, thus increasing the negative outcomes.

Additionally, because of the robust communication channels within the homelessness community, providing support to out-of-towners will actually attract more visitors to Laredo, and these visitors likely will stay for longer periods of time.

Simply put, if an individual is not a long-term resident of Webb County then they should only receive short-term emergency services and assistance. **This does <u>not</u> mean out-of-town guests should <u>not</u> receive services**! Quite the opposite. It means that out-of-town guests should receive customized services that produce the highest chance of recovery from homelessness for them.

At a clinical level, Laredo would aim to place the individual in the best environment to achieve the highest chance of recovery from homelessness. When individuals do not meet residential requirements, they would still be eligible for emergency level services. In times of emergencies, enough services should be provided to allow the individual to make it back home.

Ideally all formal service agencies and informal organizations providing services within Webb County would adopt and use a similar eligibility criterion.

7 - After the Bethany House Expansion is Complete,
<u>Have a Zero Tolerance Approach to Encampments and Overnight Hanging Out in Plazas</u>

For a variety of environmental, health and safety reasons, there should be a zero tolerance approach to encampments and overnight hanging out in plazas. Proactive efforts need to occur in order to locate individuals living on the street, and to engage these individuals into appropriate living situations.

Overall, living on the streets or in encampments is unsafe, unhealthy and is unsuitable habitation for individuals. Additionally, this researcher found encampments in Webb County that pose serious environmental contamination issues, disease transmission concerns, vector control risks and potential fire hazards.

Encampments have accompanying trash heaps that often act as fuel for fires, promote dangerous disease transmission and create vector control issues. Ironically, much of, if not most of the discarded rubbish within the encampments are items given to the individuals residing in the encampments free of charge by agencies and individuals.

Next Steps

*   Approve, help fund and expedite the right-sizing and right-layout of Bethany House.

*   Help fund the operations of Bethany House, and other agencies that provide critical on-site services.

*   Adopt and/or amend the above recommendations.

*   Assign each adopted strategic action step to one person by name with a targeted timeline of implementation.

*   Develop tactical actions to successfully implement the adopted strategic action steps.

*   As soon as possible start implementing - just get started!!

*   Establish a checkup plan with a followup feedback loop to check the progress and to make needed adjustments.

<u>Exhibit 1 - Homelessness Assistance Center Functionalities</u>

The following service functionalities should be included within a homelessness assistance center:

+ Engagement:
  * Outreach - interface with Homeless Outreach Teams (HOTs)
  * Intake, registration and assessment
  * Master Case Management

+ Medical:
  * Medical (on-campus and off-campus referrals)
  * Dental (off-campus referrals)
  * Vision (mostly off-campus referrals)
  * Pharmacy services (on-campus)
  * Mental health (on-campus and off-campus referrals)
  * Substance use disorder treatment (on-campus and off-campus referrals)

+ Job Placement Services:
  * Legal services and ID recovery
  * Life skills training
  * Job skills training (includes resume, interview and retention skills training)
  * Job placement, coaching and enlisting business community support for jobs

+ Hygiene Services:
  * 24/7 bathrooms
  * Showers
  * Hygiene skills training and services
  * Hair cut services (to be presentable for job interviews)

+ Overnight Sleeping:
  * Low demand sheltering
  * Transitional living

+ Feeding:
  * Establishment of a commercial kitchen
  * Food and meals
  * Coordination of meals (delivery and prep from non-profits and churches)

+ Other Support Services:
   * Clothing closet
   * Housing out-placement
   * Veteran services
   * Daytime activities
   * Property storage
   * Donation center

+ Administration:
   * Administrative services
   * Security
   * Storage
   * Volunteer coordination
   * Community service work crews

Exhibit 2 -
Robert G. Marbut Jr., Ph.D. Biography

Dr. Robert Marbut has worked on issues of homelessness for more than three decades: first as a volunteer, then as chief of staff to San Antonio Mayor Henry Cisneros, next as a White House Fellow to President H.W. Bush (41, the Father), later as a San Antonio City Councilperson/Mayor-Pro-Tem and more recently as the Founding President & CEO of *Haven for Hope* (the most comprehensive homeless *transformational center* in the USA).

In 2007, frustrated by the lack of real improvement in reducing homelessness, and as part of the concept development phase for the *Haven for Hope Campus*, Dr. Marbut conducted a nationwide best practices study. After personally visiting 237 homelessness service facilities in 12 states and the District of Columbia, he developed *The Seven Guiding Principles of Homeless Transformation* which focuses on root causes and recovery, not on symptoms and short term gimmicks. Since 2007, Dr. Marbut has visited a total of 1,348 different operations in all 50 states, plus Washington, DC and Mexico City, and has helped hundreds of communities to positively address their homelessness issues. He has consulted with more communities and organizations than anyone else in the USA and has worked in all 50 states.

These *Seven Guiding Principles of Transformation* are used in all aspects of Dr. Marbut's work to create holistically transformative environments in order to reduce homelessness.

He earned a Ph.D. from The University of Texas at Austin, Austin, Texas in International Relations (with an emphasis in international terrorism and Wahhabism), Political Behavior and American Political Institutions/Processes from the Department of Government.

He also has two Master of Arts degrees, one in Government from The University of Texas at Austin and one in Criminal Justice from the Claremont Graduate School. His Bachelor of Arts is a Full Triple Major in Economics, Political Science and Psychology (Honors Graduate) from Claremont McKenna (Men's) College.

Dr. Marbut also has completed three post-graduate fellowships, one as a White House Fellow (USA's most prestigious program for leadership and public service), one as a CORO Fellow of Public and Urban Affairs, and one as a TEACH Fellow in the Kingdom of Bahrain and the State of Qatar (1 of 13 USA educators selected). He was also a member of the Secretary of Defense's Joint Civilian Orientation Conference (JCOC-63) 2000 class which focused on Special Operations. JCOC is the Secretary of Defense's premier civic leadership program.

Contact Information:

Robert G. Marbut Jr., Ph.D.   www.MarbutConsulting.org
6726 Wagner Way   MarbutR@aol.com
San Antonio, TX 78256   210-260-9696

Appendix 9:

Laredo Homeless Coalition Continuum of Care Plan

Texas A&M International University Consultants Report:
Laredo Homeless Coalition Continuum of Care Plan
2017-2022

Gwen George

Monica Alleman

Maria Vinegar

Jeannette Johnson

John Kilburn

upload.wikimedia.org

TABLE OF CONTENTS

LIST OF ABBREVIATIONS

AHAR	Annual Homeless Assessment Report
AHEC	Area Health Education Center
CASA	Casa de Misericordia
CDBG	Community Development Block Grants
CE	Coordinated Entry
CoC	Continuum of Care
DES	Decentralized Entry System
ESG	Emergency Shelter/Solution Grant
FMR	Fair Market Rent
HCC	Holding Institute Community Center
HDX	Homelessness Data Exchange
HEARTH Act	Homeless Emergency Assistance and Rapid Transition Housing
HIC	Housing Inventory Count
HMIS	Homeless Management Information System
HOME	HOME Investment Partnership Grant
HUD	U.S. Department of Housing and Urban Development
HUD-VASH	HUD-Veterans Affairs Supportive Housing
LHA	Laredo Housing Authority
LHC	Laredo Homeless Coalition
LISD	Laredo Independent School District
NAEH	National Alliance to End Homelessness
NLIHC	National Low Income Housing Coalition
PIT	Point in Time
SCAN	Serving Children and Adults in Need
TAMIU	Texas A&M International University
TDFPS	Texas Department of Family and Protective Services
THN	Texas Homeless Network
TVC	Texas Veterans Commission
TWC	Texas Workforce Commission
Tx BoS CoC	Texas Balance of State Continuum of Care
UISD	United Independent School District
USICH	U.S. Interagency Council on Homelessness
UTB	University of Texas at Brownsville
VA	Veterans Affair
VAWA	Violence Against Women Act
WHO	World Health Organization

Executive Summary

Homelessness is a problem that bridges all walks of life and affects the entire community. The ability to quantify the problem to satisfy federal municipal, private and nonprofit funding entities is challenging. Ensuring that strengths and gaps are identified will allow the Laredo Homeless Coalition, the City of Laredo, and all agencies serving the homeless population to prioritize solutions and seek appropriate funding sources.

Through the scope of work outlined by the Laredo Homeless Coalition (LHC), a detailed assessment and inventory of agencies was conducted. In addition, the development of a Continuum of Care Process and Plan, and a Continuum of Care Memorandum of Understanding was undertaken. The execution of the deliverables outlined by the LHC was accomplished by a research team created for the purpose of developing the Texas A&M International University Consultant Report: Laredo Homeless Coalition Continuum of Care Plan 2016-2020.

The methodology used by the research consultants included an initial review of the literature scoping the state of the science in terms of homelessness, which was later expanded to include types of entry systems. In addition, an initial investigation (using a published copy of the 211 directory) was conducted to identify local community agencies and organizations providing services for the homeless population. Prior to contacting the identified agencies, the research consultant group modified a questionnaire to ensure a thorough collection of data.

An inventory of services was conducted for the identified community agencies serving the veterans and homeless populations by using the following methods: interviews via face to face and/or by telephone, organization website, email, and verified social media accounts. The research consultant group interviewed key personnel from 52 agencies and inventoried 23 local agencies for the purpose of creating a service directory.

In further analysis of the data collected (from the literature and interviews) the research team focused on defining and providing a comparison of the multiple definitions of homelessness developed and utilized by different agencies and/or organizations. This analysis includes a needs assessment that forms a basis for understanding the current delivery system of care for homeless individuals and families at risk for homelessness in the city of Laredo.

How an organization or coalition is structured will determine the ability to respond successfully to its vision, mission, and strategic agenda. When the organization is a coalition or a collaborative structure, function must reflect the best practices for large interagency work. Gaps and an unclear organizational structure were identified. Recommendations for a revision of the coalition to a collaborative (including a suggested name change) resulted in reimagining how the different services, housing and funding agencies interact and relate to one another.

This report highlights detailed information and comparisons of demographic statistics regarding homelessness within the city of Laredo, Texas. The results of interagency gaps identified via a detailed inventory of services and recommendations are outlined by the research consultants (to improve the areas of service and address the aforementioned gaps) are provided.

Finally, the strategic planning process is a significant undertaking. The initial first steps are slated for mid-January 2017. It is anticipated that the mission, vision, and organizational structure will be evaluated. The findings and recommendations of this report will be considered in developing goals and objectives for a three-year plan. It is suggested that additional funding be invested in completing the Strategic Planning process over the next three to six months.

PART I: INTRODUCTION

The City of Laredo's 10-year plan to eliminate chronic homeless has come to an end and with the release of the 2015-2016 City of Laredo Consolidated Plan report, now is the ideal time for the Laredo Homeless Coalition (LHC) to evaluate the work they do towards ending homelessness in the community. The LHC has determined that a community cannot end homelessness until they work to improve the coordination and delivery of services they provide while also working with officials to address the social and economic conditions which contribute to a housing crisis for individuals. Members of the LHC, working closely with city officials, have partnered with researchers from Texas A&M International University (TAMIU) to address the issue of homelessness, to identify area service providers, promote collaboration among community partners, and develop a Continuum of Care (CoC) plan that is aligned with the goals of the Texas Balance of State CoC.

The purpose of this report is to provide a written Continuum of Care plan that includes identified gaps and strategic goals and objectives by supportive services in the years 2016-2020. The report will (1) provide an updated inventory of services, (2) define the problem of homelessness, (3) discuss the organizational structure of the LHC, (4) provide best practices to support effective coalitions, (5) provide evidence based solutions related to coordinated entry systems, (6) present the results of the inventory of services, (7) outline a strategic planning process, and (8) provide final recommendations based on the research conducted. This report will also outline how the unique demographics and the social determinants of health have a direct and lasting impact on the progress made by the LHC, policymakers, advocates, and leaders. It is the work of the TAMIU team to support the LHC, area policy makers, advocates, and stakeholders as they undertake a systematic approach to address the needs of the community, the agencies which serve them, and the data which supports the requirement for a systematic, sustainable organizational change.

Consultant Group Members

The Texas A&M International University (TAMIU) research consultants included Dr. Gwen George, Associate Professor and Director of Graduate Programs in the College of Nursing and Health Sciences and Dr. Monica Urdiales Alleman, Assistant Professor in the College of Nursing and Health Sciences. Dr. John Kilburn, Associate Vice President for Research and Sponsored Projects, functioned in an advisory capacity. In addition to the above mentioned TAMIU faculty, there are two graduate research assistants: Maria Vinegar and Jeannette Johnson. This consultant group was given the charge to:

1. Inventory agencies and services in the various supportive service areas including but not limited to basic and essential living, housing programs, transportation, medical health, substance abuse treatment, mental health, case management, jobs and life skills, Veteran-

specific, and other mainstream services (See Appendix A).

       2.   Assess the service components including but not limited to Planning and Coordination of group outreach, education, assessments, prevention, and housing (emergency shelter, transitional housing, and permanent supportive housing).

       3.   Development of a Continuum of Care Process and Plan, including a comprehensive strategy, objectives, and tasks for 2016-2020 period.

       4.   Draft of Continuum of Care Memorandum of Understanding that can be executed by participating agencies (See Appendix B)

       In addition to the aforementioned deliverables, through initial and continued correspondence, the LHC requested the scope of our work to include: determining the appropriate methodology for PIT count, request for developing local expertise, and recommendation on whether a centralized or decentralized entry system would be better able to serve the community.

Data Methodology

       The research consultants started with a two-prong approach: initiating the review of the literature (ROL) to understand the state of the science in terms of homelessness and to identify and inventory agencies and organizations that provide services to individuals who are homeless or at risk for becoming homelessness. The initial review of the literature was related to homelessness and how it was defined for a variety of purposes with an emphasis on funding. This review was expanded to include types of entry systems for organizations encountering homeless persons and families, and the count methodology for counting and reporting data to multiple sources (i.e., government agencies, grant funding organizations, etc.) The results of the reviews of the literature are included in this report (See PART IV).

       The types of questions addressed through the review of literature included:
1. What is the prevalence of homelessness in Laredo, Texas and surrounding areas?
2. What are the definitions of homelessness that guide the creation of policies in each agency/organization?

       The TAMIU research consultants used a variety of methods to collect the data required for an inventory of services directory. These methods included the evidence found in the literature, a review of the service directory questionnaire used previously by a local agency and through a review of other service directory questionnaires used regionally and nationally. Although the team identified several service inventory questionnaires which could be utilized for the project, many questionnaires were either too time intensive or not generalizable to the group of stakeholders in the area. Therefore, the team decided to use the questionnaire provided by a local agency for several reasons: (1) it was easy to understand, (2) it was easy to use (3) the information requested could be modified slightly in order to make it more generalizable to the

group of stakeholders and (4) the questions would be similar to those asked of the stakeholders in previous interviews so it would establish a level of trust between the TAMIU research consultant group and the individuals they interviewed. The types of questions addressed through the modified questionnaire included:

      1.   What agencies are currently providing services or referrals to the homeless or at risk for homelessness in the area?

      2.   How are the aforementioned agencies identifying those who are homeless or at risk for homelessness and how does the current delivery system address their needs?

      3.   What are the strengths, challenges, gaps, and barriers within the current care delivery system that are supporting or limiting the organizations and the system's ability to respond to a housing crisis effectively?

      To ensure thorough data collection, the team identified additional strategies which included:

1. Document review including grant proposals, LHC and city council meeting minutes, LHC bylaws, LHC website, agency websites, provider intake forms, point in time survey results, and internal referral directories
2. Literature review of best practices related to entry systems
3. Literature review of definitions of homelessness and chronic homelessness

      The TAMIU team identified 82 agencies or organizations providing services to the homeless population in Laredo which became the inventory contact list. Initially, many of the organizations on the inventory contact list were obtained from a published copy of the 211 directory which was published several years prior and from the 211website which was last updated in 2015. Some of the information was found to either be out of date or the individual listed as the contact person was no longer affiliated with the organization. Of the 82 agencies on the inventory contact list, 52 provided information by phone and ten agencies provided information during face-to-face interviews (with key members of the organizations). There were 14 organizations on the inventory contact list that the TAMIU team was unable to contact despite considerable efforts made to contact the organization by telephone, through electronic communication and finally, by making a visit to the address listed for the organization. There were multiple organizations contacted by telephone but agency representatives were unable to provide any additional information beyond what was readily available on the organization's website. A team leader and the student research consultant were successful in speaking with or meeting with agency representatives to collect data on: (1) services provided, (2) involvement with the homeless persons, homeless veterans, veterans, and/or those at risk for homelessness, (3) methodology of count, (4) data entry software, (5) identify key members of each organization, as well as, (6) organizational challenges and successes. The majority of the data was made readily available by the key members of the organizations after a relationship was

established via a face-to face interview or through a telephone interview. It should be reported that as the TAMIU team conducted the service directory inventory, there were several team challenges identified which included:

(1) coordination of conflicting schedules between research team members and key stakeholders, (2) lack of accountability for members of the research team due to either lack of training or communication issues, and (3) difficulty of the research team in determining where best to utilize their time (literature review related to the methodology for the point in time count, literature review of best practices for entry system, or meetings with key stakeholders).

To summarize, the service directory inventory conducted by the TAMIU team resulted in the following:

1. Identified 82 agencies that provide services or referrals for homeless population (See Appendix C).
2. Interviewed key personnel from 52 agencies at the local and regional levels.
3. Inventoried 23 local agencies to provide a service directory.
4. Identified project time constraints which prevented interview and inclusion of an additional 20 community agencies and 72 faith-based organizations identified by the team (See Appendix D).
5. Identified the need to include correctional facilities and probation officers for inclusion in a future directory.
6. Identified the need to include both area hospitals, all area health clinics, the health department, school systems, colleges, and universities.
7. Identified the need to include the economic sector and business development sector.

PART II: DEFINING THE PROBLEM

In this section of the report, the researchers will provide the definitions and costs of homelessness. Additionally, there will be an overview of the demographics of the City of Laredo. The needs assessment will be discussed and data supporting the scope of the problem of homelessness at the national, state, and CoC level will be provided. In addition, the service components (planning and coordination, outreach and education, assessment and prevention, and housing) will be described to include any gaps identified. As mentioned in the introduction, this section of the report will provide information regarding the social determinants of health which greatly influence the health of the population.

Homelessness Overview

The way in which homelessness is defined is important in securing funding at the federal, state and local level. Therefore, understanding and correctly applying the different definitions based on the program type and funding request is paramount to success. For example, if an agency seeks to secure funding related to the healthcare needs of homeless persons or families, they would want to utilize the definition provided by the U.S. Department of Health and Human Services (HHS).

In December 2015, the U.S. Department of Housing and Urban Development (HUD) published a final definition of "chronically homeless" in the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Final Rule which will be utilized by HUD's CoC Program and by the Consolidated Submissions for Community Planning and Development (CPD) Programs (HUD, 2015c). The previous definition of HUD's "chronically homeless" has been adopted by the United States Interagency Council on Homelessness and the Department of Veterans Affairs.

The final definition states that chronic homelessness regards "an individual who is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least four separate occasions in the last 3 years, where the cumulative total of the four occasions is at least one year. Stays in institutions of 90 days or less will not constitute as a break in homelessness, but rather such stays are included in the cumulative total; and can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility for fewer than 90 days and met all of the criteria in

paragraph (1), before entering that facility; or a family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1), including a family whose composition has fluctuated while the head of household has been homeless" (HUD, 2015c).

Health centers funded by the U.S. Department of Health and Human Services (HHS) use the following definition found in section 330(h)(5)(A) of the Public Health Service Act: "an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility (e.g., shelters) that provides temporary living accommodations, and an individual who is a resident in transitional housing. A homeless person is an individual without permanent housing who may live on the streets; stay in a shelter, mission, single room occupancy facilities, abandoned building or vehicle; or in any other unstable or non-permanent situation. [Section 330 of the Public Health Service Act (42 U.S.C., 254b)]. An individual may be considered to be homeless if that person is "doubled up," a term that refers to a situation where individuals are unable to maintain their housing situation and are forced to stay with a series of friends and/or extended family members. In addition, previously homeless individuals who are to be released from a prison or a hospital may be considered homeless if they do not have a stable housing situation to which they can return. A recognition of the instability of an individual's living arrangements is critical to the definition of homelessness" (NHCHC, 2016).

This McKinney-Vento Act definition defines a homeless person as an individual who lacks a fixed, regular, and adequate nighttime residence. This definition expands to include children and youth. This Act is used for funding related specifically to elderly, handicapped persons, families and children. The research consultants identified multiple definitions of homeless person, "doubled up", at-risk for homelessness, and chronic homelessness (See Appendix E).

Needs Assessment and Rationale

A needs assessment is a tool that can help an organization, group, or coalition determine the extent of the problem, gather information related to all services currently available to the target population, and what gaps in these services exist. With this type of data, informed decision making can be developed regarding the addition of services, enhancing current services, and bridging any identified gaps. A needs assessment was conducted to form a basis for understanding the current delivery system of care for homeless individuals and families at risk for homelessness in the city of Laredo. A complete summary of all 22 agencies surveyed can be found in Part V of this report.

Demographics of Laredo

Laredo, Texas is a city with a population of 255,473 located in South Texas on the border to Mexico (Texas Association of Counties, 2015). Citizens of both cities have crossed the border

for personal and economic reasons since the city of Laredo was founded in 1755 (Texas State Historical Association, 2010). The City of Laredo is located within Webb County and is the only metropolitan city within the county (Texas Association of Counties, 2015). The 2015 U.S. Census estimated that the population of Webb County was 269,761 (U.S. Department of Commerce, 2015). According to the U.S. Census Bureau, 96.8% of citizens in Laredo are of Hispanic origin, 3.6% identified themselves as White, and 1.5% of respondents identified with two or more races. For 90% of the population living in Laredo, the primary language spoken at home for individuals (ages 5+) is Spanish. Although 65% of citizens have obtained a high school diploma, those statistics are not reflected in the percentage of individuals with a bachelor's degree or higher.

A 2015 study conducted by Methodist Ministries found that the citizens of Laredo consist of a close knit community where individuals feel connected by strong cultural ties to family and are actively engaged in civic duty (Methodist Healthcare Ministries, 2016). In addition, the majority of residents reported their religious affiliation as Catholic (50%) compared to the Texas average of 23% (Pew Research Center, 2015). A large portion of the population (31%) lives in poverty, which is significantly higher when compared to other cities in Texas that are comparable in geography and size (U.S. Census Bureau, 2015). The city of Laredo is home to citizens actively engaged in the politics of their community on a local and regional level. Many residents are third and fourth generation locals who have developed deep bonds with their community and who strive to function within the political lens and expected norms of their community. They are a population strongly connected to their families and the long-standing traditions which connect the people with their culture and the social and physical environments which greatly influence their lives.

Homelessness in the United States

The Department of Housing and Urban Development (HUD) provides an Annual Homeless Assessment Report (AHAR) to Congress to provide national and state estimates of homelessness in America and to help understand the nation's capacity to serve them. The 2016 AHAR report included information related to community's point in time estimates, housing inventory counts, and CoC level data. The 2016 report identified a decline in homelessness by three percent between 2015 and 2016. According to the 2016 AHAR, the number of individuals who were identified as homelessness in the U.S. has decreased in 13 states with Texas reporting one of the largest decreases with 16,666 fewer individuals. Even with these decreases, in January of 2016 there were approximately 550,000 individuals experiencing homelessness in the United States (U. S. Department of Housing and Urban Development, 2016, p.1). The majority, 68% of those identified, were staying in emergency shelters, transitional housing programs or safe havens with 32% of those individuals located in unsheltered locations. Sixty-nine percent of those identified as homeless were over the age of 24, nine percent were between the ages of 18 and 24, and twenty-two percent of homeless individuals under the age of 18. All CoC's showed a decrease in homeless individuals in all categories in the nation (p. 58).

In 2016, there were 867,102 beds available for homeless individuals and families in emergency shelters, safe havens, transitional housing, rapid re-housing, permanent supportive housing, and other permanent housing (p. 72). The 2016 AHAR reported that for the first time since HUD began tracking the information, a larger share of beds was dedicated to permanently housing people who were formerly homeless (53%) than to temporarily housing people in homeless shelter projects (47%).

Overall, Texas reflected a decline in the number of homeless persons, reporting 15,959 individuals experiencing homelessness in 2016. However, the 2016 report outlined that although the numbers are decreasing, the Texas Balance of State CoC has one of the largest numbers of people experiencing homelessness, 6,048 (p.17). Nearly one third of people experiencing homelessness in families with children were Hispanic or Latino (31%) which was nearly double the Hispanic share of people experiencing homelessness as individuals (17%). Overall, this report shows that the nation is making progress towards ending homelessness with decreases noted in Texas and in several CoC areas.

	2016 Point in Time Data			
Location	U. S.	Texas	Texas BOS	Laredo
People experiencing homelessness	549,928	23,122	6,048	168
Individuals who are experiencing homelessness	355,212	15,959	3,829	Not reported
Families with children	194,716	7,163	2,150	Not reported
Unaccompanied youth	35,686	1,309	457	Not reported
Veterans	39,471	1,768	64	Not reported
Chronically homeless individuals	77,486 individuals*	3,534	823	19

Note: * 8,646 persons with families with children with chronic patterns of homelessness in the U.S.

Service Components

Assessing the magnitude of the problem of homelessness at the national, state, and local level gives a picture of the overall extent of the problem. To complete the needs assessment and understand what services are currently provided and where gaps in services exist is the next step. During the agency inventory data was gathered related to types of services offered, challenges in

providing services, and identified gaps. In Part V of this report every agency inventoried is listed and a description of the agency as well as, the services provided, are categorized and evaluated based on the following service components: planning and coordination, outreach and education, assessment, prevention, and housing. A table was created to demonstrate the link between the service components and the organizations presented in Part V (See Appendix F).

Planning and Coordination

The purpose of the planning component is to provide a vision for the future and address how those experiencing homelessness can be better served through the coordination of services. In order to expand partnerships and improve coordination, there should be meetings facilitated by the Mayor's office with plans to build working relationships amongst federal, state, and local agencies. Also, develop process changes that will be sustainable despite variations in staffing on the agency level. There should be focused areas or "teams" related to street outreach, housing (expanding housing stock and ensuring housing retention), counseling (including peer support), data sharing; therefore, coordination can be considered a key service component in not only addressing homelessness but in ending it.

Outreach and Education

Outreach is defined as an act of reaching out to people in homeless situations and disseminating information about available services in order to engage people in services. Outreach components in Laredo include, but are not limited to, meals, assessment, and/or disease management through agencies such as Bethany House, the South Texas Aging and Disability Center, Family Endeavors, the American Red Cross (fire/disaster victims), Department of Veterans Affairs, the Laredo Health Department, the Holding Institute and the many faith-based organizations. For example, Bethany House provides 12,000 meals per week to individuals through various social service programs in the area. The Laredo Health Department provides community outreach services through a binational Tuberculosis (Tb) program which provides daily medication and treatment for individuals identified as having active Tb in Laredo and Nuevo Laredo.

In the area of education, there were multiple entities in Laredo providing education services to individuals identified as homeless (both adults and youth). However, there did not seem to be a mechanism in place to coordinate the assessment and identification of this population among service providers.

Assessments and Prevention

Assessment is a collection and analysis of information to ensure that homeless persons are referred to the most appropriate service(s). All agencies utilize an assessment tool but, there is no mechanism in place for the sharing or review of these documents. There exist no meetings nor committees who gather the agency representatives to, (1) review one another's assessment

tools, (2) conduct a comparison of such tools, to tools used in other models of care, and (3) work together to identify gaps and strengths of the assessment tools in place. Within each agency, there did not appear to be allocated time to proactively review and refine internal assessment tools and processes. As internal agencies revise existing assessment tools, they tend to do this in isolation of the other service providers and therefore, are not aware of how their assessment tool will impact the system of care in Laredo.

Homelessness prevention includes activities and/or programs designed to prevent the incidence of homelessness. These activities and/or programs may include: housing relocation, housing stabilization services, and rental assistance, (which can range from three to 24 months) (U.S. Department of Housing and Urban Development, 2016a). There are multiple agencies providing assessments and prevention services such as: The Laredo Housing Authority, Bethany House, Family Endeavors, the City of Laredo Health Department, and the Veterans Affairs (VA) Outpatient Clinic. However, there are no set weekly or monthly conferences (among all agencies and stakeholders) to review assessments and prevention activities of agencies providing the similar services, i.e., assessment, prevention, etc. Questions which arose during interviews which could be addressed through case conferences included: "How are agencies identifying the rate of recidivism? What happens when a disabled person presents with no income? Is the person turned away? Which agency would be the best one to refer this person to? If my agency cannot help this person, what would be the best area agency to refer to? If I refer this person to an agency such as the Salvation Army, how do I know if that agency has time limits? What if I have an elderly client who was recently with no transportation present to my agency, once I determine that my agency cannot help him/her? How can I secure transportation for this individual to another area agency? How can I know which agency I should refer him/her to first?" Questions such as these could be addressed through LHC committee meetings with service providers providing the same service component in the area.

Housing

Housing is one of the most significant service components when addressing homeless issues. There are several different types of housing: emergency shelters, transitional housing, permanent supportive housing, and other permanent housing. This section will address each type of housing.

Emergency Shelter

Emergency shelters are defined as facilities equipped to provide temporary or transitional shelter for those experiencing homelessness (U.S. Department of Housing and Urban Development, 2016a). Although emergency shelters service the homeless population, most serve subpopulations that may include: youth, pregnant, survivors of domestic violence, families with children, and single adults.

Transitional Housing

The U.S. Department of Housing and Urban Development (HUD) defines transitional housing as a program that not only provides a place to stay but, one that is combined with supportive services for up to a 24-month period. (U.S. Department of Housing and Urban Development, 2016a). Transitional housing is designed to provide interim stability and support to homeless individuals. This is considered the next step for a homeless person in obtaining assistance and getting their needs met. This type of housing is augmented with supportive services that include but are not limited to: case management, job training, life skills training, child care, substance abuse treatment, mental health care, housing placement, and health care. Individuals being serviced by this program are required to have a lease or an occupancy agreement in place.

Permanent Supportive Housing

Permanent supportive housing (PSH) is permanent housing with indefinite leasing, rental assistance, and supportive services established to serve those with a disability or families with an adult and/or child with a disability in order to achieve housing stability (U.S. Department of Housing and Urban Development, 2016a). Disability is a requirement for eligibility into a HUD McKinney-Vento-funded program. Therefore, the majority of the persons serviced under PSH have disabilities. (U.S. Department of Housing and Urban Development, 2016a).

Permanent Affordable Housing

Affordable housing are properties that are built to provide a below-market rent for low-income people, persons with disabilities and/or seniors. Table 5.1 and 5.2 demonstrate agencies providing housing in Laredo by housing category. The literature suggests that a stepwise approach includes using emergency shelter to transitional housing and then permanent supportive or other permanent housing based on the individual needs of the client. There is a deficit in affordable housing in Laredo with the Laredo Housing Authority reporting a waiting list for public housing and section 8 units.

Housing Inventory
Emergency Shelter (ES) Provides temporary or nightly shelter beds to people experiencing homelessness ● Bethany House: Beds: 28 men, 22 women ● Salvation Army: Beds: 18 men, 8 women ● Casa de Misericordia: 42 Beds: Domestic Violence ● Serving Children and Adults in Need (SCAN) - youth
Transitional Housing (TH) Provide homeless people with up to 24 months of housing and supportive services ● Bethany House: 17 units, 65 beds ● SCAN
Safe Haven (SH) Provides temporary shelter and services too hard to serve individuals

| Laredo Housing for Formerly Homeless People |
|---|
| **Rapid Rehousing (RRH)**
Provides short term and medium term rental assistance and housing relocation and stabilization services to formerly homeless people experiencing homelessness
• Bethany House |
| **Permanent Supportive Housing (PSH)** Provides long term housing with supportive services for formerly homeless people with disabilities
• Westcare Next Steps: Beds: 16 male, 4 female |
| **Other Permanent Housing (OPH)** Provides housing (with or without supportive services) that is specifically for formerly homeless people and in which disability is not a requirement.
• Laredo Housing Authority: 962 units (low rent housing), 1189 units (Section 8) including 35 certificates issued through the family self-sufficiency program.
• City of Laredo Community
• Development Department
• Laredo Municipal Housing
• NeighborWorks Laredo |

Costs of Homelessness

When taking the cost of homelessness into consideration, HUD reports an average homeless system cost for individuals ($1,634 to $2,308) lower than those for families ($3,184 to $20,031). It was also noted that 10% of individuals incurred up to 83% of total cost and 50% of individuals incurred 2-3% of the total cost (Spellman, Khadduri, Sokol, Leopold, Abt Associates Inc., 2010). According to the Federal Targeted Homeless Assistance Expenditures Sources, until the HEARTH Act in 2009, the homelessness assistance approximated $2.5 billion and in 2014 exceeded $5.4 billion in adjusted 2011 dollars (Lucas, 2016). According to Housing First, the average chronic homeless individuals' annual social cost is between $40,000 and $50,000 and expected to be higher for the non-chronic homeless. Evidence suggests that the majority of permanent supportive housing units go to non-chronic homeless individuals. This implies that the costs of federal homelessness policy are much higher than they appear (Lucas, 2016).

According to Fair Market Rent (FMR), the rent for a two-bedroom apartment is $864. It must be noted that in order to afford this rent, a household is expected to earn $2,880 monthly and/or $34,563 annually (National Low Income Housing Coalition (NLIHC), 2015). In Laredo, Texas the average monthly rent for a two-bedroom apartment in 2016 was reported as $756 and is set to increase to $815 in 2017. Therefore, taking into account the $14.94 minimum wage in Laredo, TX, the annual income needed to afford this apartment, is $31,080 making it evident that 2.1 full-time jobs at minimum wage are needed to afford this cost (NLIHC, 2015).

Social Determinants of Health

According to the World Health Organization (WHO) (2013), "the social determinants of health are the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics". The WHO recognizes that the social determinates of health are greatly shaped by inequitable distribution of power, and wealth, which exert great influence on people's lives and determines their risk of illness and ability to achieve health. Jepson, Harris, Platt, and Tannahill (2010) stated, "given the importance of the socio-economic determinants of health and illness and their impact on morbidity, it is crucial that interventions designed to improve health take account of those very factors that may work against positive outcomes" (p.10). Research has found that poverty and homelessness are inextricably linked and it is the role of the systems of care in Laredo to work with policymakers and community leaders to prevent homelessness and work together to address a housing crisis when it occurs. Community leaders, advocates and policymakers recognize that the ability of Laredoans to achieve their optimum level of health is directly related to the social and environmental conditions in which they live. However, it should be stated that the citizens of Laredo face challenges which are not reported extensively in the literature. Consequently, these challenges may not be readily apparent to individuals that live outside of the area. There are challenges related to social determinants which can contribute greatly to the health and wellbeing of a population such as, high poverty rates, high rates of self-reported poor or fair health, and a lack of access to mental health and substance use providers. Currently, Webb county has 42% of children living in poverty (compared to the Texas average of 25%) and 33% of households (compared to Texas average of 18%) report one or more housing problems related to unaffordable housing, overcrowding, or housing which lacks adequate kitchen or plumbing facilities. Webb County also suffers from a severe lack of mental health providers with an average of 3,290 individuals per mental health provider or ratio of 1: 3,290. This ratio is startling when it is compared to Travis County, which has one mental health provider per 393 individuals or a ratio of 1:393, and to the U.S. median, which is 1:1060.

Table 2.2: Webb County's Ratio of Population to Mental Health Providers
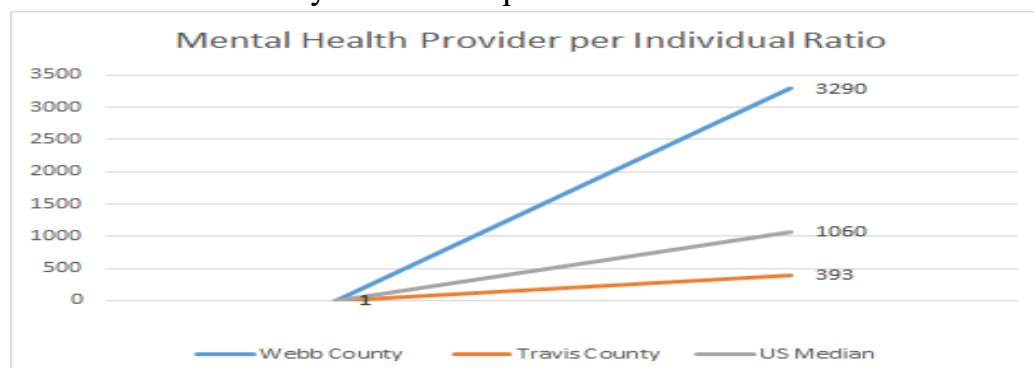
(University of Wisconsin Population Health Institute, 2016).

Local, regional, and national policy makers find themselves in the unenviable position of attempting to address public health issues of a vulnerable population that are related to homelessness such as, mental health conditions, severe mental illness, substance abuse, tuberculosis, hepatitis C, and HIV while addressing the social factors which may contribute to the housing crisis. Policymakers address these public health issues with the use of budgetary allocations while simultaneously working with area representatives who find themselves in an accelerated technological setting. The policy makers and agency representatives in Laredo are working within a system that has productive individual agency processes. However, as an entire system it fails to view their work as part of a coordinated system; instead of the grouping of individual agencies that happen to co-exist within a much larger system of service delivery. When they begin to view the other agencies within the LHC, not as impediments or interruptions of their work but instead, as their best opportunity to improve the systems of care, then the system itself will become more aligned with their goals of ending homelessness. Data received from the inventories of stakeholders suggest regular inclusion, invitation, and participation in the LHC by the broad of community stakeholders. This could be one strategy toward strengthening collaboration in the city. Furthermore, it is important that policy makers weigh the costs and benefits of the programs they support and allocate their funds towards improving the systems of care which implement those programs. Policymakers may want to focus on policies and programs that will: (1) benefit the overall health of the community, (2) are based on the most current evidence, (3) are cost-effective, and (4) can promote health equity. Following the interviews with the area stakeholders, it is clear that the LHC is well poised to assist policy makers with this task if the LHC begins to work as a system and incorporate systems level changes to support the work of the group.

PART III: ORGANIZATIONAL STRUCTURE

Organizational structure is important to the success of any individual agency but is essential to a coalition or collaborative. The US Housing and Urban Development (HUD) Office of Community Planning and Development (2009), offered a guide for Coalition Development in the report *Building Effective Coalitions*. A coalition is an alliance between individuals and organizations that can be temporary or permanent, to achieve goals and objectives that no one individual or organization could accomplish on their own. The term *coalition* is commonly utilized but other terms such as Collaborative and Continuum of Care (CoC) are often used as well. However, using "CoC" language may result in a community misperception that the LHC is an independent CoC when it is currently within the TX BoS CoC.

The concept that the sum is greater than the individual parts is important but, the reality is that an effective coalition will provide benefits that incentivize stakeholder organizations to invest their time and efforts in the coalition. For example, one benefit for stakeholder participation in the LHC should be, the assistance the LHC would provide (while working closely with TX BoS staff) in reviewing and providing guidance based on system and individual agency data and performance reports. Benefits to the stakeholders can be achieved when a coalition or collaborative is strong. Benefits of building a strong effective coalition are: (1) coordination of services and process to enhance efficiency and avoid duplication of services, (2) improving overall communication, enhance information and data sharing, (3) full appreciation of community needs, (4) enhanced networking opportunities, and (5) increase funding opportunities (HUD, 2009).

Building an Effective Coalition

A coalition is not simply a group of organizations but instead, an *organization* of organizations where all participants share a common vision, mission, and goals with a clear understanding of the structure and expectations for participation. A coalition should have strong leadership, adequate staffing, effective management, and ongoing evaluation. Evaluation of the complex issues will address and develop a systematic, evidence-based, community wide approach to addressing those issues. To be most effective it is important to ensure that each organization in the coalition coordinates work so that everyone benefits from the resulting efficiency. Because of the number of organizations involved in any coalition, team building will allow for the development of partnerships and mutual goal achievements. The strategic planning that will begin this process of creating a successful coalition is the initial step. This process, will begin identifying ways to coordinate services and ways of linking agencies and resources in measurable ways. This coordination of care planning can improve the communication among the stakeholders and facilitate data sharing processes. An effective coalition will hold regular meetings that plan and complete the work of the coalition. Minutes of the group should reflect

discussion, action and accountability. Improved communication requires regular updates to the entire coalition. Members have to hold the group accountable for the mission, goals and objectives of the coalition (HUD, 2009).

Laredo Homeless Coalition (LHC) Historical Background

What began in the 1990's as a group of passionate and dedicated individuals advocating for those facing homelessness eventually evolved into a local organization known as the LHC. The visionaries that established the LHC in 2000 identified the need to provide better services to the homeless population in Laredo. As the needs of homeless in Laredo have evolved, so too, have the processes and workflows within the service agencies. These to adapt to change has resulted in multiple conflicting forms, internal policies, and processes that make coordination difficult. Each agency has different mission and vision statements, goals and objectives, and rarely meets to discuss a common vision and goal. Another challenge is the rapid advancement in technology since the Coalition was established 16 years ago. In addition, regional and federal funding agencies are requiring the implementation of software and technology related to assessment, prioritization, identification, and management in order to receive funding. This funding will become increasingly dependent on the individual organizations' ability to meet quality metrics and performance standards. Implementation of technology has been slow and difficult due to limited resources for training and capacity. These challenges have resulted in staff working in different agencies finding it difficult to keep up with competing requirements of funding agencies while continuing to utilize outdated processes and an increased client need. Frequently, the policies and processing of their workflow may not reflect the complexity of the work or allow time to update policies and procedures. Evidence-based solutions are needed to identify best practices and plan the implementation of these policies across agencies so that day-to-day operations run smoothly and individual organizations have the ability to respond to crisis.

There are agencies throughout the community working very hard, but without better coordination and sharing among all organizations, individual organizations will continue to experience a perpetual cycle of impediments and delays in the appropriate data collection and data reconciliation. These obstacles affect the agency's ability to meet quality metrics and performance measures. This is the complex system of assessment and service delivery that has evolved organically in Laredo, which is challenging to navigate. The LHC is in a place where the traditional way of providing care cannot meet the needs of the population nor the stakeholders within the LHC. The LHC currently functions as a housing emergency crisis response system but, it lacks the policies and organizational structure of a planning body that shares the goal of ending homelessness. The LHC will need to develop the organizational capacity in order to effectively address the complex and interrelated issues that result in homelessness. It is the aim of the authors of this report to assist the LHC in those efforts.

Laredo Homeless Coalition (LHC) Organizational Structure

The LHC was incorporated in 1999 as a 501(c)(3) nonprofit organization and has established bylaws, which outline a structure, that includes an executive director, a board of directors and committees. The number of individuals on the board of directors should be 18. The board of directors includes the president, vice-president, recording secretary, corresponding secretary, treasurer, and chaplain. According to the LHC's bylaws, there should be an executive committee consisting of the following: the officers of the board of directors, the chair of the Finance committee, the chair of the Programs committee, and the chair of the Property committee. While the Coalition was originally established as a 501(c)(3), this designation was not continued and today the LHC does not function as a protected nonprofit organization. Its executive director position is a voluntary one. There is an informal core group of individuals identified within the website. However, a list of organizations participating in this coalition group are not easily identified or readily available for the community. There are approximately 20 organizations identified as members of the coalition. Within the intranet of the website the following list of coalition members are: Area Health Education Center (AHEC), Bethany House of Laredo, Border Region, Casa de Misericordia, City of Laredo Health Department, Family Endeavors, Holding Institute Community Center (HCC), Laredo Housing Authority (LHA), Laredo Independent School District (LISD), Serving Children and Adults in Need (SCAN), South Texas Development Council, South Texas Food Bank, Texas Department of Family and Protective Services (TDFPS), Texas Homeless Network (THN), Texas Veterans Commission (TVC), Texas Workforce Commission (TWC), United Independent School District (UISD), Veterans Affairs (VA), Westcare Foundation and Workforce Solutions.

There are multiple organizations providing services in Laredo, such as nonprofit homeless assistance providers, victim service providers, public housing agencies, mental health agencies, government based organizations, city organizations, and nonprofit homeless assistance providers. The Laredo Homeless Coalition is a working group whose mission is to "determine and provide for the basic needs of homeless individuals and families," (Laredo Homeless Coalition, 2017). The group also works to provide programs and services related to housing, mental and physical health, nutrition, clothing, and education.

Balance of State: The Texas Homeless Network (THN)

Texas Homeless Network (THN) is a non-profit membership-based 501(c)(3) organization helping Texas communities prevent and end homelessness. This organization is partially funded through Texas Department of Housing and Community Affairs and Texas Department of State Health Services. THN provides training and technical assistance around the state of Texas helping service providers and communities better serve the homeless population with the end goal of preventing and ending homelessness.

THN identifies local homeless coalitions as groups that plan and deliver homeless services, housing, and supportive services in communities that have a goal of preventing and

ending homelessness (Texas Homeless Network, 2016b). Since 2000, the LHC has been the lead organization addressing the issue of homelessness in Laredo, Texas and has worked with public and private agencies to address the issue of homelessness. In years past, the agencies and individuals working with the LHC developed strategies to secure funding for services provided in the area specifically those related to housing, workforce, and other supportive services. Each agency functioned as independent service providers, each with specific goals and objectives aimed at providing the highest level of service to their specific client populations. Each agency may have utilized a different definition of homelessness in order to determine eligibility criteria. Some agencies provided assistance to the homeless population in Laredo depending on which agency the individual interacted with at any given time and based on whether the individual met eligibility criteria. Currently, there are at least four agencies providing shelter to specific populations and several area agencies providing case management but, many providers view their work as distinct and separate of the work done by colleagues and peers. When community agencies function in silos, they tend to become attuned to the processes and protocols specific to their agency and rarely have the ability to completely understand the processes and protocols for other area service providers. This results in each agency and provider possessing only one perspective of a community wide problem.

Organizational Chart

At present, there is no organizational chart or flowchart that outlines how the agencies and organizations within the coalition interact. A flowchart is proposed using a modified version of the United Way's leadership Team Structure. The name "Community Matters" Collaborative is a name place holder for a restructuring of the Laredo Homeless Coalition. Since the LHC no longer holds 501(c)(3) nonprofit status, changing the name and restructuring the roles and responsibilities of member organizations may help to activate new partnerships and reinvigorate others. It is anticipated that the strategic planning process can determine if this is the right course of action or if continuing with the same name and a modified structure works best.

Exhibit 1. Community Matters Collaborative Team Structure Flowchart
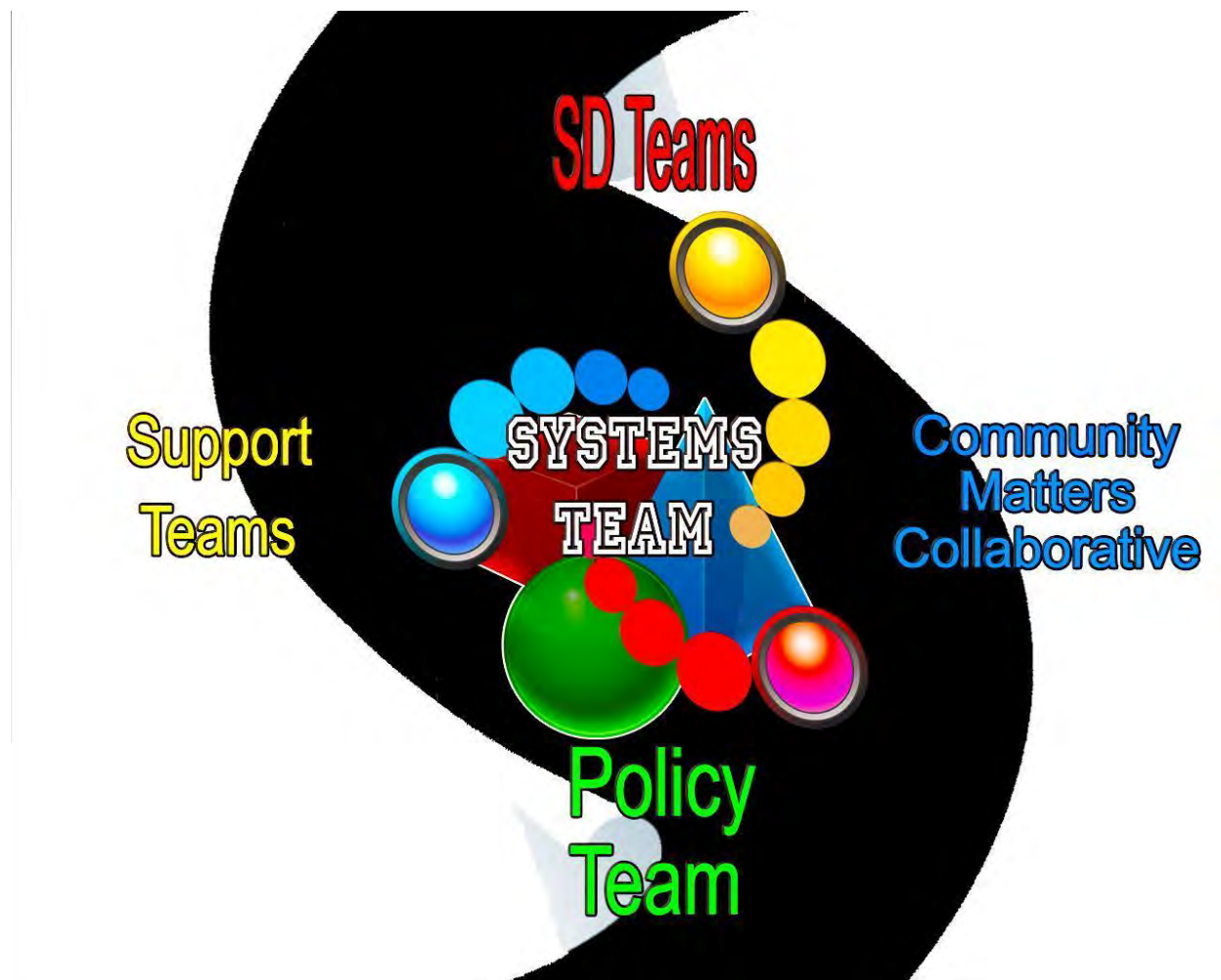
The ***Community Matters Collaborative*** is a name coined to reflect a reimagined Laredo Homeless Coalition. The Collaborative should seek membership from public and private funders as well as, service providers. Thereby, pooling resources for reaching the goals of the Collaborative, which relate to developing local agency infrastructure and human capacity as well as, implementation of a coordinated entry system.

The leadership structure in Exhibit 1 is intended to guide the work. A general description of each aspect of the structural components is provided in the final recommendations section.

PART IV: EVIDENCED BASED SOLUTIONS

Entry Systems

A systematic response to a housing crisis may prevent homelessness. However, if and when homelessness arises it should be of short duration and not reoccur. A community's response to a housing crisis may range from homeless shelters, field outreach, and crisis interventions (THN, 2016a). Providing community members with basic survival needs is crucial; yet, the ultimate objective should be to ensure permanent housing. Shifting from tertiary to primary prevention is key in avoiding and perhaps ending homelessness. Overall, CoC's should be accountable and develop a centralized (single) or decentralized (multiple/coordinated) entry system, which assesses the necessities of each individual and family requiring housing services (THN, 2016a). However, regardless of the type of entry system utilized, a systematic response is vitally necessary. The question lies in identifying the rationale for the housing crisis response entry system current evidence-based literature recommends.

Review of Literature

Literature was reviewed to identify and interpret the findings of comprehensive evidence-based data related to entry systems. A focus was placed on centralized vs. decentralized entry systems to populate relevant literature for the basis of this report. By utilizing a systematic approach, the literature reviewed served as evidence to guide the researchers' recommendations. The process involved searching for relevant literature, critiquing, evaluating, and synthesizing the results with a possibility of encountering gaps in the current literature that may serve as a guide for further research studies. The objective of this section is to provide a thorough review of what has been published pertaining to entry systems. In the following section the methodology, search strategy, results, and discussion will be addressed.

Methodology

Entry systems was selected as the topic and focus of the literature review in order to guide the researchers' recommendations with evidence-based data. After conducting a literature search using the TAMIU Library search engine EBSCO, sufficient literature was retrieved to provide evidence for the researchers.

Search Strategy

The literature search was conducted by utilizing the Texas A&M International University Sue and Radcliffe Killam Library resources. The keywords "homeless persons" and "programs" and "services" and "effectiveness or efficacy or effective or success" and "United States" were searched in Health Source: Nursing/Academic (Hits 15), MEDLINE (Hits 5), CINAHL (Hits 4), ERIC (Hits 140), Academic Source (47), SocINDEX with Full Text (Hits 30), Education Source

(Hits 0), Education Full Text (Hits 0), and Criminal Justice (Hits 4) to identify homelessness definitions, and centralized versus decentralized entry systems. The number of "hits" are non-duplicated sources. The inclusion criteria included full-text, peer-reviewed, academic journals, English language and United States. The publication dates were auto generated from the years 2011-2016. However, articles that were either duplicates, irrelevant, or did not clearly fit the criteria were excluded. After these exclusions the final sample totaled 164 articles. The articles selected identified entry systems as a central theme with either centralized or decentralized entry as its focus and those that focused on a theme closely related were avoided. The results of this review are addressed below.

Background: Homelessness Entry Systems

A homelessness system response requires an entry system or point, much like a front door, that utilizes a tool to assess homelessness and utilizes the data collected to comprehensively guide individualized, referral decisions (National Alliance to End Homelessness, 2011). However, that is solely *one* entry system or point. Furthermore, the referral decision should be based on comprehensive knowledge of each program's specific requirements, population for which they serve, and their availability (NAEH, 2011). Considering that homelessness entry systems are referred to in various ways, we felt compelled to provide the terms that are used at a national (National Alliance to End Homelessness; HUD), state (THN), and local (LHC) level.

National Terms

The U.S. Interagency Council on Homelessness (USICH) organizes and accelerates the national response to homelessness (2015a). USICH uses the term decentralized entry (2015a). The U.S. Department of Housing Urban Development (HUD) uses the terms "centralized, decentralized entry, and coordinated process" which are used interchangeably (HUD, 2015a). The National Alliance to End Homelessness (NAEH), a nonprofit, nonpartisan, organization, goes on to say that entry systems that use the *same* processes can be termed as having a "decentralized entry process"; "decentralized entry system" (NAEH, 2011, p.1). Moreover, NAEH separates entry system or process into different models: centralized and decentralized (2011). Centralized entry refers to one specific location and decentralized entry has multiple sites (NAEH, 2011). Uncoordinated entry systems are unfavorable considering that they result in duplication of data and inefficient use of supportive services. A comparison of centralized and decentralized entry points is provided (See Appendix H). It is important to note that for clarity of this report we utilized National Alliance to End Homelessness definition of centralized and decentralized entry systems.

State Terms: Coordinated (Decentralized) Entry

Texas Homeless Network (THN) utilizes an entry system they refer to as Coordinated Entry System (CES). Texas Balance of State Continuum of Care Coordinated Entry Written Standards Version 0.1 Draft, defines coordinated entry system as "an intake, assessment, and referral/housing placement system that uses standardized tools and processes to assess housing needs and match people to the most appropriate and least intensive intervention needed to end their housing crisis" (p. 6).

According to Texas Homeless Network (2016), a Coordinated Entry System (CES) allows persons experiencing homelessness or those at-risk for homelessness to easily and quickly navigate through their housing crisis and acquire assistance immediately. Prompt and appropriate individualized, referrals for housing interventions are vital to the process. It is important to note that CES is "a powerful process [but] not a program" (p.7). The hallmark of CES is that individuals are prioritized based on need and assigned to the appropriate intervention almost immediately. The goal of CES is to "standardize the access, assessment, and referral process" (p.7). THN states that if communities implement CES, operate simultaneously, and respond systematically to homelessness; it is then, that homelessness can be ended as opposed to simply managed (2016).

According to HUD, there are minimum requirements for a CES: (1) complete coverage of the geographic area, (2) easily accessed by individuals and families seeking housing or services, (3) well-advertised, and (4) includes a comprehensive and standardized tool (THN, 2016). Some qualities for an effective CES are "prioritization, low barrier, person-centered, fair and equal access, emergency services, standardized access and assessment, inclusive, referral to projects and protocols, outreach, ongoing planning and stakeholder consultation, informing local planning, leverage local attributes and capacity, safety planning, using HMIS and other systems for CE, and full coverage of a geographic area" (THN, 2016, p. 7).

Local Terms

The Laredo Homeless Coalition currently does not utilize either a "coordinated" or "decentralized/centralized" (HUD, 2015a; USICH, 2015a; NAEH, 2011) entry system. The current entry is a fragmented, uncoordinated system. Homeless individuals, families, and children in need of assistance access services through self-selection. How and where any homeless individual will choose to access services, is primarily based on individual choice and knowledge of what is available. This is problematic because currently only five agencies are utilizing the HMIS software to track and identify new homeless persons and to follow previously identified homeless clients. For a service delivery system to work, each agency needs to know the eligibility criteria, intake process, and policies for interagency referrals. While an inventory directory of services is a necessary first step, it is not enough. One approach would be to expand the directory to include details about eligibility, intake processes, and protocol for inter-agency referral and follow-up. Although an expanded directory will be helpful, it will not be the solution

to improving the fragmented system which currently exists in the community. In the future, all CoC funded agencies will need to determine if they will utilize a centralized or decentralized entry system. Ultimately the LHC's leadership will be vital in the decision making process and the effective implementation of an entry system that best fits the organizations and community they serve. The advantages and disadvantages of centralized versus decentralized entry systems will be described in the following section and recommendations related to the type of entry system will be found in PART VI.

Advantages & Disadvantages of Decentralized Entry System

A decentralized entry system (DES) is a coordinated multi-site approach to collecting data and provide services as homeless persons access different agencies. Decentralization requires multiple locations across the community to provide intake and assessment. Ideally each location would have the ability to make connections with diversion, prevention, and rapid re-housing resources as well as provide referrals for other services. Decentralized entry systems are best designed for large communities that are spread out geographically.

Disadvantages of a DES are related to loss of consistency, financial burden, and additional resources. Providing coordinated entry at multiple locations may results in a lack of consistency across agencies in terms of provision of services, referrals, and data management.

Another disadvantage is the potential increased financial burden. The implementation across multiple sites may require more staff, enhanced and ongoing training, and additional physical space.

In addition to the loss of consistency and financial burden, there is the ability to attract and retain qualified staff to support the additional workload. The ability of supplying sufficient resources, both financial and other support, should not be underestimated. While there are significant disadvantages, there are also advantages to adopting a DES.

Texas Homeless Network identifies multiple advantages for employing a decentralized entry system. These advantages can be classified as benefits related to function, households experiencing housing crisis, service providers, and the housing service response system. The advantages are described below but must be analyzed based on the current organization's capacity and resources to participate in a decentralized system.

According to Texas Homeless Network (2016), a decentralized entry system does offer some functional advantages such as, aiding with community planning and the ability to quickly and effectively distribute resources based on severity of needs of homeless individuals. This in turn, ensures that those that require immediate assistance can be prioritized. Any information gathered through DES can be inputted into HMIS which can help guide community decisions based on objective, rather than subjective, possibly biased, inaccurate data. (THN, 2016).

Other benefits of DES identified by THN for households with a housing crisis are: (1) regardless of where an individual seeks help, they receive standardized but individualized access to services and housing (equality), (2) those experiencing a housing crisis will make less phone

calls and undergo less eligibility screenings (saves time and effort), (3) those experiencing a housing crisis will be given a definitive answer whether they will or will not receive housing resources (THN, 2016).

The benefits of DES identified by THN for service providers are: (1) promotes collaboration within providers and fosters transparency, (2) augments the appropriateness of referrals, (3) saves time by reducing the time spent answering household calls, eligibility household screening, household waitlist management, and household unit filling (THN, 2016).

Finally, the benefits of DES identified by THN for a housing crisis response system are: (1) provides full advantage for existing finances and resources, (2) creates system flow and decreases waitlists, (3) narrows the focus of shared goals, (4) increases effectiveness/decreases ineffectiveness, (5) increased data accuracy and comprehension, (6) continuous HMIS gap analysis, (7) reduce costs by using efficient services, (8) reduce relapse, and (9) decrease the amount of households experiencing homelessness (THN, 2016).

Advantages & Disadvantages of Centralized Entry Systems

A Centralized Entry System (CES) can be both advantageous and disadvantageous. As previously mentioned in Table 4.1 some drawbacks can be: the need for multiple referrals, face to face assistance, and the center not be equally accessible to all. An advantage to a CES may be that it is easier to handle a great amount of clients and fewer sites are necessary. This is turn, will results in less time spent training and coordinating multiple providers.

Ann Thoreson, Director of Atlantic Homeless Alliance, has implemented New Jersey's Single Point of Entry program in Atlantic County which required a 10-year preparation plan. The program is funded by a social service block grant funding and the Casino Reinvestment Development Authority (CRDA). Thoreson decided to implement a single point of entry system (centralized) since it was identified as best practice. Services were fragmented and there was a lack of communication and connection to services in a timely manner. Thoreson stresses that data collection is extremely important in order to drive allocation of services and resources. An advantage mentioned by this author was the potential for its success and the reduced frustration for the individual and the system. However, coordination is difficult and finding affordable housing and lack of resources were disadvantages noted (Lahey, 2014).

Count Methodology

Quantifying the population of homeless is a challenge nation-wide. Communities across the country big and small struggle to comply with increasing government regulation tied to funding. A limited literature review found that there are two acceptable methods approved by HUD for counting the homeless population. A description of the type of counts and recommendations outlined by HUD follows.

Developing Appropriate Count

It is necessary to approach the goal of ending homelessness in communities with strategies that are based on the best evidence currently available, while recognizing the specific needs of the communities and populations they serve. There exists multiple methods and tools (mandated by HUD) to determine an accurate count of the number of individuals experiencing homelessness within a geographic area. For example, the Homelessness Data Exchange (HDX) is an online tool designed for the submission of data by Continuum of Care (CoC) groups nationwide. The HDX includes: Housing Inventory Count (HIC), PIT Count and Annual Homeless Assessment Report (AHAR). According to HUD, HIC is a point-in-time inventory of provider programs within the CoC that provide beds and units dedicated to serve persons who are homeless and are categorized by the following five program types: (1) emergency shelter, (2) transitional housing, (3) safe haven, (4) rapid re-housing, and (5) permanent supportive housing (2016). The AHAR is a report based primarily on the HMIS data and prepared by HUD, to provide the United States Congress with and outline of the extent and nature of homelessness in America. This report is designed to provide: nationwide estimates of homelessness, demographic characteristics of homeless persons, service use patterns, and the capacity for housing homeless persons (HUD, 2016).

Tool for Decentralized Entry System (DES)

The U.S. Department of Housing and Urban Development (HUD) recommends three strategies for successful DES: utilization of the Housing and Homeless Management Information System (HMIS) software product, Housing Inventory Count (HIC) and Point-In-Time (PIT) survey. There are other tools utilized for special populations such as the veteran population; HUD- Supportive Housing vouchers (HUD-VASH), OSNIUM (a Texas Council on Family Violence software for domestic violence population), and the VI-SPDAT for street outreach.

Homeless Management Information Systems (HMIS)

The U.S. Department of Housing and Urban Development has designated the Housing and Homeless Management Information System (HMIS) as its recommended resource for data collection, management and reporting by continuums of care (CoC). HMIS data is used to not only inform policy at the federal, state and local levels but, it is used to produce an unduplicated count of individuals experiencing homelessness, identify patterns of service use, and measure program effectiveness. HUD expects the use of HMIS data by Continuums of Care to be used for tracking progress in meeting performance goals, community-wide planning and allocation of resources to prevent and end homelessness (HUD, 2016). The HEARTH Act required HUD to establish standards related to HMIS, including standards related to encryption of the data collected and the rights of persons receiving services under the McKinney-Vento Act. Although CoC's are not required to utilize the HMIS software system, it is a software management system that complies with HUD's data collection, management and reporting

standards, and is the system currently utilized by lead agencies in Laredo such as Bethany House, Westcare, and City of Laredo. The HUD-VASH program utilizes a different software to collect data for their population and Casa de Misericordia utilizes a separate software data system as well. Although several area organizations utilize a shared HMIS system, very few have issued intra-agency policies and procedures on how to access, update, and otherwise utilize their HMIS system.

Organizations Using HMIS in Laredo

The results of the interviewing process revealed that Laredo currently has 18 user licenses for access to the HMIS software program among five different organizations. The organizations currently using the HMIS system are: Bethany House, Border Region WestCare/Next Step Program, Catholic Social Services, and Family Endeavors. There may be other organizations also licensed to input data but it has been difficult to confirm. While there are other organizations, Casa de Misericordia does not input data into HMIS due to concerns of violating the Violence Against Women Act (VAWA) which would result in a loss of funding. Casa de Misericordia ensures that their clients have access to the VAWA applications and that the data is uploaded into a software data management system which ensures the information is aggregate, de-identified data. The coalition is working with Casa de Misericordia to collect data from their clients in a way that maintains compliance with all funding requirements.

Studies conducted to assess outcomes related to transitional housing, community-based rapid re-housing, permanent supportive housing, and subsidies, determined that housing choice vouchers had a greater impact on ending family homelessness and housing subsidies and rapid rehousing were the most cost-effective homelessness interventions (HUDb, 2015). With the exception of Bethany House, currently no temporary shelter is inputting data into HMIS. Agencies currently report that there are few policies or protocols within each facility to walk the representative through the process of inputting the data appropriately into the HMIS system. Additionally, the use of HMIS comes with a financial cost to obtain software licensure for organizational use. This cost will need to be considered when determining centralized or decentralized entry and data collection.

Housing Inventory Count (HIC)

One of the Continuum of Care Homeless Assistance Programs is the Housing Inventory Count (HIC). HIC is conducted annually during the last days in January. It provides a snapshot of the CoC's inventory of housing services. The HIC report tallies the number of beds and units available on the night designated for the count by program type (emergency shelter, transitional housing, rapid re-housing, safe haven, and permanent supportive housing), and includes beds dedicated to serve individuals who are homeless.

Vulnerable Index-Service Prioritization Decision Assistance Tool (VI-SPDAT)

VI-SPDAT is the convergence of two evidence based tools used for street outreach assessments. This assessment is composed of the following domains: history of housing and homelessness, risks, socialization and daily function and wellness. The assessment offers

recommendations based on an accurate needs measurement, thus ensuring appropriate referrals for assistance in addressing homelessness.

VI-SPDAT in Laredo

Three area agencies interviewed reported their use of VI-SPDAT, which is a comprehensive and standardized assessment tool. These agencies were: Bethany House, Westcare, and Family Endeavors. There are reports of an additional two agencies utilizing this tool in Laredo. However, this was not able to be confirmed prior to submission of this report to the area stakeholders; so those agencies were not listed in the January 2017 report. The HUD-VASH representative reported their agency uses a similar but more comprehensive assessment tool. Next steps for the city would be to determine the lead agency for the LHC, which many stakeholders identified as Bethany House and designate the lead agency work closely with representatives from the TX BoS CoC. The lead agency must have a staff person allotted work release time to work with the agency and coalition. This responsibility cannot be added onto current work duties required. The agency and its representative would work closely with the Texas Balance of State to identify and implement a comprehensive standardized assessment tool such as the VI-SPDAT and Family VI-SPDAT to identify and prioritize clients for services with the goal of doing so by mid 2017. Identification itself will not be sufficient. Agencies must also prioritize their waiting lists to reflect the implementation of this tool into their day to day workflow. This process should be done in accordance with TX BoS CoC written standards, toolkit, and in close collaboration with the TX BoS CoC staff.

Point -in-Time (PIT) Survey Tools

The PIT count, which is conducted annually on sheltered and biannually on unsheltered populations, helps identify a community's needs. While not required, the Texas Balance of State CoC conducts both counts annually. The data collected from the PIT count is used to measure homelessness on a local, regional, and national level. This data is used to inform the general public, policymakers, and Congress of the extent of homelessness in the United States. Therefore, it is vital for communities who receive federal funding or anticipate applying for future CoC funding; to ensure they are accurately collecting the PIT count and communicating their data effectively. Collecting an accurate PIT count for Laredo would be pivotal to helping the community in their program planning for the fiscal year 2017 and beyond. However, research has demonstrated that there is often a variability in how communities are collecting the PIT and this variability can result in undercounting. Therefore, the LHC must work to obtain the most accurate PIT data. Often, the PIT count is conducted by a lead agency serving the homeless in the community, which in the case of Laredo would be Bethany House.

The Point-in-Time Mobile Application Tool is a mobile application that was developed by HUD as an optional resource for assistance in improving the accuracy of the PIT count beginning 2015. Evaluation of the use of this application has shown a benefit in improving the quality and accuracy of the data collected. It also integrates well with the HMIS data. An

additional benefit of using the application is that it can analyze data related to geographical location. The mobile application was not utilized in 2016 but, stakeholders interviewed expressed interest in moving to the mobile application based on best practices and the improvement in accuracy. HUD now provides the mobile application as open source through December, 2018.

Point-in-Time Count Current Procedure

The process for conducting the 2016 PIT count consisted of approximately ten volunteer teams. Each of these teams consisted of three members who identified a geographic area (the City of Laredo) which was strategically visited to either interview the individuals or extrapolate the information based on the evident number of individuals in a given location. In Part II of this report the demographics of the 2016 PIT count are provided. A table was created to compare select common demographics from the Laredo Homeless Coalition (2016, 2015) *Homeless Count and Characteristics Survey Results* (2015) and Point-In-Count (2016) (See Appendix I).

By viewing the table of data submitted for the 2016 PIT count in Laredo, it becomes apparent that the process of utilizing the PIT paper assessment resulted in the challenges with the accuracy of the data collected. For example, for the category of "individuals who are experiencing homelessness", the 2016 PIT report for Laredo states, "not reported." After interviewing stakeholders who participated in the 2015 and 2016 PIT count, potential solutions suggested include: (1) increasing the number of volunteers who participate in the PIT count, (2) improve training of PIT volunteers, and (3) utilize the free mobile HUD PIT application.

It is a recommendation of the authors of this report that a diverse team of PIT volunteers (from several city organizations) plan and coordinate the 2017 count by: (1) dividing the city of Laredo by council districts (this has been done in other cities such as San Antonio, TX), (2) assign zones within each district, and (3) assign teams to each zone. It is important for communities to refine and improve their PIT data collection processes to more accurately reflect the numbers of unaccompanied youth for 2017. This is of importance due to the fact that HUD and federal partners have decided that PIT counts conducted in January 2017 will serve as the baseline through which HUD and its federal partners will measure future trends. Furthermore, the researchers recommend the LHC work with city and county officials to develop a plan to include a countywide PIT count in the future that would include surrounding areas such as the colonias.

2017 PIT Count

Initially, the authors considered broadening the 2017 PIT count to include Webb county. However, because the decentralized entry system (DES) may need to be implemented during the January 2017-May 2017 timeline and due to the need to conduct the strategic planning during that same time frame, it was decided that the 2017 count would only include the city. Therefore, it was decided that broadening the PIT count in January 2017 could overtax the system that is

currently in place. Many of the same individuals would potentially be working on the PIT, DES, and LHC changes concurrently. Therefore, the team determined that the highest priority tasks should be strategic planning, establishing the process for the city wide PIT count, and working to implement the DES system.

PART V: INVENTORY OF SERVICES

.

Service Directory Organizations

The results of this inventory of services are the creation of a service directory. A list of the agencies and organizations inventoried and included in the directory is provided (See Appendix A). The directory has been created with the dual purpose of providing a synopsis of the organization, outlining the services provided and the hours of operation, and to provide the agency's information on a printable flyer or brochure. The directory is presented in an electronic book format and as a one-inch binder containing each organization's information (within 2 pages) printed in color and inserted into page protectors. The following will provide a summary of the organizations and identify the service component (or components) each agency provides within the community. Below is a map that plots the location of services accessed by the homeless.

Association for the Advanced of Mexican Americans

Association for the Advanced of Mexican Americans (AAMA) Concilio Hispano Libre, also known as, Concilio Hispano Libre, is a drug and alcohol rehabilitation center with a primary focus on substance abuse treatment and services. This center provides pharmacological treatment such as methadone and methadone detoxification services for individuals with opiate addiction.

AAMA Inc. was founded in 1970, and its drug prevention programs began in 1976 with a mission to inspire and empower at-risk Latinos to pursue their potential and achieve success by focusing its efforts on education, workforce readiness and leadership development. It was not until 1994 that AAMA established a center along the Texas/Mexico border. Today the center provides outpatient care as well as, services and programs for: persons with co-occurring mental and substance abuse disorders, pregnant and postpartum women, criminal justice group, counseling, and life skills training.

The service components addressed by this organization are: education, assessment and prevention. This organization addresses the education service component by providing counseling services to their clients. In regards to the assessment and prevention components, this organization addresses them by providing services such as: treatment, outpatient care, partial hospitalization as well as, detoxification services and preventive services. This organization does not address the planning, coordination and outreach, and housing service components.

Asociación Pro Servicios Sociales, Inc.

Asociación Pro Servicios Sociales, Inc. (APSS) was established in 1973 in Laredo, Texas and it was chartered as a non-profit corporation in January, 1975. Since its foundation APSS has provided services to migrant and seasonal farm workers, supported the residents of the Azteca neighborhood by assisting in the organization of the Azteca Economic Development and Preservation Corporation, and a Neighborhood Housing Services program. The services provided are carried out by knowledgeable, bilingual/bicultural personnel, with the awareness of the community's needs.

APSS is a 501(c)(3) private non-profit organization who advocates for and represents those of low socioeconomic status. APSS provides services specific to the needs of migrant-seasonal farm workers, provides social services and conducts activities to reduce hunger. The types of services provided by this organization are: social work services, utilities assistance, rental assistance, food, business services, immigration services, tax preparation services, entrepreneurial services, consortium of charitable organizations, and technical support.

This organization addresses the planning, coordination, education, assessment and prevention components by the provision of the following services: social work services, utilities assistance, rental assistance, food, business services, immigration services, tax preparation services, entrepreneurial services, consortium of charitable organizations, and technical support. APSS does to address the outreach and housing service component.

Bethany House

Bethany House is a 501(c)(3) nonprofit organization, that assists the homeless and other indigent throughout Laredo and Webb County. Bethany House is comprised of four separate facilities: (1) Barbara A. Kazen Center for Hope, (2) Community Shelter Complex & Resource Center, (3) Dining Kitchen and, (4) Vintage Store.

Since its establishment in 1982 by Father Charles McNaboe, Bethany House has evolved from serving seventeen individuals to presently serving over 2000 individuals (homeless, at risk persons in need and families). By 1984, Bethany House officially received non-profit status. In 2009 with the help of Maria Bruni Leyendecker, Bethany house gained its permanent home at 817 Hidalgo Street. In 2014, Bethany House celebrated the completion of the Barbara A. Kazen Center.

Bethany House of Laredo addresses the following service components: planning, and coordination, outreach and education, assessment and prevention, and housing. The planning and coordination components, are addressed through the provision of case management services and referrals to community agencies. For the outreach and education components, this agency provides street corner meals, homebound meals, Kids Cafe, job-skills, life-skills, Luz De Esperanza-Learning Program, after school tutoring, and faith-based services. As for the assessment and the prevention components, this organization provides needs assessment evaluation and food pantry. This organization addresses the housing component by the provision of an emergency shelter and transitional housing.

Border Region

Border Region Behavioral Health Center, originally known as *The Laredo State Center*, was established in 1979 and operated from the former Air Force-Base Hospital providing mental health and mental retardation services to the citizens of Webb, Jim Hogg, Starr, and Zapata counties. In 2001, The Laredo State Center transitioned into a community center. It was not until 2011 that Border Region MHMR decided to change its name to Border Region Behavioral Health Center. Today, the center services over 3500 clients in the South Texas region. Its mission is to promote independence by provide cost-effective services that improve the quality of life.

Border region addresses the following service components: planning, coordination, outreach, education, assessment and prevention. For the planning and coordination components, this organization provides case management services for adult and intensive case management services for children. For the outreach and education components, this organization has an established mobile crisis outreach team, medication training, skills training, and rehabilitation. As for the assessment and the prevention components, this organization provides pre-screening and evaluations, counseling, crisis interventions, continuity of care, medication support, peer and parent support services, and crisis respite. This organization does not address the housing service component.

Community Action Agency (CAA)

The Webb County Community Action Agency (CAA) serves the community of Laredo by providing case management, support services and agency referrals. This agency has four neighborhood service centers "concillios", which include a caseworker, who coordinates services and intakes for their clients. Some of the programs offered by this agency are: utility assistance, rental assistance, meals, grocery bags, home visits for those in need of assistance, outreach services, and referrals for emergency, legal, social and health services.

This agency addresses the planning and coordination, outreach and education, and assessment and prevention service components. For the planning and coordination components, this agency carries out comprehensive anti-poverty plans, provides caseworker assistance to its clients, links to community based services, and transportation services. It addresses the outreach and education components, by providing outreach efforts to low-income seniors, meals on wheels' program, clean-up campaigns, financial literacy classes, construction classes and energy conservation education. For the assessment and prevention components, this agency carries out community wide assessments, financial and non-financial resources, advocacy for those in need and partnerships with other community agencies. This organization does not address the housing service component.

Casa De Misericordia

Casa de Misericordia (CASA) is a 501(c)(3) nonprofit organization which provides secure, temporary residential services to victims of domestic violence. Casa de Misericordia opened its doors on July 7, 1998. CASA's goal is to provide secure, temporary residential services to victims of domestic violence. It offers comprehensive, holistic services and consistent long-term support as well as, an emergency shelter which provides services beyond those of shelter, food and clothing. CASA provides information on possible alternatives for the future of the victims, e.g. housing, education, counseling and more. CASA services victims of domestic violence without regard of race, origin, age, handicap, religion or sexual orientation.

CASA addresses the planning and coordination components by providing community referrals and legal assistance. For the outreach and education components, CASA provides outreach education, non-residential outreach services, legal assistance, and assistance with the judicial system. It addresses the assessment and prevention components with the provision of a residential shelter with a 24-hour crisis line, and counseling services for adult and children. CASA addresses the housing service component by the provision of temporary residential services for victims of domestic violence.

Catholic Social Services

Catholic Social Services of Laredo, Inc. (CSS) is a non-profit organization under the auspices of the Diocese of Laredo. As a multi-program human services agency, CSS is a community-based organization focused on serving the people of the Diocese of Laredo. Since

the 1970's CSS has served the following counties: Webb, Zapata, Maverick and Jim Hogg. Catholic Social Services of Laredo, Inc. was originally established as Laredo Family Counseling Services, providing services to local families. Today, CSS offers a wide range of services and programs focused on serving individuals and families who live in economically distressed areas. All program services are provided without regard of religion, race, income, disability, and/or sexual orientation.

This organization addresses planning, coordination, education, assessment and prevention service components. For the planning and coordination components this agency provides consultations for immigration services and immigration preparation & processing. For the outreach and education components this agency provides document translation. For the assessment and prevention components this agency provides financial and non-financial assistance, prescription medication assistance, senior center program, free meals, activities and exercise. This organization does not address the housing service component.

Children's Advocacy Center

The Children's Advocacy Center of Laredo-Webb County (CAC) is a non-profit organization established in 1995 to service child victims of domestic violence and/or abuse. This agency provides a secure child-sensitive environment for victims of domestic violence and/or abuse, and their families. The type of services this center provides include: counseling, assessment, forensic interviewing, multidisciplinary team meetings, child advocacy, victim assistance services, social services, and community outreach programs. Since its establishment, the CAC has serviced over 7000 clients. Today, CAC offers a full range of services and is dedicated to meet the needs of child victims and their families.

The service components that this agency addresses are: planning, coordination, outreach, education, assessment and prevention. The planning and coordination components are addressed by the provision of social services and child advocates who familiarize the patient with the interview, investigation treatment and services. The outreach and education components are addressed by community outreach programs and victim education. The assessment and prevention components are addressed by the execution of forensic interviews, by the provision of counseling and assessment services, provision and access to a licensed psychologist, ongoing-treatment for victim and family. This organization does not address the housing service component.

Dismas Charities Inc.

Dismas was founded in 1964 and headquartered in Louisville, Kentucky. Dismas Charities Inc. is a national, non-profit organization currently operating 27 facilities and 9 support offices in twelve states. Dismas serves as an entry point for men and women returning to society from state and federal prison by providing residential and non-residential supervision and treatment services. Some of the services provided are: education (focused on increasing the

individual's' re-adaptation to society), employment, employment training, and support services (clothing, family counseling, medical assistance and volunteer opportunities. Dismas is "committed to reducing victimization in communities through high-technology software development, systems integration, industry research, and fee-for-service government contracted reentry services for offenders".

The service components that this agency addresses planning, coordination, outreach, education, assessment and prevention. The planning and coordination components are addressed by the provision of case management services and medical assistance. The outreach and education components are addressed by the provision of religious studies, anger management, women's programs, Alcoholics-Narcotics-Cocaine Anonymous, parenting, marriage enhancement, employment, job skills, GED courses, college courses and money management. The assessment and prevention components are addressed by support services such as: evaluations, residence, clothing and counseling services. Dismas addresses the housing service component by the provision of residence for their clients.

Family Endeavors

Family Endeavors is a non-profit agency with a mission to provide comprehensive, effective, and innovative services that empower people to build better lives for themselves, their families, and their communities. Family Endeavors, Inc. was founded in 1969 in order to meet the most pressing needs of the San Antonio community. In June of 2015, Family Endeavors established its presence in Laredo, TX serving the Veterans in our community.

Locally, Family Endeavors provides an array of services that target Veterans experiencing homelessness and/or those at risk of homelessness. These services include: case management, emergency financial assistance for rent & utilities, street outreach, assistance in obtaining VA benefits, and referrals to other agencies in the community. Today Family Endeavors provides its services throughout 21 locations across six states.

The service components addressed by this agency are: planning, coordination, outreach, education, assessment and prevention. For the planning and coordination components this agency provides case management services, development of housing stability plan, assistance in obtaining veterans benefits and referrals to community agencies, financial counseling and legal assistance. The outreach and education components are addressed by the provision of street outreach services. For the assessment and prevention components this agency provides a needs assessment and financial assistance. This organization does not address the housing service component.

Habitat for Humanity

Habitat for Humanity of Laredo-Webb County is 501(c)(3) nonprofit organization, affiliate of Habitat for Humanity International. Habitat for Humanity of Laredo-Webb County was incorporated and chartered in April 1995. This organization aims to demonstrate the love of

Jesus Christ by manifesting God's love through the creation of opportunities for individuals and families to have a durable shelter to abide in. Habitat for Humanity is an active advocate for affordable housing, a promoter of dignity and hope. Successful work encompasses a "positive, lasting social, economic and spiritual change within our community".

This agency addresses the following service components: planning, coordination, outreach, education, assessment and prevention. The planning and coordination components are addressed by the provision of construction process. The outreach and education components are addressed by the provision of volunteer opportunities, and informational services once a week and its Restore facility which is used for the sale of furniture, appliances, home decor and building material. The assessment and prevention components are addressed by support services such as assessment of low income status and down payment assistance. This organization does not address the housing service component.

Holding Institute

The Holding Community Center also known as Holding Institute and originally known as Laredo Seminary, non-profit organization located in downtown Laredo, Texas. It was founded in 1880 by the Methodist Episcopal Church, South. The school was founded for the instruction of Mexican children by A. H. Sutherland and Joseph Norwood. By 1945, over 35 percent of the students who had attended the school were from Mexico. Unfortunately, due to insufficient funding the school closed its doors in May of 1983. In 1987, under the supervision of a division of the national Methodist Church, the Holding Institute reopened as a community center. Some of the classes offered at that time were: carpentry, upholstering, cake decorating, sewing, English as a second language and occupational skills. Today, in collaboration with the United Methodist Women and other community partners, Holding Institute responds to the needs of women, children, youth, and families. Its focus is primarily on health & wellness, education, discipleship and the improvement of the community.

This agency addresses the following service components: planning, coordination, outreach, education, assessment and prevention. For the planning and coordination components this agency provides referrals to community agencies. The outreach and education components are addressed by the provision of GED classes, college and vocational school guidance, ESL classes, computer courses, citizenship classes and life skills workshop. For the assessment and prevention components this agency provides preventive health care, spiritual health, social health, nutrition courses and counseling. This organization does not address the housing service component.

Laredo Housing Authority

Laredo Housing Authority (LHA) is a 501(c)(3) nonprofit organization which provides, housing assistance to include public housing, section-8 and farm labor. LHA also provides family self-sufficiency instruction, senior/disabled services and residential council opportunities.

Since its establishment in 1939, the Laredo Housing Authority (LHA), has diligently worked with community partners to provide supportive services and self-sufficiency classes with a goal to improve the community's quality of life by serving, collaborating and empowering. LHA currently owns and manages 994 public housing units and administers the Housing Choice Voucher Program for over a 1000 families in Laredo, Zapata and Asherton.

This organization addresses the following service components: planning, coordination, outreach, education, assessment, prevention and housing. The planning and coordination service components are addressed by the provision of supportive services and referrals to other community agencies. The outreach and education components are addressed by the provision of resident councils, self-sufficiency instruction which includes ESL courses, English literacy and Civic education, and GED courses. For the assessment and prevention components this agency provides supportive services and referrals to community agencies. This organization addresses the housing service component by the provision of the housing assistance (public housing, Section-8 and farm labor).

Laredo Veterans Affairs Outpatient Clinic - HUD-VASH

HUD-VASH is a collaborative program between the Department of Veterans Affairs (VA) and the Department of Housing and Urban Development (HUD). This programs' key component is case management services. The frequency and length of time the services are provided depend on the Veterans' functional and economical abilities. Through these case management efforts Veterans can attain various services. These include: eligibility screening services, referrals to VA primary care, mental health and/or substance abuse treatment, disability benefits, income assistance, employment support, money management skills and permanent housing subsidies (for Veteran participants and their immediate families) through its Housing Choice Voucher Program. This program was designed to service the VA's most vulnerable homeless Veterans.

This program addresses the following service components: planning, coordination, outreach, education, assessment and prevention. Through its case management, social work efforts, specialty care referrals and referrals to other community agencies, this agency addresses the planning and coordination service components. The outreach and education components are addressed by the provision of street outreach. For the assessment and prevention components this agency provides primary care services, mental health services, nutritionist services, podiatry services, and rental assistance vouchers. This organization addresses the housing service component by the provision of the HUD-VASH program.

Laredo Workforce Center

Texas Workforce Solutions is comprised of the Texas Workforce Commission and a statewide network of 28 Workforce Development Boards committed to providing services that help workers find and maintain employment as well as, assist employers in hiring the right

candidate for their business. Texas Workforce Solutions' success in the delivery of its services depends on the collaboration and coordination of all its partners, which allow for further development of the Texas workforce. This organization is dedicated to the prosperity of Texans by leading a market-driven workforce system that meets the needs of Texas employers and workers.

The service components addressed by this agency are: planning, coordination, outreach, education, assessment and prevention. For the planning and coordination components this agency provides recruitment assistance, employer services. The outreach and education components are addressed by the provision of job training services, apprenticeship training, career counseling, work experience training, school listing, vocational training, occupational skills training, resume assistance, job preparation classes. For the assessment and prevention components this agency provides an occupational assessment, child care services, career counseling and planning. This organization does not address the housing service component.

Literacy Volunteers of Laredo

Literacy Volunteers of Laredo was founded in 1986 by the City of Laredo, Webb County and United Way. LVL is a major community-based organization that utilizes instructional strategies to teach basic skills that help adults read signs, prescriptions, time cards, checks, and affords them other survival skills that are necessary to be part of today's workforce. Literacy Volunteers of Laredo (LVL) provides confidential, student-centered instruction and assistance, by trained volunteers, free of charge. LVL provides instruction to adults with limited reading, writing, and/or English proficiency skills.

This agency addresses the education service components. The education components are addressed by the provision of courses for English as a second language, reading, writing, speaking, and volunteer training. The service components not addressed the following service components: planning, coordination, outreach, assessment, prevention, and housing.

Serving Children and Adults in Need (SCAN)

Serving Children and Adults in Need (SCAN) is a non-profit organization geared at individuals and families in need of resources to develop their full potential. SCAN was officially formed in 1982 as Stop Child Abuse and Neglect in Laredo, Texas. This organization has provided a variety of comprehensive, culturally sensitive services to a population along the Texas-Mexico Border in Southwest Texas. SCAN has more than 30 programs providing services in 15 different counties: Cameron, Dimmit, Duval, Frio, Hidalgo, Jim Hogg, LaSalle, Maverick, Real, Starr, Uvalde, Val Verde, Webb, Zapata and Zavala. SCAN provides programs focused on prevention, intervention and treatment for children, adolescents, adults and families.

The service components addressed by this agency are: planning, coordination, outreach, education, assessment, prevention and housing. The planning and coordination components are addressed by the provision of the Mujeres Sanas/Specialized Female Outpatient Program for

Adults, Students Taking Action Negating Drugs (STAND) Program, and Youth Recovery Home Adolescent Male Residential Program (Laredo, Eagle Pass & Harlingen/San Benito). The outreach and education components are addressed by the provision of HIV Early Intervention Program, Parenting Awareness & Drug Risk Education (PADRE), Pregnant and Post-Partum Intervention Program, Runaway & Homeless Youth (RHY) Program, Rural Border Intervention (RBI) Program, Sexual Assault Services & Information (SASI) Program, SASI Education Program, SASI Counseling Program and Services to At-Risk (STAR) Youth Program. For the assessment and prevention components this agency provides project HOPES, Safe Haven program, and TAMIU-SCAN prevention project. The housing component is addressed by the provision of an emergency shelter for children and adolescents, adult outpatient treatment program, Esperanza Recovery Home Adolescent Female Residential Services and the Serenidad Recovery Home-Adult Male Residential Services.

The Salvation Army

The Salvation Army, is a faith-based non-profit 501(c)(3) organization created in 1865 by William Booth, an ordained Methodist minister. With the aid of his wife, he formed an evangelical group dedicated to preaching the gospel of Jesus Christ. In addition to preaching, Booth became involved in feeding the hungry and sheltering the homeless and the rehabilitation of alcoholics. Today The Salvation Army operates over seven-thousand centers across the United States.

Its message and ministry are based on the Bible and motivated by the love of God. The mission is descried in four words: "Doing The Most Good". These four words encompass the feeding, clothing, comforting and caring for those in need.

The Salvation Army addresses the following service components: planning, and coordination, outreach and education, assessment and prevention, and housing. The planning and coordination components, are addressed through the provision of case management services and referrals to community agencies. For the outreach and education components, this agency provides youth camps and recreation opportunities, scholarships, summer camps and faith based services. As for the assessment and the prevention components, this organization provides needs assessment evaluation, soup kitchen, food pantry and emergency financial assistance. This organization addresses the housing component by the provision of an emergency shelter for single men and women.

Texas Veterans Commission - Veteran Employment Services

In 1927, The Texas Veterans Commission (TVC) was created to assist and advocate for Texas veterans of the Indian wars, Spanish-American War and World War I. The Texas Veterans Commission (TVC) provides its services through four programs: Claims Representation and Counseling, Veterans employment Services, Veterans Education Program, and Texas Veterans Commission Fund for Veterans' Assistance. The Veteran Employment Service Program focuses

on providing services to low-income, unemployed persons with no high school diploma or GED. Clients in this program are placed on an employment plan which consists of a three step process: (1) resume, (2) interview and (3) keeping employment. Other services offered include: resources to increase chances of getting hired as well as, addressing barriers not limited to: transportation, utilities, food, and housing.

This program addresses the following service components: planning, coordination, outreach, education, assessment and prevention. Through its employment services, referral to community agencies, and statewide hiring events for veterans, this agency addresses the planning and coordination service components. The outreach and education components are addressed by the provision of employer outreach, Veteran Resume Job Club, Veterans Interview Job Club, and Veterans Keeping the Job Club. For the assessment and prevention components this agency provides the veterans with a needs assessment and continuity of care for up to 60 days. This organization does not address the housing service component.

Texas Veterans Leadership Program (TVLP)

The Texas Veterans Leadership Program is under the Texas Workforce Commission. This program's focus in on resource and referral networking, which connects returning veterans of Iraq and Afghanistan with the resources and tools needed to lead productive lives and enjoy the full benefits of the society they have willingly served. One Veterans Resource and Referral Specialist is assigned to each of the 28 workforce development areas, to work closely with Workforce Solutions office staff and Texas Veterans Commission staff who are co-located in Workforce Solutions offices. The Veteran Resource and Referral Specialists focus on outreach to seek out the Veterans in need and serve as resource and referral agents.

The service components that this agency addresses are: planning, coordination, outreach, education, assessment and prevention. The planning and coordination components are addressed by the provision of referrals to community agencies for employment, medical care, mental health, counseling and veteran benefits. The outreach and education components are addressed by outreach services, employer outreach, vocational guidance, and College Credit for Heroes. The assessment and prevention components are addressed by the execution of a needs assessment of the veteran and veterans support group. This organization does not address the housing service component.

Volunteers Serving the Need (VSTN)

Volunteers Serving the Need (VSTN) is a non-profit 501(c)(3) dedicated to serving Webb County veterans and/or their surviving spouses in financial need. VSTN provide the eligible families with supplemental groceries, frozen foods and personal hygiene products each month. Volunteers Serving the Need, also known as The Veterans Project, was founded by Gigi M. E. Ramos to address the special needs of military veterans. The VSTN thrift store opened its doors January 2010. VSTN is funded by the sale of donated items and by financial gifts and grants. All

funds are used to support the Veterans Project's cost to purchase products for distribution to eligible Military Veterans in Webb County and to cover operational expenses.

The service components that this agency addresses are: planning, coordination, outreach, education, assessment and prevention. The planning and coordination components are addressed by the provision of The Veterans Project. The outreach and education components are addressed by outreach services provided by the organization to bring awareness of services to the community and to the veterans in need. The assessment and prevention components are addressed by the execution of a needs assessment of the veteran, provision of personal hygiene items, household items, food items (frozen and nonperishable). This organization does not address the housing service component.

West Care

Westcare Next Step is a non-profit organization which provides permanent supportive housing to single disabled adults experiencing homelessness and are willing to participate in treatment programs. Westcare Foundation was established in 1973 in Las Vegas, Nevada under the name Fitzsimmons House. It was not until 1988 that the organization was renamed WestCare. The original focus of the organization was serving male heroin addicts. The program was soon expanded to serve men and women abusing alcohol and other drugs. Today WestCare provides services in seventeen states and three U.S. territories. The WestCare Next Step program in Laredo, Texas was established in 2012. Today, this program provides an array of services to assist participants in obtaining permanent housing, increasing skills and/or income to achieve independence, and achieving a greater sense of determination.

The service components that this agency addresses are: planning, coordination, outreach, education, assessment, prevention and housing. The planning and coordination components are addressed by the provision of case management services, establishment of service plan, coordination of treatment programs and referrals to other community agencies. The outreach and education components are addressed by life skill programs and the Fair Share Program. The assessment and prevention components are addressed by the execution of a needs assessment, alcohol and drug outpatient treatment services, mental health services, transportation tokens for medical appointments, job interview and to other supportive service agencies. This organization addressed the housing component by the provision of permanent supportive housing.

Cities Visited

In addition to identifying and collecting information from local organizations that may provide services to known, unknown or at risk homeless persons, the team visited four cities (Brownsville, San Antonio, and Austin in the state of Texas and New Orleans, Louisiana) to see how other communities were attempting to end homelessness. Brownsville was selected because it is a border town located in the Texas Balance of State CoC geography and the local community faces challenges in fighting homelessness that does not exist in other places and have

not been captured in the literature.

The following information was gathered during each of the visits made to organizations in all four cities: (1) services provided, (2) methodology of count for homeless persons, and (3) continuum of care and best practices.

1. **Ozanam Center, Good Neighbor Settlement House** and the **Homeless Youth Project**.

    A. **Ozanam Center** – Visit to Ozanam Center completed on Monday, 8/29/2016.
    Met with Victor Maldonado, Ozanam Center Director and Adriana Campos.
    Hours of Operation: Ozanam Center is open 365 days a year/24 hours per day.
    Services provided: case management, housing for up to 30 days, dorms for women housing 86, dorms for men housing 86, large dorm available for overflow population, five family units and three transitional homes, tutoring for children, transportation, food pantry, daily meals, clothing and shoes at no cost.

    The Ozanam Center is also known as "Casa Romero". The methodology of count is the Point in Time. The Ozanam Center coordinates care with Good Neighbor Settlement House. Good Neighbor Settlement House provides transportation to and from their center to residents (overflow) at the Ozanam Center. These residents are provided with breakfast, lunch and dinner as well as clothes. Residents work with caseworkers to determine work history, which may allow them to qualify for rapid re-housing program through HUD. This program assists person by providing help with deposit and 3 months of rent. Barriers addressed are the lack of medical services.

    B. **Good Neighbor Settlement House** – Visit completed on Monday, 8/29/2016.
    Met with Belinda Bradford (956) 542-2368, Bellieswtpea@yahoo.com
    Non-profit multi-service agency in Brownsville, TX
    Hours of Operation: Office hours: Monday –Saturday 8:00am – 6:00pm
    Services provided: Showers, hygiene kit, vouchers, breakfast and lunch programs, "La Posada" dinner program, weekend meals, thrift shop, emergency food pantry, information and referrals, after hour transportation to Ozanam Center, mailing address and telephone for homeless, Mothers Club – sewing, quilting, fellowship, free income tax preparation, educational programs, AA meetings, arts and crafts, outreach services, and computer lab.

    The methodology of count used by this organization is meal count. The individuals are registered with full name and given a meal card. Services are provided to all and are not specific to homeless. Good Neighbor Settlement House coordinated care by provides transportation to and from the Ozanam Center. This organization relies on the help of volunteers. Therefore, coordination of services is established with volunteers for meals, classes, clothes, vegetable garden and all the other services provided. Currently it is in need of medical services. Ms. Bradford voiced that UTB was providing a medical mobile every 4 months. However, those services stopped. This organization is currently working on identifying organization that can provide medical services to this agency.

C. Homeless Youth Project – visit completed on Monday, 8/29/2016.

    Met with Diane Clough - Director (956) 544-6612

    Students serviced: 2515 (2015-2016) and 929 (to date)

    Hours of Operation: Monday –Saturday 8:00am – 5:00pm

    Services provided: enrollment assistance, after school tutorials, counseling, referrals, emergency clothing and shoes, medical services (physicals, screenings, blood work, immunizations, female and male exams provided), vouchers, Kids Café, uniforms and sneakers for students, emergency food, Soup Kitchen, college level assistance, storage, fire reports, free prescriptions, transportation to school of origin, and free haircuts for children.

    This organization's methodology of count is the point in time. Currently this organization coordinates care with many local organizations: American Red Cross, Salvation Army, School districts, Catholic Services, Ozanam Center, Walmart, Academy, Friendship of Women, Good Neighbor Settlement House, Restauracion y Poder Church, Cameron Works Child Care, Communities in Schools, Carlotta K. Petrina Cultural Center, Region One Education Service Center, Su Clinica, Brownsville Community Health Center, Tropical Texas Center, Texas Rio Grande Legal Aid Inc., Texas Health and Human Services Commission, Tip of Texas Family Outreach and Brownsville Literacy Center. This organization's' current challenges identified are: education/training of school staff and community members in identifying signs of children experiencing loss of housing. Current medical services do not include TB exam. The plan for improvement: train staff and community, continue to disseminate information about the program and services provided. Currently working on partnering with organizations/agency that can provide TB serum for administration during their visits from health care providers.

2. **Unity and the Tompson Rebuild Center** in New Orleans, Louisiana.

    A. The Rebuild Center– a day shelter consisting of three organizations (The Harry Tompson Center, Lantern Light and Depaul USA) in collaboration with St. Joseph Catholic Church. Contact phone number: (504) 273-5577

    Visit to The Harry Tompson Center completed on 9/7-11/2016

    Population serviced: 4,978 total homeless persons identified in 2016; 900 (chronic homeless)

    Hours of Operation: Monday –Saturday 8:00am – 2:30pm

    Services provided: showers, phone room, case management/housing placement services, legal aid, medical services, computer classes, hygiene kits, reading glasses, restroom facilities, haircuts and socks as supply allows.

    The methodology of count for this organization is the yearly Point in time survey. Currently this organization coordinates care with two other organizations: Lantern Light and Depaul USA. The current challenges and/or barriers identified are regarding

funding.

3. **Haven for Hope and The Center for Health Care Services-** 1 Haven for Hope Way, San Antonio, Texas.

      Contact number: (210)220-2100

      a. **Services provided:** Rapid Re-housing, Permanent Supportive Housing, financial assistance, medical, dental, vision services, in-house Wellness Program for mental health, in-house Recovery Program for addiction, faith based services, child care services, peer support services, aftercare-up to 12 months, connection to community resources, job training programs, job placement, counseling, Education Programs, life skills, legal services

      The methodology of count for this organization is the point in time survey.

This organization coordination care with the following community agencies: Street Outreach, Courtyard, Prisons/Jails, Schools, Hospitals, Faith Community, and mental health centers.

4. **Tiny House Austin** - also known as the Community First Village- project started by charity Mobile Loaves and Fishes. Located in far East Austin, Texas (9301 Hog Eye Rd.)

      Phone number: (512) 328-7299

      Population serviced: 1,834 homeless people (2015)

      Hours of Operation: Monday-Friday 8:00am – 5:00pm

      Services provided: An innovative mix of affordable housing options, places for worship, study and fellowship, memorial garden, columbarium and prayer labyrinth, medical facility for health screenings, and other support services including hospice and respite care, walking trails, community gardens, outdoor movie theater, community market, bed & breakfast for overnight visits, capital metro bus stop and Wi-Fi.

      The methodology of count is the Point in time summary. This organization coordinated care with the following community agencies: Community First! Resident Care, Community First! Volunteers, Genesis Gardens, Community Forge, Community Art House, Community Inn, Community Market, Community Cinema, Catering & Concessions, and volunteer opportunities. The challenges and/or barriers are that Austin has seen a 20% increase in homeless people since 2015, reaching 2197 all over the city.

PART VI: STRATEGIC PLANNING PROPOSAL

Strategic planning must be the cornerstone for success in developing a comprehensive strategy for preventing and achieving an end to homelessness. Finding solutions to homelessness requires cooperation, a mutual vision, and a commitment from different organizations with different methods of funding, numbers of staff, and diverse missions; to work together for a common coordinated approach to solutions. In an era of budget cutting and having to do more with less, it is important to maximize individual organization services, personnel, and time. One of the ways to achieve an effective, well-organized approach to a complex problem is to utilize the services of an expert in strategic planning. The benefit of bringing in an expert is twofold: (1) the consultant is *neutral*, and (2) the consultant can bring together key personnel from various organizations and negotiate common values and goals. A strategic planning consultation can assist stakeholders to determine the best way to organize, establish overarching goals, and plan objectives and measureable outcomes that are both time sensitive and will hold everyone accountable to one another. With a comprehensive plan in place, work can begin to continue to enhance the PIT count, maximize funding opportunities, and ensure compliance mechanisms are in place going forward.

The LHC website shares the coalition's mission related to the homeless. A vision statement of Advocate Lead Collaborate. There is disagreement about whether a vision statement and mission statement is the same thing or if they can be used interchangeably. The vision statement is a memorable description of what the desired outcome for the organization is; that will energize and move the target forward. A formal strategic planning session with a variety of stakeholders will be held with Sam Woodard of Woodard Nichols and Associates, a community strategic planning consulting firm, from Austin Texas. Sam Woodard has successfully guided community members in Austin/Travis County to develop a local homeless coalition nonprofit, leading to the annual Austin/Travis County Continuum of Care process resulting in a $1.5 million increase in funding. She is scheduled to lead a two-day strategic planning session on January 11th and 12th 2017. The results of these meetings will be a provided in a report from the Woollard Nichols Associates that will be added as an addendum to this report and will be available January 17, 2017.

Strategic Planning Proposal

On November 9, 2016, the research team received the proposal requested from Sam Woollard Nichols & Associates to meet with members of the Laredo Homeless Coalition (originally was planned for November 21 and 22nd), and to determine if LHC would proceed with the creation of a coalition that would meet HUD standards for a Continuum of Care as well as, a five-year plan to end homelessness. This proposed activity includes:

      1.Preparation for meeting

      2. Participate in discussions with Laredo Homeless Coalition Homeless members

      3. Follow-up

Project Cost: $1,500 plus travel reimbursement and lodging. The entire proposal is provided in Appendix J.

10-year Plan 2006-2016

      According the City of Laredo 10-year action plan titled, "Identify, Assist and Control: A ten-year plan to eliminate Chronic Homeless 2006-2016," the working group sought to identify the homeless population, assist the population by providing supportive services, control the homeless population by providing job training, access to housing, and education. The group also sought to collaborate and partner with intergovernmental agencies to facilitate transitioning homeless population while also exploring additional local government resources. Upon review of the plan, it is readily apparent the extensive amount of work the group has accomplished in the previous ten years. They increased capacity among service providers and continued collaborative relationships among agencies even in the case of continued staff turnover within multiple agencies. They expanded services related to emergency housing, meals, education and counseling. For example, area service providers now provide case management, and life skills such as computer education and training to youth and adults. They have also increased the number of daily meals provided through multiple programs in the city. They have implemented a computerized software management system to more accurately identify and track the number of homeless individuals in the area as well as, work towards meeting performance levels of current funding. As the population of homeless individuals has been further defined and categorized, the LHC, the City of Laredo, and community service providers have adapted and revised the focus of their work and the processes for how the work is completed. The City, the LHC and the community agencies should be commended for their progress, passion, and commitment to the people of Laredo.

City of Laredo 2016-2017 Consolidated Plan

      The report published by the City of Laredo in 2015 outlined a plan to improve the lives of the people of Laredo by partnering with local, regional, and national partners to address housing and non-housing needs. The report included an extensive needs assessment with input from community members and partners, as well as, a thorough housing market analysis. The report also provided the City of Laredo Department of Community Development's strategic plan which outlined their function as one to, "provide for a better quality of life for low and moderate income citizens...by creating housing and economic development opportunities, facilitating public improvements, and promoting a clean, healthy and safe environment". With this vision, the City of Laredo is clearly demonstrating their commitment to creating a healthy community, not only for the vulnerable populations but, for all the people of Laredo.

Continuum of Care Process and Plan

One method of providing systems level community-based solutions to end homelessness is through what is known as a Continuum of Care (CoC). A CoC is a community-based planning group that provides the systems level structure and organization necessary to carry out the delivery of services necessary to streamline, coordinate, and optimize the work done by the communities, agencies and organizations, which serve a group within a geographic area. In Texas, THN is the lead agency in the Texas Balance of State Continuum of Care (Tx BoS CoC) and provides services to assist areas not located within the geographic region, served by a smaller independent CoC. As of 2016, there are currently 11 CoC jurisdictions within the state of Texas. The Tx BoS CoC is the lead CoC agency providing assistance to 216 counties in Texas with ten smaller CoC jurisdictions covering the remaining counties. Currently, Laredo and the LHC are part of the BoS CoC jurisdiction TX 607 and in FY 2016, Laredo agencies, such as Bethany House, and WestCare Next Steps, received CoC program funding in the form of Continuum of Care (CoC), Community Development Block Grant (CDBG), Emergency Shelter/Solutions Grant (ESG), and HOME Investment Partnerships Program (HOME) grants. Moving forward, it is recommended that all LHC's located in the TX BoS CoC implement a DES to ensure that there is a systematic response in place to provide immediate access to shelter and crisis services without barriers to entry or utilization of services for those who may experience homelessness. The CES system must be developed based on guidance, tools, and standards from the TX BoS CoC. The LHC can determine some of the components per TX BoS CoC guidance. However, the components must all be reviewed and approved by the CoC. HUD to participate in and implement CE mandates ESG and CoC programs. Following the literature reviews and the interviews with local and regional stakeholders, it is the recommendation of the authors of this report that the LHC remain as part of Tx BoS CoC 607 for the immediate short term of one to two years, while the LHC works through: (1) their strategic planning and anticipated restructuring, (2) piloting and strengthening the PIT methodology (City of Laredo Jan.2017, County of Webb Jan 2018), and (3) implementing a DES within the City of Laredo (May 2017-May 2018). If it is successful, subsequently implement in Webb County (May 2018-May 2019). By May 2019, the LHC can look towards determining if becoming an independent CoC would be to their benefit. Until that time, the LHC should attend TX BoS CoC meetings regularly, submit LHC minutes as required, request training and technical assistance when needed and ensure grantees are in good standing with TX BoS CoC.

PART VII: NEXT STEPS, GAPS AND FINAL RECOMMENDATIONS

Summary

This report is a comprehensive examination of the scope of the homeless problem from a national, state and local perspective. A thorough review of the literature was completed to understand the State of the Science in regards to entry system options and count methodology. A comprehensive inventory of organizations known to interact with or provide services to homeless individuals or families, was completed as part of a needs assessment and directory inventory. Additionally, other organizations were identified but were not contacted. These organizations are provided in the appendix (See Appendix D). Finally, a review of previous Strategic planning was completed. Goals and objectives will be generated based on the results of the two-day strategic planning meetings scheduled for January 11th and 12th 2017. The report generated by the planning process conducted by Sam Woollard of Woollard Nichols & Associates, will be delivered January 17, 2017 and will incorporate the mission, vision, goals, objectives and tasks list for next steps.

Based on the outcome of this strategic planning meeting, the work for the coming year will be determined and an overarching timeline that includes work across all agencies should be developed. Identifying what each organization's priorities and projects are will help to ensure that duplication of effort (when not intentional) does not occur. This will also help to identify organizations who lack sufficient resources and infrastructure; both financial and personnel to support day to day operations while developing projects and grants. New initiatives and grant opportunities that have the potential to add fiscal and personnel resources, should be balanced with the limitations of individual agencies and what collectively can be achieved.

There is a need for a full-time paid position that should be funded by all participating organizations in the coalition. This person would be a navigator or liaison across agencies. This Navigator position would likely work closely with Texas Homeless Network, the Coalition and local government to access technical support, work to increase both infrastructure and financial resources to accomplish the goals and objectives identified during the strategic planning process. The relationship between the navigator and the THN will be critical to ensure that THN provides the technical and educational support required for Laredo's participation in the TX BoS CoC.

This Navigator position requires a person with excellent oral and written communication skills. Experience in grant writing, ability to work collaboratively with a diverse group of people and organizations as well as, be a strong advocate for what is best for the community as a whole rather than any one organization or agency.

The Collaborative Memorandum of Understanding (MOU) could help to ensure the required commitment, duties and responsibilities of all the organizations. Allocation of funding for this position may be difficult but, it is important to the building of infrastructure and human capacity for the work that is needed in an environment that requires increasing accountability,

and asks that more be accomplished with less funding. In the literature related to Homeless Coalitions and Collaborative there is evidence that MOU's can help organization accountability, but may in some instances be too inflexible. The challenge will be to establish buy-in and craft a document that allows for accountability while remaining flexible.

Final Recommendation

The summary of recommendations is presented in the following categories: organizational structure, entry system, count methodology, and service components.

Organizational Structure: Gaps Identified

1. Identity of Laredo Homeless Coalition has changed (no longer 501(c)(3) and original role has shifted over time and organizational structure is now unclear.
2. Funding for Organizational Restructuring and Strategic Planning

   Recommendations:
   - March-April 2017-Redesign/restructure LHC into a more effective coalition to function as lead agency.
   - Develop organization chart with clear roles and responsibilities for all organizations. A leadership structure is recommended in the Organizational structure section of this report.
   - The organizational structure could look something like this:
   - **Community Matter Collaborative**
   - **Service Delivery Teams:** The Service Delivery Teams should include representation from formerly homeless individuals and personnel from agencies representing all service components: Planning and Coordination, Outreach and Education, Assessment, and Housing.
   - **Support Team**: Texas Homeless Network and Any consultants such as the TAMIU research team would be considered part of the support team
   - **Systems Team:** Led by Navigator and composed of manager-level staff from lead agencies, housing providers, Border Region, SCAN, City of Laredo Health Department, Laredo VA Outpatient Clinic (HUD-VASH program), Laredo Veterans Coalition, Laredo Housing Authority, Family Endeavors, Westcare, Other Permanent Supportive Housing Advocate.
   - **Policy Teams:** Smaller group of executive-level decision makers from major organizations in services and housing. This team would be responsible for resolving any policy and funding barriers as well as coordinating funding resources.

This leadership structure is modified from a similar structure used successfully in another city to implement a Coordinated Entry System. The structure is having flexibility for growth and expansion as the Collaborative is developed (The Conrad N. Hilton Foundation, 2015).

- Develop a mechanism for interagency case conferences to improve workflow processes across organizations or agencies. Regularly agreed upon meetings will allow problems to be addressed rapidly while the group continues to strengthen and define new organizational structure.
- LHC agency providers meeting to review their intake and eligibility procedures to identify and remove barriers for clients and streamline all agency processes for the staff.

Funding:
- Long term strategic planning for the Coalition (estimated cost of 3-6-month strategic planning process) **$30,000** with final outcome of restructured coalition with recommendations for roles, responsibilities, committees and subcommittees necessary to carry out coalition duties and implementation of a Coordinated Entry System (CES).
- **Navigator Coordinator Position**.
- The salary range is likely $30,000-$50,000 annual salary plus 30% fringe benefits (this would be entry level to middle range) depending on job responsibilities, educational preparation and skills. If the position is to ultimately be the Director and compliance officer for the Coalition the salary would be higher $70,000 or more.
- This position will need the authority to work with the key stakeholders, serve as the primary point of contact to the TX BoS CoC and ensure routine and ongoing compliance with performance measures and the policies and training required of all participating agencies.

Entry Systems: Gaps Identified

1. There is currently no specified method of entry for homeless individuals and families to seek services. How services are accessed is dependent largely on the individual's personal knowledge. Further, what happens next is not predictable or replicated.

 Recommendations:
- Move to a coordinated entry system.
- Implement a navigation system.
- Improve database and system software to facilitate data sharing among service providers

 Funding:
- Identify funding to improve technology both in terms of infrastructure and personnel development.

Count Methodology: Gaps Identified

1. Few organizations uploading information to HMIS
2. Challenges with PIT count
3. Challenges in obtaining appropriate documents for homeless population such as birth certificate and DD214

4. Lack of systematic process for data collection

5. Need for improvement of process to identify homeless students in the Laredo Independent School District and United Independent School District

Recommendations:

- Invest in training for all staff responsible for HMIS input and provide a regular schedule of refresher training annually.
- Include a comprehensive and standardized assessment tool using the VI-SPDAT and Family VI-SPDAT for use to identify and prioritize clients for services by May 2017 as mandated by Texas Balanced of State standards
- Determine what agency or committee will coordinate and advertise the DES program in the geographic area
- The recommendations regarding improving the Point in Time (PIT) count are divided into first steps in 2017 and then next steps to be implemented in 2018. Ideally, the PIT would include the city of Laredo and all of Webb County. However, due to the short time period before the next count it is recommended that an enhanced count of the City of Laredo occur in 2017 and that a countywide PIT count occur in 2018.
- To improve the accuracy of the PIT count beginning in 2017 the following is recommended:
  - o Utilize the Texas Homeless Network *2017 Point in Time Coordinator Manual* (http://thn.org/balance-of-state-continuum-of-care/coc-resources)
  - o Plan for two PIT counts during the final ten days of January 2017 (if possible). The first count will be a practice count to troubleshoot any problems. The highest count will be the reported count.
  - o Create a committee to work with Bethany House representatives to plan for a larger team of volunteers.
  - o Identify a minimum of 120 volunteers (expect 100 may participate)
  - o Utilize the Texas Balance of State CoC Homeless Management Information System (HMIS) smartphone application to ensure accurate data collection and decrease the amount of time required to manually upload all the data and decrease the time in which data reaches THN and can be analyzed.
  - o Utilize a wide range of community volunteers to assist with the PIT count. This will build local capacity in conducting the PIT count and will increase the probability that the count may be more accurate.
- Ensure that all those surveys submitted meet the HUD definition of homeless so that they will be included and high data quality is exhibited.
- **Future Endeavor**: County wide PIT count to potentially better position the community for prioritization of projects on the local and regional level. Figure 5.1 shows the area that would be included in a countywide count.

Funding:
- Solicit private funders to donate money to purchase incentives to give to the homeless to aid in cooperation with the PIT count (i.e. blankets, flip flops, socks, chap stick, sunscreen, etc.)

Service Components: Gap Identified:
1. Limited stock of transitional housing (can stay up to 2 years by HUD guidelines)
2. Limited stock of permanent supportive housing (case management services and can stay indefinitely)
3. Limited capacity of non-profit homeless service providers handling housing and case management issues.
4. Challenges encountered when crossing territorial boundaries such as service providers with other service providers or city versus county agencies or city/county versus state agencies or committees
5. Lack of consistent policies and procedures across organizations
   - Inconsistent eligibility criteria
   - Impedes referral process
6. Lack of resources for adequate execution of outreach services
7. Lack of sufficient numbers of local health centers which provide integrated primary and behavioral health care
   - Lack of detoxification center

Recommendations
- Land is needed to develop sufficient permanent supportive and other affordable housing units designated for homeless and low income residents.
- Invest in Safety Net Homeless clinic.
- Work with local colleges and university medical, nurse practitioner and physician assistant programs to help with provider coverage.
- Accountability for when barriers are encountered among service providers
- Expand job services
- Continue work with the current Service directory and expand to include the faith-based and community organizations identified in the Appendix D.
- Expand the service directory to include details about eligibility, intake processes, and protocol for inter-agency referral and follow-up.

Funding:
- Utilize a variety of funding sources for land acquisition and construction of all types of housing.
- Seek HRSA/SAMHSA grant money to develop Safety Net clinic and detoxification center.

- Seek federal, private and nonprofit grant funding for projects that meet the triple aim of improving care provided to clients, improving population health, and decreasing the per capita costs of healthcare to the system (community).

References

City of Laredo Department of Community Development. (2015). *2016-2017 One year action plan.* Retrieved from http://www.cityoflaredo.com/CommDev/Admin/Consolidated_Plan/2016-2017_One_Year_Action_Plan-DRAFT.pdf

File, T., & Ryan, C. (2013). Computer and Internet Use in the United States: 2013. American Community Survey Reports, ACS-28, U.S. Census Bureau, Washington, DC, 2014.

Jepson, R. G., Harris, F. M., Platt, S., Tannahill, C. (2010). The effectiveness of interventions to change six health behaviours: A review of reviews. *BMC Public Health*, 10, 538-553. DOI: 10.1186/1471-2458-10-538

Jocoy, C.L. (2012). Counting the homeless: the culture of quantification in American social policy. *Cultural Geographies in practice*, 20(3), 397-403 DOI:10.1177/1474474012454999

Laredo Homeless Coalition. (2016). *Point in Time Survey Results*. Retrieved from http://laredohomelesscoalition.org/wp-content/uploads/2016/06/Laredo-Tabular-Report-2016.pdf

Laredo Homeless Coalition (2015). *Homeless Count and Characteristics Survey Results.* Retrieved from http://laredohomelesscoalition.org/wp-content/uploads/2015/10/Laredo-Homeless-Coalition-FINAL-PIT-Report.pdf

Leahy, K. (2014). Interview with Ann Thoresen, Director of the Atlantic Homeless Alliance: Implementing Atlantic County's Single Point of Entry Program. Retrieved from http://www.njceh.org/single-point-of-entry

Lucas, D.S. (2016). Federal homelessness policy: A robust political economy approach. *The Review of Austrian Economics, 29(*77*)*, 1-27. doi:10.1007/s11138-016-0356-x

Methodist Health Ministries of South Texas, Inc. (2016). The advancing health in south Texas engagement series: *What Matters to You? Summary Report,* 1-24.

National Alliance to End Homelessness. (2011). *One Way In: The Advantages of Introducing System- Wide coordinated entry for Homeless Families.* Retrieved from http://www.endhomelessness.org/page/-/files/3974_file_Coordinated_Entry_5_25_2011.pdf

National Health Care of the Homeless Council. (2016). *What is the official definition of homelessness?* Retrieved from https://www.nhchc.org/faq/official-definition-homelessness/

Pew Research Center. (2015). *America's changing religious landscape Christians decline sharply as a share of population; unaffiliated and other faiths continue to grow*. Retrieved from http://www.pewforum.org/2015/05/12/americas-changing-religious-landscape/

Robbins, S. P. & Judge, T. A. (2013). *Organizational Behavior* (15th ed.). Saddle River, NJ: Prentice Hall.

Spellman, B., Khadduri, B., Sokol, B., Leopold, J., Abt Associates Inc. (2010). Costs associated with first-time homelessness for families and individuals. Retrieved from https://www.huduser.gov/publications/pdf/Costs_Homeless.pdf

Texas Association of Counties, Texas Association of Counties, The County Information Program. (2015). *Webb County Profile.* Retrieved from www.txcip.org/tac/census/profile.php?FIPS=48479

Texas Homeless Network. (2016a). *Texas Balance of State Continuum of Care Coordinated Entry Written Standards. Version 1 Draft.* Submitted for Public Comment November 2016. Retrieved from thn.org/images/DRAFT_Coordinated_Entry_Written_Standards_Public_Comment.pdf

Texas Homeless Network. (2016b). *Texas Balance of State Continuum of Care (TX BoS CoC): CoC basics* [PowerPoint slides]. Retrieved from http://go9host.com/thn/images/4_CoCBasics_1-27-2016RPGmtg.pdf

Texas Secretary of State, Carlos H. Cascos. (n.d.a). Colonias in Webb County. Retrieved from sos.state.tx.us/border/colonias/reg-colonias/webb-2.shtml

Texas Secretary of State, Carlos H. Cascos. (n.d.b.). What is a Colonia? Retrieved from sos.state.tx.us/border/colonias/what_colonia.shtml

Texas State Historical Association. (2010). *Webb County.* Retrieved from https://tshaonline.org/handbook/online/articles/hcw05

The McKinney-Vento Homeless Assistance Act, Sec. 103, 42 U.S.C. 11302 (2009). The McKinney-Vento Homeless Assistance Act as amended by S. 896 the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. Retrieved from https://www.hudexchange.info/resources/documents/HomelessAssistanceActAmendedbyHEARTH.pdf

University of Wisconsin Population Health Institute (2016). *29016 County health rankings*.
Retrieved from
http://www.countyhealthrankings.org/app/texas/2016/compare/snapshot?counties=48_479%2B4
8_453

U.S. Census Bureau (2015). Income and Poverty. Quick Facts Laredo, Texas. Retrieved from
http://www.census.gov/quickfacts/table/INC110215/4841464
U.S. Department of Commerce. (2014). State and county quick facts, Webb County, Texas (Data
file). Retrieved from http://census.gov/quickfacts/table/PST0425215/48479.

U.S. Department of Health and Human Services, Office of Disease Prevention and Health
Promotion. (2016). Social Determinates of Health. Washington, DC. Retrieved from:
http://apps.who.int/iris/bitstream/10665/43943/1/9789241563703_eng.pdf

U.S. Department of Housing and Urban Development. (2007). Defining chronic homelessness: A
technical guide for HUD programs.
Retrieved from:
https://www.hudexchange.info/resources/documents/DefiningChronicHomeless.pdf

U.S. Department of Housing and Urban Development. (2009). Building Effective Coalitions.
Retrieved from:
https://www.hudexchange.info/resources/documents/BuildingEffectiveCoalitions.pdf

U.S. Department of Housing and Urban Development (2012). HUD-VASH resource guide for
permanent housing and clinical care. Retrieved from
http://www.va.gov/HOMELESS/docs/Center/144_HUD-
VASH_Book_WEB_High_Res_final.pdf

U.S. Department of Housing and Urban Development. (2013). Notice PIH 2013-15 (HA):
Guidance on housing individuals and families experiencing homelessness through the public
housing and housing choice voucher programs. Retrieved from:
https://www.hudexchange.info/resources/documents/Notice-pih-2013-15-ha-guidance-on-
housing-individuals-and-families-experiencing-homelessness-through-ph-and-HCV-
programs.pdf

U.S. Department of Housing and Urban Development. (2015a). *Coordinated entry policy brief*.
Retrieved from https://www.hudexchange.info/resources/documents/Coordinated-Entry-Policy-
Brief.pdf

U.S. Department of Housing and Urban Development. (2015b). *Family option study: short-term impacts of housing and services interventions for homeless families.* Retrieved from http://www.huduser.gov/portal/portal/sites/default/files/pdf/FamilyOptionsStudy_final.pdf

U.S. Department of Housing and Urban Development. (2015c). Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH): Defining "Chronically Homeless" Final Rule. Retrieved from https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/

U.S. Department of Housing and Urban Development. (2015d). The 2015 annual homelessness assessment report [AHAR] to Congress. Retrieved from https://www.hudexchange.info/resource/4832/2015-ahar-part-1-pit-estimates-of-homelessness/

 U.S. Department of Housing and Urban Development. (2016a). Continuum of care (CoC) program eligibility requirements. Retrieved from https://www.hudexchange.info/programs/coc/coc-program-eligibility-requirements/

U.S. Department of Housing and Urban Development. (2016b). HMIS requirements. Retrieved from https://www.hudexchange.info/programs/hmis/hmis-requirements

U.S. Department of Veterans Affairs, Supportive Services for Veteran Families Programs. (2016). Overview: *The Master List*. Retrieved from https://www.va.gov/HOMELESS/ssvf/docs/Master_List_Overview_March2016.pdf

U.S. Interagency Council on Homelessness. (2015a). *Crisis Response.* Retrieved from https://www.usich.gov/solutions/crisis-response

U.S. Interagency Council on Homelessness. (2015b). Opening Doors: Federal strategic plan to prevent and end homelessness as amended in 2015. P.40. Retrieved from https://www.usich.gov/resources/uploads/asset_library/USICH_OpeningDoors_Amendment2015_FINAL.pdf

Webb County (1999). *Webb County Comprehensive Colonia Plan.* SEC Project No. 9804.00

World Health Organization. (2013). Social determinants of health. Retrieved from: http://www.who.int/social_determinants/en/

Appendices

Appendix A: List of Agency Directory

Appendix B: Collaborative Memorandum of Understanding

Appendix C: Total Agencies Reviewed

Appendix D: Community and Faith Based Organizations

Appendix E: Homelessness Definitions

Appendix F: Service Components

Appendix G: Current LHC Membership

Appendix H: Comparison of Entry Points

Appendix I: Comparison of 2015-2016 Point-In-Time Count Select Common Data Points

Appendix J: Woollard Nichols Strategic Planning Proposal

Appendix K: Strategic Planning Final Report

Appendix A: List of Agencies Inventoried

- Association for the Advanced of Mexican Americans (AAMA) Concilio Hispano Libre
- Asociación Pro Servicios Sociales, Inc. (APSS)
- Bethany House
- Border Region
- Casa De Misericordia
- Catholic Social Services
- Children's Advocacy Center
- Community Action Agency (CAA)
- Dismas Charities Inc.
- Family Endeavors
- Habitat for Humanity
- Holding Institute
- Laredo Housing Authority
- Laredo Veterans Affairs Outpatient Clinic
- Laredo Workforce Center
- Literacy Volunteers of Laredo
- Serving Children and Adults in Need (SCAN)
- The Salvation Army
- Texas Veterans Commission (TVC)
- Texas Veterans Leadership Program (TVLP)
- Veterans Organizations
- Volunteers Serving the Need (VSTN)
- West Care

Appendix B: Collaborative Memorandum of Understanding
Memorandum of Understanding
between Laredo Homeless Coalition,
XXXX, XXXX, and
the XXXXX to create the
Laredo Area Homeless Services Continuum of Care Group

This Memorandum of Understanding is hereby entered into by and between Laredo Homeless Coalition, and (hereinafter called "Coalition"), XXXXX (hereinafter called "Partners"), and collectively known as the Laredo Area Homeless Services Continuum of Care Group, (hereinafter referred to as "HSCCG").

PREAMBLE

WHEREAS, the Coalition and Partners each have existing service facilities suitable for the delivery of services of the HSCCG; and

WHEREAS, the Partners are an integral part of the Laredo community and desires can sufficiently support the mission of the HSCCG; and

WHEREAS, the University has received a grant to provide financial support for the partner agencies; and

WHEREAS, the Group shall have an Administrative Board to facilitate communication among and between the Coalition's, a Leadership Team has final executive authority for all matters relating to the Partner. and

WHEREAS, these ### entities wish to work collaboratively to benefit both the supportive, social and housing services of the Laredo community through programs to help increase access for homeless populations related to planning and coordination, outreach and education, assessment, healthcare and housing.

NOW, THEREFORE, in consideration of the premises, mutual covenants, and agreements contained herein, the parties hereto hereby agree as follows:

STATEMENT OF GENERAL DUTIES AND OBLIGATION

1.   Coalition RESPONSIBILITIES

a.   This section would list all the roles and responsibilities the coalition would be required to provide.

b.   For example: The Coalition will provide Partner with access to select office facilities and equipment as mutually agreed upon. Such access may include, but is not limited to, furnished offices, conference rooms, meeting rooms, computers, copiers and fax machines.

c.   This Agreement does not create a partnership or a joint venture between the parties hereto, nor does it authorize either party to serve as the legal representative or agent of the other. Neither party will have any right or authority to assume, create, or incur any liability or any obligation of any kind, expressed or implied, against or in the name of or on behalf of the other party

2.   PARTNER RESPONSIBILITIES

a.   XXXX will continue to operate as a 501(c)(3), tax exempt organization so that funds given to XXXX shall be eligible for charitable contribution receipts as allowed by law.

b.   Here would be a list of roles and responsibilities of the individual partner agency.

3.   INDEMNIFICATION

To the extent authorized by law, in consideration of the performance by all parties of this agreement, each party does hereby agree to indemnify and hold harmless all agents, servants, and employees of the other parties from and against any and all claims and liabilities from any acts or omissions of the other parties, their agents, servants, or employees in the performance of this agreement, except that no party shall indemnify the others for claims or liabilities arising solely from the negligence, act, or omission of the other parties.

4.   AMENDMENT

The Parties to this MOU understand that it may be necessary to amend and modify this MOU from time to time in order to address additional concerns or issues; however, no amendment, modification, or alteration of the terms of this agreement shall be binding unless the same be in writing, dated subsequent to the date hereof and duly executed by an authorized representative of the parties hereto.

5.   TERM, RENEWAL, AND TERMINATION OF AGREEMENT

This MOU will be in effect beginning February 1, 2017 through February 1, 2020. After this date, the MOU will be reviewed on an annual basis and the parties may mutually agree to renew the MOU for successive one (1) year terms. The Coalition, and Partner reserve and have the right to terminate this MOU upon service of 90 days' written notice to the other parties.

6.   SEVERABILITY

If any clause or provision of this agreement is determined to be illegal, invalid, or unenforceable under present or future laws effective during the term of this agreement, including any renewals, then in that event it is the intent of the parties hereto that the remainder of this agreement shall not be affected thereby, and it is also the intent of the parties to this agreement that in lieu of each clause or provision of this agreement that is illegal, invalid, or unenforceable there be added as part of this agreement a clause or provision as similar in terms to such illegal, invalid or unenforceable clause or provision as may be possible and be legal, valid and enforceable.

7.   NON-DISCRIMINATION

This MOU shall comply Civil Rights Protections and Compliance.

The Coalition will provide equal opportunity for employment to all persons regardless of race, color, sex, religion, national origin, age, disability, genetic information, veteran status, sexual orientation or gender identity and will strive to achieve full and equal employment opportunity throughout the system.

Any act of illegal discrimination by any party or their agents or employees shall be reported to the University and appropriate Partner and investigated by the University, per its standard administrative procedure. The investigative report shall be delivered to the named University and Partner point of contact for review, should the claim be substantiated it shall be considered non-compliance with this agreement and may result in the immediate termination of the Partner's participation in this MOU.

8.   NOTICES

Any notice required or permitted under this Agreement must be in writing, and shall be deemed to be delivered (whether actually received or not) when deposited with the United States Postal Service, postage prepaid, certified mail, return receipt requested, and addressed to the intended recipient at the address set out below. Notice may also be given by regular mail, personal delivery, courier delivery, facsimile transmission, email or other commercially reasonable means and will be effective when actually received. The University, College and Philharmonic can change their respective notice address by sending to the other parties a notice of the new address. Notices should be addressed as follows:

To Laredo Homeless Coalition:
                        Laredo Homeless Coalition
                        Attn: Director
                        Address:
                        Laredo, Texas, 78041

To Partner 1:

To: Partner 2 Name:

9.   TEXAS LAW TO APPLY

This agreement shall be constructed under and in accordance with the laws of the State of Texas and all obligations of the parties created hereunder are performable in Webb County, Texas.

10. FORCE MAJEURE

No party to this agreement shall be required to perform any term, condition, or covenant in this agreement so long as performance is delayed or prevented by force majeure which shall mean acts of God, strikes, lockouts, material or labor restrictions by a governmental authority,

civil riots, floods, and any other cause not reasonably within the control of either party to this agreement and which by the exercise of due diligence such party is unable, wholly or in part, to prevent or overcome. If by reason or force majeure, any party is prevented from full performance of its obligations under this agreement, written notice shall be provided to the other parties within three days.

11. CAPTIONS

The captions contained in this agreement are for convenience of reference only and in no way limit or enlarge the terms and conditions of this agreement.

12. AUTHORITY

The signers of this agreement hereby represent and warrant that they have authority to execute this agreement on behalf of each of their respective entities.

IN WITNESS THEREOF, the parties have duly approved this Memorandum of Understanding, executed in triplicate originals on this _____ day of _____, 2017.

Laredo Homeless Coalition

By: _____
       Insert name

Insert Partner Agency Name

By: _____
       Insert name

Insert Partner Agency

By: _____
       Insert name

Appendix C: Total Agencies Reviewed

AAMA

Adult Basic Education Program

American Legion Post 59

Arbol de Vida Iglesia Cristiana

Area Health Education Center

Asociacion Pro Servicios Sociales Aztlan

Bethany House of Laredo

Bethel Lutheran Church

Big Brother-Big Sister of So. TX

Casa de Misericordia

Catholic Social Services of Laredo

Catholic War Veterans of Laredo

Centro Familiar Cristiano

Child Care Management Services

Children's Advocacy Center

Church of Jesus Christ of LDS

City of Laredo Department of Community Development

Communities in Schools

Community Action Agency

Community Action Agency-Elderly Nutrition Program

Congregation of St. John

Disabled American Veterans

Episcopal Christ Church

Eucharistic Missionary Society

Faith Lutheran Church Inc.

First Assembly of God

First Baptist Church

First Nazarene Church

First Presbyterian Church of Laredo (EPC)

First United Methodist Church

Grace Bible Church

Habitat for Humanity of Laredo Inc.

Heights Baptist Church

Holding Institute

Iglesia Adventist del Septimo Dia Church

Iglesia Bautista

Iglesia Isaias 35

International Good Neighbor Council

Jehovah's Witnesses

Jehovah's Witnesses

Jehovah's Witnesses Central

Korean Baptist Church - Laredo

Korean War Veterans 1908

La Trinidad United Methodist

Laredo Chamber of Commerce

Laredo Christian Union Church

Laredo Development Foundation

Laredo English 7th Day Adventist

Laredo Housing Authority

Laredo Transportation Association

Laredo VA Outpatient Clinic

Laredo Veterans Coalition

Latin American Lutheran Mission

Literacy Volunteers of Laredo

LOVED

Lulac Council #12

Lulac Council #624

Lulac Council #7

Lulac Haven

Mines Road Baptist Church

National Association of Hispanic Elderly

New Beginning House of Worship

New Vision Community Church

Organizational Name

Presbyterian Church Sinai

Rio Grande Missionary Help

S.C.A.N.

Safe Haven

Sisters Of Mercy Of The Americas, Inc.

South Texas Afghanistan Iraq Veterans Association

St. Vincent de Paul Society

Templo Bethel del CLADIC

The Church of Jesus Christ of Latter - day Saints

The Universal Church

The Universal Church

Turning Point Assembly

United Baptist Church

United Way of Laredo

Universal Church

Vietnam Veterans of Laredo Association

Volunteers Serving The Need

Zion Lil Kingdom

Appendix D: Community and Faith Based Organizations
Future Contact (Community)

American Legion Post 669	Kidney Foundation of Laredo
American Red Cross	La Azteca Neighborhood
Border Area Nutrition Council Inc.	Laredo Independent School District
Boys & Girls Club of Laredo	Laredo Main Street/Farmers Market
Catholic Daughters of America	Laredo Medical Center
Dismas Charities	Leadership Laredo Association
Doctors Hospital of Laredo	Leadership Texas Association
Families for Autism Support and Awareness	March of Dimes
Gateway Community Health Center	United Independent School District

Future Contact (Faith Based)

Arkansas Avenue Church of Christ	Iglesia Cristiana Emmanuel	Santa Margarita de Escocia Catholic Church
Blessed Sacrament Catholic Church	Iglesia Cristiana Misericordia	Santo Niño Catholic Church
Bridge Ministries	Iglesia De Cristo	Seventh Day Adventist Church
Buen Pastor Asamblea De Dios	Iglesia De Cristo Misonera	Seventh - Day Adventist Church
Casa De Oracion (House of Prayer)	Laredo Church of Christ	Sisters Of Mercy Of The Americas, Inc
Christ Miracle Center	Light of the World Church	Spanish Assemblies of God - Cristo Rey A - D
Christ The King Catholic Church	Lighthouse Assembly of God	St Vincent De Paul Church
Christ Worship Center	Maranatha Church of Laredo	St. Frances Cabrini Catholic Church
Cristo Terapia Ministries Inc	Ministerios De Fe Y Poder	St. Joseph Catholic Church
Diocese of Corpus Christi	Mision Bautista Hefziba	St. Jude Catholic Church
Diocese of Corpus Christi	New Vision Community Church	Templo Bethel del CLADIC
Diocese of Corpus Christi	Northside Church of Christ of Laredo	Templo Cristiano Piedra
Diocese of Laredo	Nuestra Sra Del Rosario Catholic Church	Templo Vida Nueva
Diocese of Laredo Pastoral Center	Our Lady Guadalupe Catholic Church	Texas Mcallen Msn Church - Jesus
Divine Mercy Catholic Church	Presbyterian Church Sinai	The Church of Jesus Christ of Latter - day Saints
Dunamis Ministries	Primera Iglesia Bautista	The Universal Church
El Buen Pastor Assembly of God Church	Primera Iglesia Bautista Laredo	The Universal Church
First Christian Church	Rio Bravo Community Church	Turning Point Assembly
Holy Family Catholic Church	Rio Grande Missionary Help	United Baptist Church
Holy Spirit Retreat Center	Saint Patrick Catholic Church	Universal Church
Iglesia Bautista - Loma Alta Church	Saint Peter the Apostle Catholic Church	Zion Lil Kingdom
Iglesia Bautista Loma	San Francisco Javier Catholic Church	
Iglesia Bautista Nueva Vida	San Luis Rey Catholic Church	
Iglesia Bautista Nuevo	San Martin De Porres Catholic Church	

Appendix E: Homelessness Definitions

Type	Definitions related to Homelessness and Risk for Homelessness
Person	*A homeless individual is defined in section 330(h)(5)(A) as "an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility (e.g., shelters) that provides temporary living accommodations, and an individual who is a resident in transitional housing." A homeless person is an individual without permanent housing who may live on the streets; stay in a shelter, mission, single room occupancy facilities, abandoned building or vehicle; or in any other unstable or non-permanent situation. [Section 330 of the Public Health Service Act (42 U.S.C., 254b)]* (NHCHC, 2016) *homeless" as "a person sleeping in a place not meant for human habitation (e.g. living on the streets, for example) OR living in a homeless emergency shelter* (HUD, 2007, p. 3).
Double-up	*An individual may be considered to be homeless if that person is "doubled up," a term that refers to a situation where individuals are unable to maintain their housing situation and are forced to stay with a series of friends and/or extended family members. In addition, previously homeless individuals who are to be released from a prison or a hospital may be considered homeless if they do not have a stable housing situation to which they can return. A recognition of the instability of an individual's living arrangements is critical to the definition of homelessness. (HRSA/Bureau of Primary Health Care, Program Assistance Letter 99-12, Health Care for the Homeless Principles of Practice)* (NHCHC, 2016). *An individual or family who will imminently lose their housing, including housing they are sharing with others, as evidenced by credible evidence indicating that the owner or renter of the housing will not allow the individual or family to stay for more than 14 days, and who has no subsequent residence identified; and who lacks the resources or support networks needed to obtain other permanent housing* (HEARTH ACT, 2009).
At risk	*(A) has income below 30 percent of median income for the geographic area; (B) has insufficient resources immediately available to attain housing stability; and (C)(i) has moved frequently because of economic reasons; (ii) is living in the home of another because of economic hardship; (iii) has been notified that their right to occupy their current housing or living situation will be terminated; (iv) lives in a hotel or motel;(v) lives in severely overcrowded housing; (vi) is exiting an institution; or (vii) otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness* (The McKinney-Vento Homeless Assistance Act, 2009)
Chronic	*(i) is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter;(ii) has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and (iii) has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions.* (The McKinney-Vento Homeless Assistance Act, 2009). *Either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, OR (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years." This definition is adopted by HUD from a federal standard that was arrived upon through collective decision making by a team of federal agencies including HUD, the U.S. Department of Labor, the U.S. Department of Health and Human Services, the U.S. Department of Veterans Affairs, and the U.S. Interagency Council on Homelessness* (HUD, 2007, p. 3).

Appendix F: Service Components

Agency	Planning & Coordination	Outreach & Education	Assessment & Prevention	Housing
Association for the Advanced of Mexican Americans	+	+	+	
Asociación Pro Servicios Sociales, Inc.	+	+	+	
Bethany House	+	+	+	+
Border Region	+	+	+	
Community Action Agency	+	+	+	+
Casa De Misericordia	+	+	+	+
Catholic Social Services	+	+	+	
Children's Advocacy Center	+	+	+	
Dismas Charities Inc.	+	+	+	
Family Endeavors	+	+	+	
Habitat for Humanity	+	+	+	
Holding Institute	+	+	+	
Laredo VA Outpatient Clinic	+	+	+	
Laredo Workforce Center	+	+	+	
Literacy Volunteers of Laredo		+		
Serving Children and Adults in Need	+	+	+	+
Texas Veterans Commission	+	+	+	
Texas Veterans Leadership Program	+	+	+	
Volunteers Serving the Need	+	+	+	
West Care	+	+	+	+

+ Services Provided Non-Sufficient   **++** Services Provided Moderately Sufficient   **+++** Services Adequate

Appendix G: Current LHC Membership

A brief summary of each organization's structure, purpose, and primary services provided. In other sections of this report additional information related to specific organizations will be specified to provide clarity. Information provided was obtained in some instances through multiple sources (personal communication, interviews, telephone calls, and websites) and was verified to the extent possible.

Area Health Education Center
The Area Health Education Center of the Mid Rio Grande Border Area (MRGB AHEC) is an outreach program under the University of Texas Health Science Center at San Antonio and is a 501(c)(3) organization with a mission to enhance the quality of life in our communities by increasing the number of well-trained health care workers; enhancing academic resources; and fostering a healthy lifestyle through community education programs.

Bethany House
Bethany House is a 501(c)(3) non-profit organization, that assists the homeless and other indigent throughout Laredo and Webb County. Bethany House is comprised of four separate facilities: (1) Barbara A. Kazen Center for Hope, (2) Community Shelter Complex & Resource Center, (3) Dining Kitchen and, (4) Vintage Store.

Border Region
Border Region Behavioral Health Center is a non-profit organization, that services individuals with mental and health illness. Through the Projects for Assistance in Transition from Homelessness Program (PATH), Border Region Behavioral Health Center, extends its services to the citizens of Webb, Jim Hogg, Starr, and Zapata counties.

Casa de Misericordia
Casa de Misericordia (CASA) is a 501(c)(3) nonprofit organization which provides secure, temporary residential services to victims of domestic violence. It offers comprehensive, holistic services and consistent long-term support as well as, an emergency shelter which provides services beyond those of shelter, food and clothing.

City of Laredo Health Department
The City of Laredo Health Department, provides an array of services to the community and the homeless population. These services include: health promotion and prevention, preparedness, disease control, and health care access.

Family Endeavors
Family Endeavors is a non-profit agency with a mission to provide comprehensive, effective, and innovative services that empower people to build better lives for themselves, their families, and their communities. Locally, Family Endeavors provides an array of services that target Veterans experiencing homelessness and/or those at risk of homelessness.

Holding Institute Community Center
Holding Institute Community Center is a non-profit organization located in downtown Laredo, Texas. In collaboration with the United Methodist Women and other community partners, Holding Institute responds to the needs of women, children, youth, and families. Its focus is primarily on health & wellness, education, discipleship and the improvement of the community.

Laredo Housing Authority
Laredo Housing Authority (LHA) provides quality housing and resident services for those with limited incomes through programs such as subsidized rental assistance funded by the U.S. Department of Housing and Urban Development (HUD).

Laredo Independent School District
The Laredo Independent School District (LISD) is made up of 33 educational institutions, yielding a yearly average of 25,000 enrolled students and over 4,500 employees. LISD has established agreements with multiple community agencies for the purpose of addressing the student's needs.

City of Laredo Community Development Department
The City of Laredo Community Development Department manages funds from the 2016 Emergency Solutions Grants (ESG) Program, Community Development Block Grants (CBDG), and 2016 Home Investment Partnerships Program (HOME) (City of Laredo Action Plan, 2015). The City of Laredo Municipal Housing Division falls under the umbrella of services provided by the City of Laredo Community Development Department.

Serving Children and Adults in Need (SCAN)
Serving Children and Adults in Need (SCAN) is a non-profit organization geared at individuals and families in need of resources to develop their full potential. SCAN provides programs focused on prevention, intervention and treatment for children, adolescents, adults and families experiencing substance abuse, homelessness, child abuse, developmental disorders, delinquency, among others.

South Texas Development Council
The South Texas Development Council (STDC) was organized in 1956 to serve local governments in its four county region (Webb, Jim Hogg, Starr, and Zapata). The primary focus of STDC is to serve as advocate, planner, and coordinator of initiatives that, when undertaken on a regional basis, can be more effective and efficient.

South Texas Food Bank
The South Texas Food Bank is a 501(c)(3) non-profit organization that seeks to end hunger in South Texas by mobilizing any and all available resources to fight hunger in our area. By conducting hunger education and awareness campaigns on the realities of hunger in our area, the Food Bank also seeks to energize the community to get involved and support hunger relief

Texas Department of Family and Protective Services
The Texas Department of Family and Protective Services (DFPS) works with communities to protect children, the elderly, and people with disabilities from abuse, neglect, and exploitation. It also works to protect the health and safety of children in daycare, as well as foster care and other types of 24-hour care. This is accomplished through investigations, services and referrals, regulation, and prevention programs.

Texas Veterans Commission-Veterans Employment Services
The Texas Veterans Commission (TVC) was created to assist and advocate for Texas veterans of the Indian wars, Spanish-American War and World War I. It provides its services through four programs: Claims Representation and Counseling, Veterans Employment Services, Veterans Education Program, and Texas Veterans Commission Fund for Veterans' Assistance.

Texas Workforce Commission-Texas Veterans Leadership Program
The Texas Veterans Leadership Program is under the Texas Workforce Commission. This program's focus in on resource and referral networking, which connects returning veterans of Iraq and Afghanistan with the resources and tools needed to lead productive lives and enjoy the full benefits of the society they have willingly served.

Texas Workforce Solutions
Texas Workforce Solutions is comprised of the Texas Workforce Commission and a statewide network of 28 Workforce Development Boards committed to providing services that help workers find and maintain employment as well as, assist employers in hiring the right candidate for their business. Texas Workforce Solutions' success in the delivery of its services depends on the collaboration and coordination of all its partners, which allow for further development of the Texas workforce.

United Independent School District
The United Independent School District (UISD) is made up of 42 educational institutions serving over 42,000 students. UISD provides an array of services to identified homeless students that are coordinated by a homeless education and foster care liaison.

Veterans Affairs-HUD-VASH Program
HUD-VASH is a collaborative program between HUD and VA that combines HUD housing vouchers with VA supportive services to help Veterans who are homeless and their families find and sustain permanent housing. Partnerships with HUD and VA case managers work to connect these homeless Veterans with support services.

Westcare Next Step Program
Westcare Next Step is a non-profit organization that provides permanent supportive housing to single disabled adults experiencing homelessness and are willing to participate in treatment programs. The WestCare Next Step program in Laredo, Texas was established in 2012. Today, this program provides an array of services to assist participants in obtaining permanent housing, increasing skills and/or income to achieve independence, and achieving a greater sense of determination.

The Texas Homeless Network is the organization through Texas Balance of State to provide support in terms of technical expertise, planning, assessment and evaluation. A representative from THN attends some of the meetings of the LHC. Both organizations would benefit from strengthening this relationship.

Appendix H: Comparisons of Entry Points

	Physically Geographically Centralized	**Centralized Telephone (i.e. "211")**	**Decentralized**
Physical Requirements	A single location building, room, or space	Space for phones/hotline staff	Multiple coordinated locations throughout the community
Ideal Community	Physically small communities or communities with reliable public transit systems	Any; may be particularly useful in physically large or spread-out communities	Physically large or spread-out communities
Ideal Staffing	Workers who can handle intake and assessment (may or may not be case managers)	Workers who can handle intake and basic assessment	Workers who can handle intake and assessment (may or may not be case managers)
Ideal Services	Intake and assessment connection to diversion, prevention, and rapid re-housing resources; referrals to other services; other services as decide by the community	Intake and assessment referrals to other services; other services as decided by the community	Intake and assessment; connection to diversion, prevention, and rapid re-housing resources; referrals to other services; other services as decided by the community
Drawbacks	Center may not be equally accessible to everyone	Need for additional referrals/in-person help may slow down the process of getting services/housing	Less control over consistency of services and data management; potentially more costly (may require more staff, more space than physically centralized model)
Advantages	Fewer sites necessary; no time/training needed to work on coordinating multiple providers	Easier to handle a larger number of clients	More locations available to clients

Appendix I: Comparison of 2015 and 2016 Point-In-Time Count Select Common Data Points

Point-In-Time Data	2015	2016
Number of surveys recorded	173	129
Number of adults in households	178	133
Number of children in households	31	35
Total number of people	209	168
Total number of homeless people	156	(Not Reported)
Chronically Homeless Households	(Not Reported)	19
Male	120	91
Female	44	37
Transgender	1	0
White	149	117
Black or African American	7	3
Asian	1	0
Two or more (race)	0	6
Hispanic	133	106
Nighttime Residence of Households	159 (17 categories)	129 (4 categories)
Household Makeup	161	129
1st time homeless in the past 3 years	77	60
2-3 episodes in the past 3 years	20	30
At least 4 episodes in the past 3 years	18	19
Continuously homeless for a year or more	40	15
Reasons for Homelessness	301(13 categories)	317 (27 categories)
Able to work (yes)	103	85
Able to work (no)	57	42
Physical/Mental Disability	215	160

Laredo Homeless Coalition (2016, 2015).

Appendix J: Woollard Nichols Strategic Planning Proposal

PROPOSAL

To: Monica Alleman, TAMIU

From: Sam Woollard, Woollard Nichols & Associates

Date: November 9, 2016

Re: Proposal for meeting with Laredo Homeless Coalition members the afternoon of November 21 and morning of November 22nd

Monica: Per our conversation, the following is proposal for a meeting with members of the Laredo Homeless Coalition to determine if they want to proceed with creation of a coalition that will meet the HUD standards for a Continuum of Care as well as a five-year plan to end homelessness. The proposed activities include:

1. **Preparation for meeting:**

· Review any previous planning work and organizational materials of the Laredo Homeless Coalition

· Meet with Dr. Alleman to review itinerary and critical conversations

· Provide Dr. Alleman with materials pertinent to HUD requirements for a CoC

2. **Participate in discussions with Laredo Homeless Coalition members:**

· Share experience with CoC's in Austin and San Antonio

· Outline HUD requirements and expectations for CoC's

· Discuss community's willingness to create a formal CoC and the steps that will need to be taken

3. **Follow Up:**

· Debrief with Dr. Alleman to assess the coalition's strengths and challenges and determine whether there is commitment for moving forward.

PROJECT COST: $1,500 + one-night hotel stay and travel reimbursement (mileage at federal rate if take own car)

About Woollard Nichols and Associates:

WNA was formed in 2013 by Sam Woollard and Kelly Nichols as a firm with a mission to be trusted stewards serving their clients' needs and producing results; and a vision to create, grow and sustain initiatives that result in positive social outcomes. The company provides guidance and support for organizations and initiatives in the areas of Strategy and Decision Making; Coalition Support, and Resource Development.

Support to be provided by:

Sam Woollard. Sam has spent over twenty years working in and around the non-profit sector in Central Texas. At WNA and in her previous work with Knox-Woollard Professional Management, Sam leads and coordinates strategic planning efforts, serves as a project manager, conducts research, and compiles community reports. Sam currently provides strategic support and guidance to One Voice Central Texas, leads the annual HUD Continuum of Care application for ECHO, and is coordinating a community substance use planning initiative for Austin Travis County Integral Care. She has provided strategic planning support for many local organizations and their Boards, including, the YWCA of Greater Austin, Meals on Wheels Texas, Meals on Wheels and More, Best Single Source Plus, and the Aging Services Council.

Please contact me at 512-217-6862 or sam@woollardnichols.com with any questions.

http://www.woollardnichols.com/

Laredo Housing Coalition
Strategic Discussion Report

January 2017

On January 11th and 12th 2017, key members of the Laredo community gathered to discuss the Laredo Housing Coalition, its' purpose, and how to move forward to effectively address homelessness in the Laredo area. Following are the results from the strategic discussion, which was facilitated by Sam Woollard of Woollard Nichols and Associates.

Goals for the Strategic Discussions

Based on previous discussions, the original goals of the planning session were:
- ❑ Receive update of TAMIU report
- ❑ Outline HUD requirements and expectations for homeless Continuums of Care
- ❑ Discuss strengths, challenges, and opportunities of Laredo Homeless Coalition
- ❑ Discuss pros and cons of becoming a formal Continuum of Care
- ❑ Identify next steps

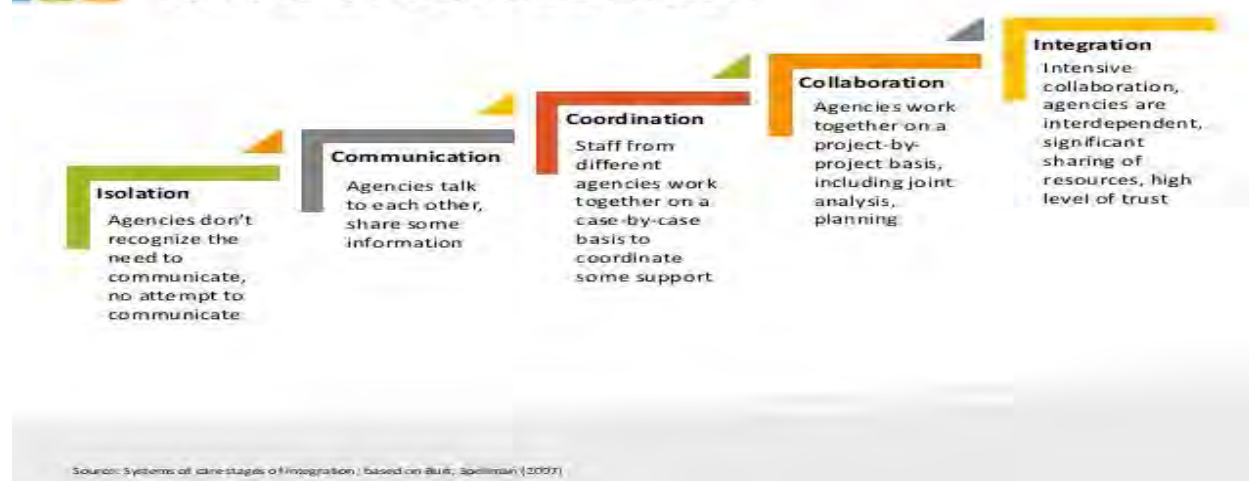Participants also outlined the following as their goals for the planning session:
- ❑ Create a clear direction for the Laredo Homeless Coalition with unified concrete goals and strategies for moving forward
- ❑ Commit to an action oriented, integrated, systemic approach with common goals and a commitment to working together
- ❑ Identify how to increase resources, better connect and build the continuum of care to include initiatives related to: mental health, affordable housing, substance use, seniors, legal advocacy, after-school support
- ❑ Build the structure than needs to be built to be successful
- ❑ Engage leaders who are part of transitions and develop leadership within the coalition
- ❑ End the criminalization and victimization of individuals who are homeless
- ❑ Create a healthy community

Current Status of the Laredo Homeless Coalition

On January 11th, 2017, the participants reviewed HUD requirements and expectations for a homeless continuum of care (see power point addendum). Participants discussed the current status of the Laredo Homeless Coalition. Based on the continuum below, no members felt the coalition is isolated, 8 felt it mostly communicates, 14 felt it reaches the coordination level, 4 believed collaboration is occurring, and one felt the coalition is integrated.

So...Are we Collaborating? Levels of Collaboration

Isolation — Agencies don't recognize the need to communicate, no attempt to communicate

Communication — Agencies talk to each other, share some information

Coordination — Staff from different agencies work together on a case-by-case basis to coordinate some support

Collaboration — Agencies work together on a project-by-project basis, including joint analysis, planning

Integration — Intensive collaboration, agencies are interdependent, significant sharing of resources, high level of trust

Source: Systems of care stages of integration, based on Burt, Spellman (2007)

Based on group discussion (5 groups), the following was identified as current functioning of the coalition:

Strengths	Challenges
❑ Collaboration and Communication among partners (3 groups) ❑ Passion/ Compassion of members (2 groups) ❑ Core partners are at the table ❑ Desire to find a solution ❑ Expertise in the group ❑ Cooperation/Share knowledge/moderate collaboration occurring ❑ History/projects already undertaken ❑ Convener ❑ Data compiler ❑ Visibility ❑ Critical issues identified ❑ Supportive public officials	❑ Lack of Funding (5) ❑ Lack of resources (detox, mental health, substance use, emergency shelter, affordable permanent housing) (4) ❑ Need to increase member participation (2) ❑ Lack of HMIS participation (2) ❑ Public safety ❑ Stereotypes ❑ Need to Adapt to change/new things ❑ Need to be inviting to new members ❑ No centralized facility for homeless resources ❑ Need resources to fund studies ❑ Data issues ❑ Need to add IT systems ❑ Lack of accountability ❑ HUD/state and federal limitations and definition of homelessness ❑ High cost of living

Resources	Opportunities
	❑ Navigating different eligibility criteria
Resources ❑ Commitment of members (2) ❑ Homeless coalition website (2) ❑ Sharing in place (2) ❑ In-kind support ❑ Limited funding is available ❑ Access to physical spaces is available ❑ Maximizing City resources and public support ❑ Knowledge and expertise of coalition members ❑ Funding from entitlement/non entitlement is available ❑ Services: Funding for medication, behavioral screenings, substance abuse treatment is available	**Opportunities** ❑ Secure new resources (2) ❑ Take advantage of parity for vulnerable populations in ACA ❑ Create a one stop village ❑ Embrace change and new ideas ❑ Establish new leadership ❑ Recommitment of members ❑ Adopt a local homeless preference ❑ Move toward integration between community organizations ❑ Implement the CoC plan ❑ Identify clear roles ❑ Take advantage of Mayoral/leadership support ❑ Take advantage of collective commitment ❑ Engage new leaders and create new relationships

Planning for the Future

Participants identified the following factors that need to be in place for the coalition to be successful:
- ❑ Committed leadership
- ❑ Paid Coordinator
- ❑ Agreed common goals, objectives, and projects
- ❑ Formal agreement/MOU among members
- ❑ Results oriented
- ❑ Attainable short-term goals
- ❑ Accountability
- ❑ Open minded and welcoming
- ❑ Honest discussion
- ❑ Public policy/Advocacy strategy
- ❑ Strong IT that can produce measurement and outcomes

Participants drafted vision and mission statements as well as an identity statement for the coalition, set goals, discussed structure, and identified leaders willing to help with next steps.

DRAFT VISION STATEMENT: *Homelessness in our community is a rare occurrence but when it does occur, there is a clear and coordinated pathway to services and universal care.*

DRAFT MISSION STATEMENT: *The Laredo Homeless Coalition provides an effective framework for addressing homelessness in our community by:*

- *Increasing knowledge and awareness of successful strategies*
- *Engaging the public, providers, policy makers, and the private sector in solutions*
- *Coordinating services and resources*
- *Building a barrier-free service system*
- *Eradicating root causes of homelessness*
- *Advocating for humane policies*

In order for the coalition to meet its goals the following must be in place:

- ❑ Individuals are identified and engaged rapidly in prevention, diversion, and homeless services
- ❑ Sufficient safe affordable housing options are available
- ❑ Economic stability and physical/behavioral health services are available
- ❑ Hunger is addressed
- ❑ A safe location is available for those who don't wish to be housed
- ❑ Support is provided from public officials and the community at large

Participants created a draft identity statement for the coalition:

The Laredo Homeless Coalition	
Advances its mission of:	*providing an effective framework for addressing homelessness in our community (DRAFT)*
By impacting	*A reduction in homelessness, hunger, and poverty; increased community engagement; and integration of homeless services*
With our customers	*Primary customers are the homeless and those at risk of homelessness/vulnerable populations; Secondary: Stakeholders and funders; and Tertiary the community at large*
With our partners	*Coalition members, other service providers, funding entities, donors, public officials, community leaders, private sector, homeless and formerly homeless*
In	*Laredo initially with plans to phase in expansion to Webb and surrounding counties once we are established*

With the following programs or services	*Coordination, integration, and navigation of services that impact the homeless: Basic needs, housing, food/hunger, transportation, mental health/substance abuse, medical/healthcare/dental, clothing, vocational training, transition out of poverty, crisis intervention, counseling, case management, financial literacy, and assistance with applying for benefits. Advocacy for humane policies and education of the public about homeless experiences, needs, and services.*
Using our competitive advantage	*Integration, commitment, passion, expertise, caring philosophy, and collaboration of LHC members. Leadership and philanthropic commitments*
And being sustainable through	*Diversifying and increasing funding as well as combining, leveraging, and integrating LHC funding and resources. Creating framework that includes: accountability, commitment, and involvement of members*

GOALS

Three Year Goal: There was consensus amongst the group that in three years the goal is to create a centralized one stop location or service village for homeless services. The village should have sustainable funding and could include:

- access to affordable housing,
- service navigation,
- vocational training
- medical/health care, including a detox facility and substance use treatment

Exact service provision will have to be determined through a planning process.

One Year Goals: Participants were asked to identify, through group discussion, one year goals. Each group was asked to identify one goal that could be completed with additional resources and one goal that could be completed without additional resources. The results are below:

One Year Goals With Resources	One Year Goals With No Additional Resources

• Fund a coordinator position (4) whose tasks include:
  ➢ Keeping coalition on track
  ➢ Assisting with a needs assessment
  ➢ Creating a navigation system
  ➢ Help identify funding opportunities
	• Implement organizational framework for the coalition establishment
	• Begin to piece together funding for one stop shop (3 year goal)
	• Market and brand the LHC
	• Create a leadership and organizational commitment to on-

• Apply for 501(c)(3) designation • Create organizational infrastructure including leadership structure • Implement a navigation system (building on COG centralized list of services) • Explore creation of a needs assessment • Identify IT framework and greater HMIS participation	going services and integrated housing and health project • Create a sustained public dialogue about homelessness • Begin to identify additional funding sources for homeless services and the coalition • Increase community engagement in homeless issues and services

STRUCTURE

Participants discussed the pros and cons of the Laredo Housing Coalition reapplying to become a 501(c)(3) nonprofit organization.

DECISION: It was agreed by consensus (all five groups agreed) that the Laredo Housing Coalition should apply to restore its 501(c)(3) status.

Below are the items that were discussed for this decision to be made.

Pro's for becoming a 501(c)(3) organization	Cons of becoming a 501(c)(3) organization
• Potential access to other funding sources/grants (5) • Would provide structure including board, bylaws, procedures, accountability for reaching goals (4) • Tax exempt status (3) • Validity/legitimacy of organizational infrastructure (3) • Include organization, community, consumer representation (2) • Transparency • Single point of contact • Road to sustainability • Qualify for insurance and other protections • Availability to do more • Increase stakeholder commitment • Hire staff • Brings coalition to the next level	• Administrative costs (3) • Increased liability (3) • Management of accountability and a new organization, including policies and procedures, staffing, tax referrals, monitoring and reporting) (3) • Less flexibility • Franchise tax • Reporting to IRS • Potential for competition for grants and funds • Need to ID if the organization would be its own fiscal agent • Requires dedicated funding • Board/stakeholder commitment and manpower • Potential lack of interest • Busy work of being a convener

Committees: Participants discussed the desire to not overcommit and keep the structure moving forward as simple as possible. Committees that could be considered moving forward include:

- ➢ **Organizational Structure Committee:** charged with forming the 501(c)(3), reviewing bylaws, identifying the role and funding for a coordinator, and identifying leadership
- ➢ **System Integration:** Committee could build on the work of the Veterans Committee and outreach committees and create flow charts for services, identify opportunities to integrate services, and identify how to better incorporate coordinated entry and HMIS.
- ➢ **Policy and Communication:** charged with both identifying and advocating for humane policies that impact homeless individuals and those at risk for homelessness and identifying messaging for the community regarding homeless issues and the coalition.

Immediate Next Steps

Jose Ceballos agreed to send out a meeting invite to the individuals who identified that they would be willing to serve in a leadership role with the renewed LHC. The first meeting will be a formation meeting to:

- ➢ Review the results of the strategic discussions
- ➢ Finalize vision and mission for the coalition
- ➢ Review and revise bylaws
- ➢ Identify leadership and structure

Mike Smith with the United Methodist Church agreed to lead the meeting. It is anticipated that this group will have its recommendations for the formation structure complete by February 28th, 2017. A subsequent meeting will be held with coalition members to review the structure as well as the results of the TAMIU report.

List of Strategic Planning Attendees

1. Dr. Hector Gonzalez, City of Laredo (Day 1 & 2)
2. Juan Rodriguez, STDC (Day 1 & 2)
3. Juan Villa II, Border Region (Day 1)
4. Jerry Alvarado, Border Region BAC (Day 1 & 2)
5. Juan Guerra, PATH/ Border Region (Day 1 & 2)
6. Jennifer Roby, VA (Day 1 & 2)
7. Melissa Ortiz, Laredo Housing Authority (Day 1 & 2)
8. Jennifer Barrientos, Laredo Housing Authority (Day 1 & 2)
9. Jesus Torres, Laredo Police (Day 1 & 2)
10. Arturo Garcia (Day 1 & 2)
11. Lyzette Shrout, Family Endeavors (Day 1 & 2)
12. Charles McDaniel, Family Endeavors (Day 1 & 2)
13. Pete Saenz, Mayor of Laredo (Day 1 & 2)
14. Karen Martinez, Casa se Misericordia, (Day1 & 2)
15. Waldo Lopez, City of Laredo Health System (Day 1 & 2)
16. Nora Murillo, United ISD (Day 1 & 2)
17. Jose Ceballos, LHC, LHA (Day 1 & 2)
18. Javier Garcia, Bethany House (Day 1 & 2)
19. Israel Reyna, Texas Rio Grande Legal Aid (Day 1)
20. Jaime Arizpe, Westcare (Day 1 & 2)
21. Mary Gaona, Bethany House (Day 1 & 2)
22. Diana Garcia, AHEC (Day 1 & 2)
23. Roxana Rivera UTHSCSA (Day 1 & 2)
24. Michael Smith, Holding (Day 1 & 2)
25. Ricardo Hinojosa, Next Step (Day 1 & 2)
26. Francis Atwell, Congressman Cuellar (Day 1 & 2)
27. Victoria Sandoval, Congressman Cuellar (Day 1 & 2)
28. Roland Gutierrez, Border Region (Day 1 & 2)
29. James Flores, Webb County (Day 1 & 2)
30. Rogelio Trevino, South Texas Workforce (Day 2)
31. Yolanda Mendoza, Laredo ISD (Day 2)

Leadership Team

1. Mary Gaona, Bethany House
2. Maria Vinegar, TAMIU Research Team
3. Nora Murillo, USID Homeless Liaison
4. Melissa Ortiz, LHA
5. Jose Ceballos, LHC, LHA
6. Jennifer Roby, VA
7. Lizette Shrout, Family Endeavors
8. Rogelio Trevino, South Texas Workforce
9. Roland Gutierrez, Border Region
10. Jerry Alvarado, Border Region
11. Charles McDaniel, Family Endeavors
12. Ricardo Hinojosa, Next Step Westcare
13. Jaime Arizpe, Westcare
14. Juan Rodriguez, STDC
15. Michael Smith, Holding
16. City Ad Hoc (person to be determined)
17. County Rep (person to be determined)

Slides from First Day of Strategic Planning Meeting

Slide 1

Laredo Homeless Coalition Strategic Discussion

January 11th, 2016

Slide 2

AGENDA

- Welcome & Introductions
- Goals for strategic planning
- **Update of TAMIU report**
- HUD CoC Expectations
- HUD areas of impact
- Discussion: Status of Laredo Homeless Coalition
- Discussion: Determination on how to Proceed

Slide 3

Ground Rules

- Mute cell phones: check at breaks
- All voices heard
- Communicate respectfully
- Be candid/speak your mind (silence = agreement)
- Debate the issue not the person
- Stay focused
- Respect confidentiality
- Have some fun

Slide 4

Goals for strategic discussion

- Review key findings from TAMIU report
- Outline HUD requirements and expectations for CoC's
- Discuss strengths, challenges, and opportunities of existing coalition
- Discuss pros and cons of becoming a a formal CoC
- Identify next steps

Slide 5

HUD GOALS

- End veteran homelessness by 2015
- End chronic homelessness by 2017
- End family and youth homelessness by 2020
- Other priority populations: Veterans ineligible for VA services and Homeless Youth, Individuals fleeing human trafficking

Slide 6

HUD Community Goals

- Decrease the number of homeless individuals
- Increase the number of beds dedicated to the chronically homeless
- Increase the percentage of individuals who remain in permanent housing
- Increase % who increase their income from employment
- Increase % who increase their income from other sources
- Increase % who obtain non-cash benefits

Slide 7

Definition of Homelessness

1. People who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, or are exiting an institution where they temporarily resided (90 days or less).

2. People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled up situation, within 14 days and lack resources or support networks to remain in housing. HUD had previously allowed people who were being displaced within 7 days to be considered homeless. The proposed regulation also describes specific documentation requirements for this category.

3. Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition;

4. Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

Slide 8

Chronically Homeless

An individual or head of household who meets the definition of "homeless individual with a disability" from the McKinney-Vento Act, as amended by the HEARTH Act and has been living in a place not meant for human habitation, in an emergency shelter, or in a safe haven for the last 12 months continuously or on at least four occasions in the last three years *where those occasions cumulatively total at least 12 months*; A break in homelessness is defined as 7 days

Slide 9

Who Is Not Considered Homeless

➢ Persons or families living in motels.

➢ Persons doubled up, living with relatives, and moving frequently.

➢ Persons living in substandard housing.

➢ Persons that are paying an excessive amount for housing.

➢ Wards of the state.

➢ Persons being discharged from an institution that is required by the State to provide or arrange for housing upon release.

Slide 10

Rates of Homelessness

➢ National Rate of Homelessness 17.7% per 10,0000 (= 452 Laredo or 477 Webb County)

➢ 2016 Laredo PIT 168 individuals identified of which 19 were considered chronically homeless (11% compared to 15% nationally)

Slide 11

Duties and Responsibilities

The duties and responsibilities for a Continuum of Care are outlined in the 2011 CoC Interim Rule

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT 24 CFR Part 578 [Docket No. FR-5476-I-01] RIN 2506-AC29 Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program

Slide 12

HUD CoC participation requirement

CoC's should include representatives from relevant organizations including :

- nonprofit homeless assistance providers,
- victim service providers,
- faith-based organizations,
- governments,
- businesses, advocates,
- public housing agencies,

- school districts,
- social service providers,
- mental health agencies,
- hospitals, universities,
- affordable housing developers,
- law enforcement, and
- organizations that serve veterans and homeless and formerly homeless individuals.

Slide 13

CoC Responsibilities

❑ Establish a Board of Directors
❑ Operate the Continuum of Care
❑ Designate and Operate a Homeless Management Information System (HMIS)
❑ Conduct Continuum of Care Planning
❑ Prepare an application for funds

Slide 14

Responsibilities of a CoC: Establish a Board

The board must:

1. Be representative of the relevant organizations and of projects serving homeless subpopulations; and
2. Include at least one homeless or formerly homeless individual.
3. comply with the conflict-of-interest requirements at § 578.95(b).

Slide 15

Responsibilities of CoC: **Operate the Continuum of Care**

❑ Hold meetings with full membership and agendas, at least semi-annually

❑ Invite people to join at least annually

❑ Adopt and follow a process to select a Board – review process at least every 5 years

❑ Appoint committee, subcommittees, and work groups

❑ Develop, follow, and annually update a governance charter

❑ Establish performance targets

❑ Evaluate project outcomes

❑ Establish and operate centralized coordinated assessment

Slide 16

Responsibilities of CoC: **Operate the Continuum of Care cont.**

Establish and consistently follow written standards for providing Continuum of Care assistance that includes: Policies and procedures for:

❑ Evaluating individuals' and families' **eligibility** for assistance

❑ **Determining and prioritizing** which eligible individuals and families will receive **transitional housing assistance**

❑ Determining and prioritizing which eligible individuals and families will receive **rapid rehousing assistance;**

❑ Determining and prioritizing which eligible individuals and families will receive **permanent supportive housing assistance**

❑ Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;

Slide 17

Responsibilities of a CoC: **Designate and Operate a Homeless Management Information System (HMIS)**

❑ Designate a single HMIS for CoC

❑ Identify an eligible HMIS lead

❑ Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.

❑ Ensure consistent participation of recipients and subrecipients in the HMIS; and

❑ Ensure the HMIS is administered in compliance with requirements prescribed by HUD.

Slide 18

Responsibilities of a CoC: Continuum of Care Planning

- ❑ **Coordinate implementation of a housing and service system**
- ❑ **Plan for and conduct, at least biennially, a point-in-time count of homeless persons within the geographic area**
- ❑ **Conduct an annual gaps analysis** of the homeless needs and services available within the geographic area;
- ❑ **Provide information required to complete the Consolidated Plan(s)** within the Continuum's geographic area;
- ❑ **Consult with State and local government Emergency Solutions Grants program recipients on the plan for allocating Emergency Solutions Grants program** funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.

Slide 19

Responsibilities of a CoC: Prepare an application for funds

- ❑ Design, operate, and follow a collaborative process for the development of applications and approve the submission of
- ❑ Establish priorities for funding projects in the geographic area;
- ❑ If more than one application will be submitted, designate an eligible applicant to be the collaborative applicant that will collect and combine the required application information from all applicants and for all projects within the geographic area that the Continuum has selected funding. The collaborative applicant will also apply for Continuum of Care planning activities. If the Continuum is an eligible applicant, it may designate itself;
- ❑ The Continuum retains all of its responsibilities, even if it designates one or more eligible applicants other than itself to apply for funds on behalf of the Continuum. This includes approving the Continuum of Care application.

Slide 20

COC Overview

Programs funded by the Continuum of Care (CoC) grant should:
- ➤ Promote community-wide commitment to the goal of ending homelessness
- ➤ Provide funding for efforts by nonprofit providers to rehouse homeless individuals and families rapidly while minimizing the trauma and dislocation caused by homelessness
- ➤ Promote access to effective use of mainstream programs
- ➤ Optimize self-sufficiency

Slide 21

COC's MAY FUND

➤**Permanent Housing** -community based housing without a designated length of stay. Includes **Permanent Supportive Housing** (PSH) (for individuals and families with a disability) and Rapid Re-housing. Does not allow for permanent housing without support services.

➤**Transitional Housing – no longer a preferred category, except for youth**

➤Supportive Services only – only if focused on Coordinated Assessment

➤Homeless Management Information System (HMIS)

➤Prevention (high performing communities only)

Slide 22

HUD AREAS of FOCUS in 2016

➤Reallocation of lower performing projects and categories, especially Transitional Housing and Services Only

➤Ranking and Rating based on objective performance criteria

➤Housing First Principles Followed

➤Homelessness Reduced

➤Resources Targeted at Those with the Highest Needs

Slide 23

Other areas of emphasis

➤Access to transportation and community amenities

➤Access to healthcare

➤Client choice

➤Coordinate entry

➤Rapid movement from transitional to permanent housing

➤Partnerships with Housing Authorities

Slide 24

For Organizations to be Eligible

➢501© 3 or government entity

➢Submit or willingness to submit data into HMIS or equivalent data management system (domestic violence only)

➢Participation or willingness to participate in Coordinated Assessment

➢Participation in Continuum of Care committee

➢Participation in annual Point in Time Count and Housing Inventory

➢Active SAM registration

➢DUNS number

Slide 25

Permanent Housing

➢Permanent Supportive Housing

➢Rapid Re-Housing

Slide 26

Permanent Supportive Housing

➢Long term community-based housing (no time limit).

➢Only for homeless persons with disabilities.

➢Programs should be designed to enable persons to live as independently as possible.

➢Supportive services are required to be offered and can be provided by the grantee or another agency.