

## Sharing the Solutions Roundtable

# Spotlighting Local Collaborations: Austin, Texas Multiagency Partnerships

### *Transcript*

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**Bill Brice:** Thank you for joining us for this conversation and panel presentation from Austin, Texas, the capital city of Texas. My name's Bill Brice. I'm the vice president of investor relations for the Downtown Austin Alliance. And here we hope that you will learn more about an interesting program model called HOST that was created here in Austin. That stands for the Homelessness Outreach Street Team, which is an interdisciplinary program to help us address homelessness here in Austin. I'm joined here today by several colleagues and panelists who will all introduce themselves here momentarily, but we're really pleased that you've joined us for this conversation and hope that this provides valuable information for you to learn about HOST, how it was started, and how the program functions and benefits the city of Austin and especially people who are experiencing homelessness in our community. We'll start with introductions from our panelists, starting with Shelly Borton from the Austin Police Department [APD]. Shelly?

**Michelle Borton:** Thanks Bill. My name is Shelly Borton. I've been with the Austin Police Department for 20 years. Five of those have been with the Homelessness Outreach Street Team that began in 2016. Prior to that, I was a community officer that worked in the downtown area, and that's kind of how I got pulled into some of the homelessness strategies that our department was trying to tackle as we approached homelessness. I did that for five years, and my previous background is in cadet training, patrol, and a few years in undercover narcotics. And that is my background.

**Brice:** Thank you, Shelly. Chief Hofmeister, if you'd like to introduce yourself, please.

**Andy Hofmeister:** Yeah, good afternoon. My name's Andy Hofmeister. I'm an assistant chief with Austin/Travis County EMS. We're the EMS provider for the city of Austin and Travis County. I oversee a number of different aspects of our department, and one of them is HOST. I oversee the paramedics and EMTs that are on our community health paramedic team, and several of those team members are assigned to HOST and working with the HOST team. Their primary role is to provide medical care and assistance there. I've been with our department for coming up on 20 years and worked in a variety of different areas, but I've been working in this capacity along with the Austin Police Department and the Downtown Austin Community Court, Integral Care, all of the partners you see here, Downtown Austin Alliance, for the last five years, since the beginning of HOST. So, happy to be here.

**Brice:** Thanks, Chief. And next we have Daniel Rossi from our behavioral health provider, Integral Care. Daniel?

**Daniel Rossi:** Thank you, Bill. My name is Daniel Rossi. I'm the peer on board, which means I come with lived experience. It's like, I could tell you all day how an apple tastes, but if you've tasted one, you know how juicy it is, how flavorful it is. So I get to share the experience that, coming to Austin, twisting my ankle, becoming houseless, and learning how to navigate the system, I can now help and assist other people. So I'm the peer on board.

**Brice:** Thanks Daniel. And Peter Valdez, Court Administrator from Downtown Austin Community Court. Pete?

**Peter Valdez:** Hello, I am Peter Valdez and I am, as Bill said, the Court Administrator for the Downtown Austin Community Court. I'm also a licensed master's level social worker and I've been with the court for 21 years, August 1. I came to the court as a case manager and did that for a few years before I took on supervisory duties. And, again, now the director of the organization.

**Brice:** Thank you, Pete. And again, I'm Bill Brice. My title is Vice President of Investor Relations with Downtown Austin Alliance. I've been with the organization almost 18 years, and I've worked with the others who are on this panel and their organizations for that entire time on issues of public safety, but particularly homelessness. I had a role in helping to create the Homeless Outreach Street Team by bringing together the key partners that you have on the screen here today, along with other community partners, and was sort of a convener that started this program back in 2016, it launched June 1 as a pilot and has remained in effect ever since. And so I'm really pleased to be on this panel today with my colleagues who really helped to get something great off the ground that's now in its, well, I guess going into its sixth year. So Chief Hofmeister and Shelly, if you could begin by sharing with us how your teams got started in this program and the mission, we'd sure appreciate hearing from you about that and how this all began, please.

**Borton:** Okay, I'll go ahead and start, Chief Hofmeister, if that's okay. So as I mentioned, I was basically a community liaison downtown as an officer within the downtown business district. So if you think of downtown as kind of a homeowner's association, but the business owners is the majority of the people that you deal with and handle complaints, short term solutions, long term solutions, I did that for a long time. And, in doing so, became very familiar with a lot of the homeless population. At the time, in 2016,

we had a commander that was trying to problem-solve different ways to address the homeless issues that we were dealing with. He had heard about a program in Houston, it was called the HOT team, through the Houston police department. And he asked myself and another officer to go down there and kind of see what they were doing. And then when we came back, we kind of explained to him what we saw and what we thought and decided to give it a shot and do kind of a pilot program.

**Borton:** In doing so, we knew that we needed to partner with Integral Care, the mental health authority in Travis County. And then my sergeant at the time came up with an interesting idea and approach that I think is unique and a very important piece of the puzzle, and she reached out to EMS and Chief Hofmeister because of their community health paramedics, and it just seemed to be a very natural fit. So in doing so, we kind of threw a team together with Downtown Community Court, since they handle a lot of the class C citations and those kind of issues that go through community court, kind of threw a team together and just decided, let's do a 90-day pilot program and see what happens.

**Borton:** So we literally just met up, teamed up, and went out and started to talk to homeless people on the street. And 90 days has turned into five years and two months. So, obviously it didn't come without struggles or things that we still try to tackle and struggle with, is just the dynamics of having so many different teams involved, documentation, how you handle all those things, how you work together. So that's kind of a short answer to that, how it all began and Chief Hofmeister, I'm sure, can fill in the gaps.

**Hofmeister:** Yeah, actually, Shelly, you nailed it. So APD, along with the Downtown Austin Alliance and others, had been exploring this particular idea. At the same time, kind of in simultaneously happening, we were building up and had several of our community health paramedics assigned and working in this space around homelessness. The community health paramedic team is a team of paramedics that aren't regularly assigned to an ambulance; their primary role is to work with those that have struggles in relation to healthcare and medical issues that cause them to frequently utilize emergency services. So we all knew each other to some extent or another; however, our team, things in some ways were siloed, right? So when Shelly's sergeant approached me and asked, "Hey, what, what do you think about dedicating a person to this particular effort that could work with the team," that felt like a very natural fit.

**Hofmeister:** So we assigned one of our paramedics that was really very passionate about homelessness and working with those that are experiencing homelessness to the team. And at the same time, Bill Brice, and others, and some of our council members provided that support in convening the group and really supporting the idea. And so we kind of jumped on board, and I can remember there was a day where it was literally almost like, "Well, let's take those individuals that you have working in that particular space, and let's put them in a room and have them start working together and try to achieve these certain goals." So we did, and I think, like Shelly mentioned, what we thought was going to be maybe just a 90-day pilot and were interested to see what happened has become a going-on-six-year social experiment, if you will. So it's been a wild ride. It's been incredible.

**Brice:** Thank you, Chief and Shelly, both. You know, it's interesting, hearing your comments causes me to reflect on how this came together back in 2016, and Shelly's right. We had seen the model in Houston,

the HOT team, which is really mostly just police officers working in a special manner to address people experiencing homelessness and direct them to services and housing. And as we looked at other models around the country and then looked around the table in Austin to see who are the partners that we have, who are the partners that we need, in the large part, it was a matter of, we have a lot of resources, how can we repurpose resources to work differently and more creatively to create something new and take a different approach? And this really wouldn't have happened without the full support of the EMS, of Community Court, of APD, and Integral Care, all working together.

**Brice:** And, it all came, our first meeting that year was April 15. And by June 1 we had a pilot on the ground operating. It was really remarkable how quickly this came together. And again, that was only due to the support of all the different partners working together. I'd like to ask Pete, if you could describe for us the role the community court plays in this equation, in terms of homelessness, outreach, diversion, your interaction with the people that are on the street experiencing homelessness and the role of the court in this program. Pete?

**Valdez:** Absolutely. Because, through our experience, as it relates to the court processes, we recognized early on that a lot of the individuals that were cycling through our court processes were individuals experiencing homelessness. Because of that, we had wanted to do outreach for a long time. We thought that outreach would help us develop those positive working relationships with these individuals and would help us develop the rapport that was necessary for them to voluntarily come in and ask for services, as opposed to them getting arrested or receiving citations, and then us having to engage them at that point. We felt it would be a lot more effective for us to proactively outreach as opposed to, again, reactively engaging them when they were under arrest or coming in because they received new citations. So when this opportunity came up for us to be part of the Homeless Outreach Street Team, we looked at it from two perspectives.

**Valdez:** One was to participate in the outreach. So we would designate one of our case managers as part of the outreach street team, again, to help develop that relationship with the individuals experiencing homelessness, to give us, or rather to give the individuals experiencing homelessness, a better idea of the services that we provide and really focus on getting them to trust us and so that they would come in and voluntarily ask for services. So we did, we designated one of our intensive case managers to the Homeless Outreach Street Team, and that person has changed a couple of times, but we continue to support that position on the HOST team, because we recognize the importance of that rapport-building as it relates to individuals experiencing homelessness.

**Valdez:** The other piece of the question in regards to diversion is really associated with the other components of what we do at the Community Court.

**Valdez:** Firstly, regarding the court processes, the judge and the prosecutor that are assigned to our court really focus on alternative sanctions and alternative methods for offering individuals the opportunities to address their cases without having to pay fines or without being punished. In other words, utilizing those charges and motivating them through those charges to accept our services once again. And so the judge will get really creative about some of the alternative sanctions that he offers. So

for some people that don't want to agree to working with a case manager, he may agree to allowing them to conduct a community assessment for housing and give them credit for the time they spent doing that community assessment toward the fine that they owe, because they did not want to engage in case management. They will also have the opportunity to do community service if that's what they want to do to address their case.

**Valdez:** But ultimately the most effective and productive way to divert these individuals is to offer them a way to work toward their long-term stability. And that's really directly connected to our intensive case management program, the wraparound services that they provide to include linkages to housing, because we are able to pay for some of the housing that we offer. And we also connect individuals to housing that is part of the community's efforts for housing.

**Brice:** Thanks, Pete; dovetailing off of what Pete was talking about, our Community Court sees all class C non-traffic misdemeanor cases that occur in the downtown area in Austin. And the fact of the matter is, majority of their clients, their frequent offender clients, are people experiencing homelessness. And the failure to appear rate, the rate at which people fail to show up for their court appointments, is extremely high—Pete could tell you exactly—but I think it's somewhere in the high eighties to 90 percent range. And the fact that Community Court, since this program started, has a case worker represented on the team and is able to go outside of the office, actually working the streets in tandem alongside EMS, Integral Care, and APD, is a way to reach out to people, get them into the court, begin to work with them, to engage them in services.

**Brice:** And as Pete spoke to a small degree, at least in his comments, Community Court has a lot of resources they can offer people in terms of case management, other treatment and services, including housing, to help get them off the street, or at least hopefully on a faster pathway to resolving their homelessness and reoffending behavior, reducing their recidivism.

**Brice:** But EMS has also been a really important part of this team—and I didn't realize it until after this program had begun, but EMS probably brings, I think, one of the greatest opportunities and advantages to this program, being part of the interdisciplinary team and bringing a service to people on the street that I think is so important in helping to get people to open up and engage. And I'd like to ask Chief Hofmeister to speak to this in terms of EMS's role in this partnership.

**Brice:** But I often use this example when I talk about our HOST program and having EMS involved. For those of you that are familiar with people experiencing homelessness and chronic homelessness, I use this example a lot: They almost always have chronic foot problems. And if there is an EMT on the street trying to engage with someone, you may have a police officer present, and you may have a case worker from Community Court or Integral Care present, but if that EMT can get that person one degree of comfort by saying, "How about if I help you fix your feet, let's get you feeling better." The trust that establishes, the way that helps people open up, and it's a lot more than just that, that's just an example that I use because it is such a frequent occurrence with people on the street. I think EMS really plays a critical role in this equation in getting people to engage.

**Brice:** So, Chief, if you'd like to speak more about the role that your team plays, how you partner and help improve the wellness of the clients, and how you see that being integral to this equation, I'd sure appreciate you talking about that.

**Hofmeister:** Sure. So I think it's absolutely been very successful in terms of a way to engage an individual that's experiencing homelessness. Our paramedics and EMTs, what we expect is, is that they bring the medical expertise of at least trying to fix or identify what the issues are for the person at that particular time. And this population oftentimes comes with a lot of different medical needs or longer-term medical needs. And so the paramedic and EMT aren't necessarily there to provide long term medical support and case management as much as they are to identify what the immediate needs are. If it happens to be, like Bill had mentioned, maybe a foot problem, it could be due to diabetes and other issues; it could also be a mixture of substance use, mental health, it could be a number of different things, and there could be issues with heart disease or chronic high blood pressure, those types of things.

**Hofmeister:** And so for us, being able to at least identify what situations warrant emergency-level care versus non-emergent care. And then we have a very close relationship with our local community clinic, Community Care, here in Austin. And they have a street med team that specializes in providing care to this particular population. And so they serve a large area, but our relationship has helped us leverage their expertise and bringing it into the area that HOST serves. And so, once we're able to connect those individuals with the right resource, we try to kind of either, one, support that particular resource, or go hands-off and move on to the next individual that we can. These individuals, there are a myriad of different issues, and they're very complex. We are certainly not ones to fix all of the particular issues, but if we can use our expertise and the skills and the different tools that we have available, we can, one, I think just help people feel a little bit better while they're living on the streets, and we can try to get them connected to the right resource.

**Hofmeister:** And that does make a big difference when you're able to actually do something for somebody right then and there, as opposed to telling them, "Oh, we need you to show up at this clinic at this address in two weeks at 9:00 a.m." And that just doesn't work. So we like to kind of think of ourselves as we actually bring health care to the person, as opposed to making them kind of fit, or trying to shove them into the mold that we have in place in terms of brick and mortar services.

**Hofmeister:** So I think it has really helped. And my hope is that our expertise and the care and the relationship we're able to build for medical issues can help people like the case managers that engage with that individual and carry them beyond that, or link them up with Integral Care and people like Daniel so that he or others can take them and move them to other levels of care or whatever the case may be. So, that's what we think we bring to the table.

**Brice:** Thank you for that, Chief. You know, as Chief Hofmeister was speaking there, it reminded me that this program was always intended to be out there trying to get in front of a crisis from occurring, address people on the street before the crisis occurs, before the 911 call is made. And while Chief talked about some of the things that EMS and some of the other partners do to perhaps help a person feel better, get to maybe a little bit better place, they are not necessarily there to solve all the problems, but to also be a

conduit, to connect people with the services and help that they need, but also to identify where some of the roadblocks are with that.

**Brice:** We also recognize that a peer approach is a really important way to help us get through to folks on the street that need our help. And Daniel Rossi came to the program a few years after it started, but we recognized the importance of this peer leadership approach. And Daniel, if you could speak to how this approach helps us better serve, better approach, better serve the needs of folks on the street, and your role on behalf of Integral Care in this equation, we sure appreciate you sharing that with the audience.

**Rossi:** So I've been on the team around three years. If you look back about 14 years ago, I was houseless again for the second time. I was houseless as a child. But coming to Austin, I twisted my ankle and couldn't work and became houseless.

**Rossi:** And the scene is a lot different. Having the HOST team and having experts coming to us, as a peer I have lived experience. So as someone said, I talk like them. So it kind of helps break down some of those, say, walls and barriers for communication. Also, helping and walking with people through and navigating and being able to be on the HOST team and be able to call an expert in, if that's EMS or someone from Downtown Court or law enforcement, we really do work as a team.

**Rossi:** It's not always peaches and cream, and we're kind of like a family on the HOST team. We have our struggles but we're there for each other. I get to stand on the people that came before me and the people on this panel that put HOST together, because it's definitely, in my experience, a totally different scene from when I was houseless. We're able to solve or walk through some of those beginning challenges or where people have fallen off.

**Rossi:** And what I get to do is really get to share, sometimes my experience, but also just be there when someone's walking through some of it. And at times it can be like hot potato and trying to navigate the system as much as they are and expressing my frustration with the system, but we get to work together and get it solved or onto that next stage.

**Brice:** Thank you, Daniel. You know, I don't think that we can overstate the importance of peer leadership on the team. Imagine being homeless on the street and being approached by a police officer and perhaps accompanied by a case worker and an EMT saying, "We're here to help you." Oftentimes people on the street were approached by a person in uniform or thinking that there's enforcement coming down upon them, and having that peer leadership, the person that has walked in their shoes, and, again, can help to build that level of trust with people on the street is really important and is really what this is about. How can we build those trusting relationships, where people are more and more willing to open up and work with us to get the help and services that they need?

**Brice:** And so Daniel, we sure appreciate what you and Integral Care bring to the team, not only in terms of you and your personnel being on the street, but the other resources that you provide in terms of treatment and housing, and there are many. So thank you for being part of the team and for sharing your perspectives and peer leadership with us. Thanks.

**Valdez:** To that end, Bill, hearing the team talk about our partnership and including different perspectives and expertise shows us just how far we have come as a community. You have had a unique vantage point throughout the years at the Alliance. Could you share with the audience some lessons learned and recommendations on how to gather partners around the table for a common mission to support this population?

**Brice:** Thanks, Pete. You know, it is really interesting, and as we were preparing this panel presentation, it really gave me an opportunity and cause to pause and reflect on how this program came together. Having been involved in this work alongside of all the others on the panel for as long as I have, it was clear to us back in 2016 we needed a different approach. Something had to change. What we'd been trying up to then hadn't been working. We also recognized that there is certainly no silver bullet, as they say, that we weren't unrealistic that HOST was going to solve all of our problems, but if it could simply reduce crises from occurring, 911 calls from happening—the usual response, it's either police or EMS or both go out to address a call, and the person oftentimes is left there in the same condition that they were right before the crisis occurred. We needed a new approach and new partners to think and work differently.

**Brice:** And so, I think from our perspective and that of the member property owners of the Downtown Austin Alliance, we support the fact that different approaches are needed. And this one is rather unique in its approach, trying to get in front of the 911 call and the crises from occurring. And we still have people having behavioral health breakdowns, or physical health issues on the streets. But we know that we're also helping a lot of people. We also know that our system has a lot of barriers to entry. Maybe there isn't capacity in the shelter, people can't access the behavioral healthcare services that they need or physical healthcare services that they need, even when they want and have said to our officials who want these services. A lot of people in Community Court, there's over a 230-person waiting list today of people who have told their court case workers they want behavioral healthcare services, but there's been no access to that.

**Brice:** We've now created yet another new program that we're testing right now to provide a direct line to behavioral healthcare and physical healthcare services that is housing focus to help get people in the system, help them resolve their homelessness, and hopefully to do so faster. I think that I would say in terms of recommendations, every city has an organization like the Downtown Austin Alliance. We are the management entity for a public improvement district; whether it's public improvement districts or business improvement districts, every city around the country, most, large and small, have organizations like ours that people can partner with to try and do things differently. We have the opportunity and the ability to advocate for testing new initiatives, doing things differently. We can do, in some cases, what the city staff that work for Community Court, EMS, APD, cannot do in terms of advocating the way that they'd like to, for new programs or for funding.

**Brice:** And so for an organization like the Downtown Austin Alliance to go to city council and advocate for the creation of a new pilot program that requires funding support in order to get it up and running, we are able to do that and advocate in ways that the staff necessarily cannot. And so we play a critical role of sort of that pivotal role, one, as the convener in this case. I mean, I approached the commander back



in 2016 and Shelly was at the table for this meeting. And I said, "Commander, if you allow me to insert myself"—and that's exactly how I put it—"I will convene the partners to try and get this program off the ground." He said, "Go for it." That's when I began to approach Chief Hofmeister, Integral Care, and others, and this is how it's come together today.

**Brice:** But it also, beyond convening the leaders of those departments, then took advocacy to city council to say, "Okay, this needs funding, where are we going to get it? We need you to help support it and allocate the funding for it." And our organization for the first year and a half of the program even donated office space to provide a base operation hub for the team to function out of until new space opened up for them—that is in our Sobering Center here in downtown Austin. And that was something else that we saw and learned in Houston. The Sobering Center in Houston is co-located with the Houston HOT team. We wanted our Sobering Center and HOST team to be co-located. And so while they were on almost separate but similar tracks moving forward to be created, they are now located in the same facility, similar as to how that works in Houston, knowing that a lot of people that come through the Sobering Center are people that HOST is interfacing with.

**Brice:** And so our role is to try and advocate, convene, make those connections, try to help test new initiatives, bring new ideas to the table and bring partners together. So I would suggest that, for those of you on the call that might represent community courts or other perhaps city agencies or county agencies, I'd highly recommend you look for the organization like ours in your community to see how you can partner together, because I think you'll find a willing partner that can be a lot of help to you to get things like this off the ground. Thanks, Pete.

**Brice:** So I'd like to ask each of you what recommendations you might have for the audience. Shelly, Andy, Pete, Daniel, we'll start with Shelly, but Shelly, based on the history of getting HOST up and running, you having been part of it for as long as you have, what recommendations might you have for the audience that might be helpful to them?

**Borton:** I would try to get creative, look at your city, look around and see what's unique about what's available to you. I think you can't add too many different entities. I think you have to have the right ones for whatever works for your specific setup. But getting creative I think is what I think the key is and kind of knowing what's out there. I think I had just started to hear about the community health paramedics when HOST became an idea, and the fact that we had someone that thought, "Man, that seems like a good idea." And Bill, you talked about it specifically, but it is a key role in what we do. Like you said, there's a lot of times when people see a police officer, they see a social worker, eh, you know, there's hesitation because of previous experiences, but you can't be mad at someone that's there to provide you medical help.

**Borton:** And that always is a gateway into trust and willingness next time. It may not be immediately, but they'll remember that. And it's crucial. It's crucial in a lot of what we do, because I deal with it myself. There's no secret there that people see me, they may not know me from previous experiences, but they see the uniform. And a lot of times I will say, "Mm, let's see if there's anything that we can do for this person medically." And I think that is something that's very unique and I would highly recommend that

aspect if there's anybody out there that's looking for that, or if they have that resource available to them to use it.

**Brice:** Thank you, Shelly. Chief Hofmeister, what say you about the way that people might look to this as far as how we created the program, what you've seen through its operation? What recommendations would you have for the audience, please?

**Hofmeister:** Yeah, so I would definitely echo what Shelly mentioned, which is explore what resources are out there. You might have to look for those champions within the different organizations that are willing to listen. As I say, I love it. I always love a good, crazy idea, and very rarely will I turn it down. And so you have to find those that are willing to listen and talk to them. You do have to find folks that are able or willing to dedicate the resources, agencies and different providers that work in this space. It's not like these agencies are well-resourced and they just have lots of people waiting and easy to dispatch and deploy to different areas, but try to find those that are willing to at least talk, be creative on how you staff some of those things. For us, we're lucky. I have folks that are assigned and that's their entire role. There might be ways of getting something where you can dedicate part of a person's time or something like that.

**Hofmeister:** I think another thing that comes to mind too starting out is, it's important to start small and grow and try to scale up as much as you can. This is an extraordinarily challenging area to work in. For an instance, the city of Austin, if we were to say, Oh, this team that consists of six to ten people, depending on if you look at people that are in the room or all the services that support them, trying to serve the entire area that the city of Austin covers, you're going to burn some people out and it's going to be really difficult to do. But if you start in a smaller area with a very clear vision of what you want to set out to achieve, and everybody knows kind of what their roles are, but there's enough overlap between the roles to kind of hold space until you can get the right resource or the kind of the content expert involved. It's really important. It's very, very important.

**Hofmeister:** So I would just, one, look for those champions that are willing to hear out the idea, make sure that you start small and scale up. If you're able to achieve the results you want and setting out with a pretty clear idea of what you're trying to achieve, it doesn't have to be perfect at the beginning, but setting the tone for what those folks do, because they're going to get into situations where they have to make a decision, and it's never written in policy and how they manage those situations. So they need a general idea of what they're trying to achieve. So those are the things that I would recommend.

**Brice:** Thanks so much for sharing that. And you know, you remind me of a couple of important points, but one I'd like to emphasize is your comment about starting small. Certainly our panelists recognize the fact that when we started this back in 2016 it was focused only on the downtown area, the area that is encompassed by both Community Court's jurisdiction, but also the jurisdiction of the Downtown Austin Alliance with the downtown public improvement district. But what was really important in terms of the reasoning behind that is that we recognized in our jurisdictions, Community Court and Downtown Austin Alliance, we have one-third of the number of people in the city of Austin and Travis County that are

experiencing unsheltered homelessness in our jurisdiction. So it really makes sense to start the program here, to centralize it here and to test it here, before we try to go too big.

**Brice:** And I can tell you when the program first started and this conversation was going around City Council, every council member said, "How do I get HOST here? How do I get HOST in my district?" And so it quickly became I think almost bigger than life, but starting small, I really think was key to this.

**Brice:** And so I think that also looking at resources and how you repurpose existing resources to kind of stretch the dollar farther without saying, "Gosh, if we try this, we've got to add staff here, add staff here." That's a good way to test this, to see is it a matter of simply repurposing resources? Well, what additional resources do you really need? And the additional resources may be on the service side, not necessarily the frontline team side of it.

**Brice:** Daniel from the Integral Care side, what suggestions might you have for the audience in terms of the program and what they can learn from trying to get one started up, perhaps?

**Rossi:** I would say, really look at the champions you already have in place. Like I think Shelly, looking back when I was houseless, and the dignity and respect that she gave everyone really opened up the door for me and shifted my life, as I've said before. Every community has their different champions. I think EMS is definitely important, bringing in our different partners and communication between our team as well as the people that we're serving is really important.

**Brice:** Thanks so much. Pete, what would you have to share in terms of lessons learned and recommendations for the audience, please?

**Valdez:** Yeah, so I'd like to begin by highlighting the importance of transparency and really, really making sure that you're communicating, not only what you can accomplish as a team, but also what your limitations are. Because those are the things that your supporters need to hear, both because you will set realistic expectations, but also because that speaks to your needs as well. If they're wanting you to grow, then they need to know what your needs are. So I think that's important.

**Valdez:** I think it's also really important to collect really meaningful data, and data that's going to tell the story about, again, not only what you need, but what you're accomplishing, so that your stakeholders can continue to support you. And hopefully through the years, you're going to continue growing because of that evidence that you're presenting.

**Valdez:** And then lastly, I think it's really important that we continue to honor the feedback and the ideas of people with lived experience because they are essentially the experts and we should make sure that we honor them for that and that we hear them out and that we apply those things that they say we should be doing.

**Brice:** Thank you, Pete. You know, I'll share just from my own perspective, reflecting in my recommendations for the audience. You know, to me, there's a couple of things from where I sit that were critically important in creating HOST, the Homeless Outreach Street Team, and one is relationships. And as we've talked about on this call, this group, we've worked together. Our agencies and

organizations have worked together for many, many years. By virtue of that, we had an established level of trust between us. We also had common objectives. The common objective here was, how do we better address the needs of people experiencing homelessness that are having crises on our streets? And while our motivations for wanting that goal to be achieved might be very different, the goal of our property owners, just not wanting to have problems, not wanting to have crime, not wanting to see people experiencing homelessness on the street, right or wrong, the motivation was less important than the desire to have that common goal.

**Brice:** And so I think the relationships and building trust among the agencies and partners is critically important. We were fortunate here where I and these partner agencies had relationships established for a long period of time where, when we decided we wanted to step off and test this initiative, we were able to quickly ramp up and make that happen. So I think relationships, trust, and having common goals is really important, regardless of whether the motivations of the different partners align for the reason that they want to achieve those goals.

**Brice:** And so with all of that, I really would like to thank all of our panelists, Pete, Chief Hofmeister, Daniel, Shelly, you've all been great partners and are really, really important, critical, to the success of this program. To our audience, we certainly hope that this might be helpful in giving you new ideas to try and approach things differently, repurpose resources, test new initiatives, and address problems in your communities in ways that you have not tried yet. And we certainly hope that this just has been a great benefit to all involved. And we'd look forward to talking more with you about this, hopefully in the future. Thank you.